Models and Theories of Nursing

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Sr. Margaret Ruddy
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MODELS AND THEORIES OF NURSING

“Nursing theories and models provide information about:
1. Definitions of nursing and nursing practice
2. Principles that form the basis for practice
3. Goals and functions of nursing”


The following bibliography attempts to identify some of the sources of information for many of the major nursing theories/theorists. Checking the bibliographies in these publications will lead to additional books and articles on these nursing theorists. Most of these sources can be found in the Cardinal Stritch University Library or the libraries of the SWITCH consortium. The quoted description of the various models is taken from the following publication:


GRAND NURSING THEORIES


Faye Glenn Abdellah 1919-
Twenty-One Nursing Problems

“Although Abdellah spoke of the patient-centered approaches, she wrote of nurses identifying and solving specific problems. This identification and classification of problems was called the typology of 21 nursing problems. Abdellah's typology was divided into three areas: (1) the physical, sociological, and emotional needs of the patient; (2) the types of interpersonal relationships between the nurse and the patient; and (3) the common elements of patient care. Abdellah and her colleagues thought the typology would provide a method to evaluate a student's experiences and also a method to evaluate a nurse's competency based on outcome measures.” (Tomey & Alligood, *Nursing theorists and their work* 4th ed., p. 115).

Abdellah’s Typology of 21 Nursing Problems:

1. To promote good hygiene and physical comfort
2. To promote optimal activity, exercise, rest, and sleep
3. To promote safety through prevention of accidents, injury, or other trauma and through the prevention of the spread of infection
4. To maintain good body mechanics and prevent and correct deformities
5. To facilitate the maintenance of a supply of oxygen to all body cells
6. To facilitate the maintenance of nutrition of all body cells
7. To facilitate the maintenance of elimination
8. To facilitate the maintenance of fluid and electrolyte balance
9. To recognize the physiologic responses of the body to disease conditions
10. To facilitate the maintenance of regulatory mechanisms and functions
11. To facilitate the maintenance of sensory function
12. To identify and accept positive and negative expressions, feelings, and reactions
13. To identify and accept the interrelatedness of emotions and organic illness
14. To facilitate the maintenance of effective verbal and nonverbal communication
15. To promote the development of productive interpersonal relationships
16. To facilitate progress toward achievement of personal spiritual goals
17. To create and maintain a therapeutic environment
18. To facilitate awareness of self as an individual with varying physical, emotional, and developmental needs
19. To accept the optimum possible goals in light of physical and emotional limitations
20. To use community resources as an aid in resolving problems arising from illness
21. To understand the role of social problems as influencing factors in the cause of illness


**Patricia Benner**

**Novice to Expert Model**


Anne Boykin and Sarvina O. Schoenhofer

Nursing As Caring

The theory of Nursing As Caring is a general or grand nursing theory that can be used as a framework to guide nursing practice. The theory is grounded in several key assumptions:

1. persons are caring by virtue of their humanness
2. persons live their caring moment to moment
3. persons are whole or complete in the moment
4. personhood is living life grounded in caring
5. personhood is enhanced through participating in nurturing relationships with caring others
6. nursing is both a discipline and a profession (Boykin & Schoenhofer, 2001, p.11).
The most basic premise of the theory is that all humans are caring persons, that to be human is to be called to live one’s innate caring nature. Developing the full potential of expressing caring is an ideal and for practical purposes, is a lifelong process. (Extract taken from: Nursing As Caring - A Brief Overview of The Theory of Nursing As Caring Boykin & Schoenhofer)


Joyce J. Fitzpatrick 1944-

**Rhythm Model**

The four content concepts that comprise Fitzpatrick’s theory are person, health, wellness-illness and metaparadigm.


Lydia Eloise Hall 1906-1969

**Core, Care, and Cure Model**


Virginia Avernal Henderson  1897-1996
Definition of Nursing

Henderson defined nursing in functional terms: “The unique function of the nurse is to assist the individual, sick or well, in the performance of those activities contributing to health or its recovery (or to a peaceful death) that he would perform unaided if he had the necessary strength, will or knowledge. And to do this in such a way as to help him gain independence as rapidly as possible.”  Tomey, A. M., & Alligood, M. R. (1998).  Nursing theorists and their work (p. 102). St. Louis: Mosby.


**Dorothy Johnson 1919-1999**

**Behavioral System Model**

“Johnson’s model focuses on a behavioral system (the patient), its subsystems, and its environment.” Polit & Henderson p. 102


Imogene King

General System’s Framework

“King’s conceptual model includes three types of dynamic, interacting systems: personal systems (represented by individuals), interpersonal systems (represented by such dyadic interactions as nurse-patient dialogue), and social systems (represented by larger institutions such as hospitals and families).” Polit & Henderson p. 102


Katharine Kolcaba 1944-
Theory of Comfort
Holistic comfort is defined as the immediate experience of being strengthened through having the needs for relief, ease, and transcendence met in four contexts of experience (physical, psychospiritual, social, and environmental)


http://www.thecomfortline.com

**Madeleine Leininger 1925-**

**Cultural Care: Diversity and Universality**


Leininger, M. (1971). This I believe...about interdisciplinary health education for the future. *Nursing Outlook, 19*(11), 787-791.


http://www.tcns.org/

**Myra Estrin Levine 1920-1996**

**Conservation Model**

“Levine’s model focuses on individuals as holistic beings, and the major area of concern for nurses in maintenance of a person’s wholeness.” Polit & Henderson p. 10  Defined nursing as supportive & therapeutic interventions based on scientific or therapeutic knowledge. Nursing actions based on four principles: conservation of energy, structural integrity, personal integrity, & social integrity.


Ramona T. Mercer  
Maternal Role Attainment


**Betty Neuman 1924-**

**Systems Model**

“Neuman’s model focuses on the person as a complete system, the subparts of which are interrelated physiological, psychological, sociocultural, spiritual, and developmental factors.” Polit & Henderson p. 103

The Neuman Systems Model is a unique, systems-based perspective that provides a unifying focus for approaching a wide range of nursing concerns. The Neuman Systems Model is a comprehensive guide for nursing practice, research, education, and administration that is open to creative implementation...(and) has the potential for unifying various health-related theories, clarifying the relationships of variables in nursing care and role definitions at various levels of nursing practice. The multidimensionality and wholistic systemic perspective of the Neuman Systems Model is increasingly demonstrating its relevance and reliability in a wide variety of clinical and educational settings throughout the world. (from *The Neuman systems model* 2002, Chapter one)


Margaret Newman 1933-
Theory of Health as Expanding Consciousness

The theory of health as expanding consciousness stems from Rogers’ theory of unitary human beings. Rogers’ assumptions regarding patterning of persons in interaction with the environment are basic to the view that consciousness is a manifestation of an evolving pattern of person-environment interaction.

Consciousness is defined as the informational capacity of the system (in this case, the human being); that is, the ability of the system to interact with the environment (Bentov, 1978). Consciousness includes not only the cognitive and affective awareness normally associated with consciousness, but also the interconnectedness of the entire living system, which includes physiochemical maintenance and growth processes as well as the immune system. This pattern of information, which is the consciousness of the system, is part of a larger, undivided pattern of an expanding universe. (Extract from: Overview of Health As Expanding Consciousness by Margaret A. Newman)


**Florence Nightingale 1820-1910**  
**Environmental Adaptation Theory**


Dorothea Orem 1914-
Self-Care Framework

“Orem’s model focuses on each individual’s ability to perform self-care, defined as ‘the practice of activities that individuals initiate and perform on their own behalf in maintaining life, health, and well-being.’” (Polit & Henderson p. 103). The basic premise of the model is that individuals can take responsibility for their health and the health of others. In a general sense, individuals have the capacity to care for themselves or their dependents.


Ida Jean Orlando 1926-
Theory of the Nursing Process Discipline

Orlando's theory was developed in the late 1950s from observations she recorded between a nurse and patient. Despite her efforts, she was only able to categorize the records as "good" or "bad" nursing. It then dawned on her that both the formulations for "good" and "bad" nursing were contained in the records. From these observations she formulated the deliberative nursing process. The role of the nurse is to find out and meet the patient's immediate need for help. The patient's presenting behavior may be a plea for help, however, the help needed may not be what it appears to be. Therefore, nurses need to use their perception, thoughts about the perception, or the feeling engendered from their thoughts to explore with patients the meaning of their behavior. This process helps the nurse find out the nature of the distress and what help the patient needs. Orlando's theory remains one the of the most effective practice theories available.

(Extract from: Ida Jean Orlando’s Nursing Process Theory Site by Dr Norma Jean Schmieding. University of Rhode Island College of Nursing)


**Rosemarie Parse**  
**Theory of Human Becoming**

“Parse’s model views a human being as an open system freely able to choose from among a series of options in giving meaning to a situation.” (Polit & Henderson p. 103).


Nola J. Pender 1941-
Health Promotion Model
This model is a heuristic device that encourages scholars to look integratively at variables that have been shown to impact health behavior. The HPM synthesizes research findings from nursing, psychology and public health into an explanatory model of health behavior that still must undergo further testing. Multiple variable models are needed to explain human health behavior.

The various health promotion strategies and tools that Dr. Pender have developed and presented in the three editions of Health Promotion in Nursing Practice as well as the undergirding HPM model can be used as a basis for structuring nursing protocols and interventions. Nurses in practice should focus on understanding and addressing variables that are most predictive of given health behaviors. (Extracts taken from: Nola J. Pender Website/FAQ)


Hildegard Peplau 1909-1999
Theory of Interpersonal Relations


**Nancy Roper 1918-2004**

Winifred W. Logan & Alison J. Tierney

**The Elements of Nursing: A Model for Nursing Based on a Model of Living**

This model incorporates a life span approach, wherein the characteristics of the person are considered with respect to prior development, current level of development, and likely future development (Safarino, 1990). In conjunction with the life span approach an independence/dependence continuum is used. The model then incorporates a set of twelve activities of living (AL’s), which represent those activities engaged in by individuals whether sick or well. Together these elements are referred to as "a model of living". When using the model of living in conjunction with the nursing process a model of nursing is utilised. The AL’s are as follows:
1. Maintaining a safe environment
2. Breathing
3. Communicating
4. Mobilizing
5. Eating and drinking
6. Eliminating
7. Personal cleansing and dressing
8. Maintaining body temperature
9. Working and playing
10. Sleeping
11. Expressing sexuality
12. Dying


**Martha Rogers 1914-1994**

**Science of Unitary Human Beings**

“Roger’s model focuses on the individual as a unified whole in constant interaction with the environment.”


Rogers, M. E. (1972). Nursing: To be or not to be? *Nursing Outlook, 20*(1), 42-46.


**Sister Callista Roy 1939-**

**Adaptation Model**

“In Roy’s Adaptation Model, humans are biospsychosocial adaptive systems who cope with environmental change through the process of adaptation.” (Polit & Henderson p. 104).


Joyce Travelbee 1926-1973
Human-To-Human Relationship Model


Jean Watson
Theory of Human Caring


Watson, J. (1994). Have we arrived or are we on our way out? Promises, possibilities and paradigms [Invited editorial]. *IMAGE: Journal of Nursing Scholarship, 26*(2), 86.


http://www2.uchsc.edu/son/caring/content

Ernestine Wiedenbach 1900-1996
The Helping Art of Clinical Nursing

Wiedenbach believed that there were 4 main elements to clinical nursing. They included: a philosophy, a purpose, a practice and the art. Wiedenbach conceptualizes nursing as the practice of identification of a patient’s need for help through observation of presenting behaviors and symptoms, exploration of the meaning of those symptoms with the patient, determining the cause(s) of discomfort, and determining the patient’s ability to resolve the discomfort or if the patient has a need for help from the nurse or other healthcare professionals. Nursing primarily consists of identifying a patient’s need for help. If the need for help requires intervention, the nurse facilitates the medical plan of care and also creates and implements a nursing plan of care based on needs and desires of the patient. In providing care, a nurse exercises sound judgment through deliberative, practiced, and educated recognition of symptoms. The patient’s perception of the situation is an important consideration to the nurse when providing competent care (Sitzman & Eichelberger 2003) (Extracts from: Ernestine Wiedenbach. A Tribute to her Legacy – Dr. Lisa Wright Eichelberger.


http://healthsci.clayton.edu/eichelberger/wiedenbach.htm

Grand Nursing Theories & Philosophies

Middle-Range Nursing Theories

WEBSITES

There are several websites devoted to nursing theory. The website links are listed below:

Nursing Theory Network

Nursing Theory Link Page