

## **NSG 5002 Week 4 Grand Theories**

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## **Grand Theories**

Theories can be classified based on their levels of abstraction. The scope of grand theories is very broad and, therefore, they don't lend themselves easily to application and testing. Grand theories are less abstract than conceptual models, but the concepts that compose them are still relatively abstract and general, and the relationships cannot be tested empirically (Fawcett, 1995)<sup>1</sup>.

Let's begin our exploration of grand theories with Sr. Callista Roy's adaptation model. The principal premise behind this model is that individuals are adaptive systems that cope with change through adaptation, and nursing helps to facilitate this adaptation of individuals during health and illness.

## **Middle Range Theories**

Middle-range theories originate from grand theories. They are less abstract and comparatively more focused and narrower in scope, which implies that they are made up of concepts and propositions that are testable. The development of the concept of caring as the central concept to nursing gave rise to several theories focused on caring. The most prominent of these caring theories is Madeleine Leininger's theory of culture care.

### Madeleine Leininger: Culture Care: Diversity And Universality Theory

Culture plays an important role in every healthcare setting. Integrating culture with care is an effective way of guiding thought processes, actions, and decisions within that culture.

Leininger's theory takes into account the cultural beliefs and values of individuals and groups to provide satisfying and culturally congruent nursing care. Culture exhibits both diversity and universality. While diversity includes different ways of practicing care, universality refers to the common elements in care. While adopting this model, it is important to incorporate cultural differences into nursing assessments, interventions, and care plans.

The culture care theory stresses the importance of cultural care and the need to be sensitive to the role of culture in health and healing. Consider this case. A South East Asian female patient admitted to a U.S. hospital for gynecological complaints felt that she was in a hostile healthcare environment, in the midst of caregivers who were not friendly or sensitive to her needs.

Everything, starting from the admission procedure, routine questioning, and physical assessment to the diet she was served, sent out negative signals to the patient. Had the attending nursing and other healthcare professionals been sensitive to her cultural differences and taken the trouble to make her feel comfortable, this turn of events could easily have been avoided. Culturally competent nurses can create positive environments where patients feel accepted and their cultural norms, beliefs, and practices are respected.

This model is relevant to education, research and practice.

Education	Research	Practice
Leininger's model is helpful to nurse educators to teach the importance of transcultural nursing to students and function as ambassadors of a culturally competent nursing force.	Further research will guide the discovery of new knowledge, which may transform the way nursing is taught and practiced.	It helps to meet the needs of culturally diverse people.

Leininger's theory presumes that human beings are inherently social and concerned about the well-being and survival of others. Nursing actions, therefore, need to be culture specific so as to reflect an understanding of and respect for the client's values, beliefs, and practices.

What are some of the cultural factors that you should consider in patient care? Can you recollect instances from your personal experience where this theory could have been effectively applied to achieve better patient outcomes?

This week will help you make the distinction between middle-range theories and grand theories. Examining research studies on Roy's adaptation model, Leininger's theory, and Pender's model from the CINAHL database will help you realize how the concepts of these theories find application in nursing practice. You will also get an opportunity to critique a theory of your choice. Below is a list of Middle Range Theories that can be applicable to your nursing practice. It is not a full list, however they are commonly used Middle Range Theories used in nursing practice.

- The Framework of Systemic Organization
- Theory of Group Power within Organizations
- Theory of Comfort
- Theory of Maternal Role Attainment
- Nurse as Wounded Healer
- Synergy Model – AACN
- Behavioral Systems Model

- Quality of Nursing care Theory
- Theory of Unpleasant Symptoms
- Advancing Technology, Caring, and Nursing
- Health Belief Model
- Theory of Uncertainty in Illness
- Goal Attainment Theory
- Theory of Comfort
- Theory of Symptom Management
- Theory of Adaptation to Chronic Pain
- Theory of Self-Transcendence
- Theory of Therapeutic Intention
- Perception of Dissonant Pattern
- Health Belief Model
- Theory of Reasoned Action
- Theory of Skill Acquisition
- Uncertainty in Illness Theory

- Theory of Exercise as Self-Care
- Theory of Dyspnea
- Self-Care of Chronic Illness
- Theory of Caregiver Stress
- Theory of Fulfillment
- Theory of Successful Aging
- Theory of Generative Quality of Life for Elderly
- Theory of Nursing Presence
- Interaction Model of Client Behavior
- Empowered Holistic Nursing Education
- Music, Mood, and Movement
- Self-Care Management for Vulnerable Populations

## **NSG 5002 Week 4 Grand Theories – Nola Pender's Model**

Nola J. Pender: Health Promotion Model (HPM)

The fundamental aim of every healthcare professional is health promotion and disease prevention. This shift in focus has taken place because of the high costs involved in healthcare. Pender's health promotion model was developed to provide a framework for predicting health promoting behaviors.

The factors that influence health behaviors are multidimensional. All factors are interrelated and, therefore, produce results that exert both direct and indirect influences on health promoting behaviors. These factors cooperatively support the processes that influence individuals to make informed decisions and participate in health promoting behaviors. Identification of the interrelationships and an understanding of the dynamics that facilitate health specific behaviors provide insight into both health compromising and health enhancing behaviors, and is what makes the model useful to researchers (Pender,1996)2.

Consider this example. Lack of physical activity and sedentary lifestyles are emerging as major health risks today. Populations across the world require regular physical activity to maintain good health and prevent diseases. Pender's HPM model can be used as a framework to examine the necessity of continued research in this important area of health behavior, as this will facilitate the identification of the most effective interventions to promote physical activity among diverse populations.

The HPM model is relevant to education, research, and practice.

Education	Research	Practice
It is useful to design wellness-focused courses in nursing curriculum.	Research in different areas trying to correlate the influence of HPM on health promoting behaviors helps to test the empirical precision of the model.	Implementing this model will have a positive impact on health promotion within clinical practice, thereby affecting the health of the population as a whole.

2.Pender, N. (1996). Health promotion in nursing practice. (3rd ed.). Stamford, CT: Appleton and Lange.

## Week 4 Discussion

### **NSG 5002 Week 4 Grand Theories. Week 4 Discussion**

#### Directions:

Continue with the theory you chose last week.

- Describe two research studies that used your theory as a foundation. Describe how each study used the theory.
- How were the concepts operationalized? When concepts are operationalized, they are turned from an abstract form to something measurable.

#### Submission Details

- In your discussion question response, provide a substantive response that illustrates a well-reasoned and thoughtful response; is factually correct with relevant scholarly citations, references, and examples; and demonstrates a clear connection to the readings.
- Post your response to the Discussion area by the assigned due date.
- Be sure to correct any spelling, grammar, or punctuation errors before you post.
- By the end of day four (4), respond to at least 2 of your peers' submissions. In your participation responses to your peers, comments must demonstrate thorough analysis of postings and extend meaningful discussion by building on previous postings.

Note: Review South University's Substantive Participation Policy Criteria, Helpful Tips,

and Late Policy available by clicking on the South University Policy and Guidelines navigation tab [here](#). The late policy applies to late discussion question responses.

Feedback

31 / 40

77.5 %

Good work with a nice discussion of research studies that used Henderson – just needing a little more detail about the studies. I also only see one peer interaction?

#### **Week 4 Discussion Sample: Kolcaba's Theory Of Comfort**

Contains unread posts

Kyle Galeano posted Mar 10, 2021 6:17 AM

Subscribe

The first article I have chosen that uses Kolcaba's theory of comfort in their research is an article regarding frontline workers during COVID-19. This article uses the theory of comfort as a guide in attempt to decrease the mental impact of COVID-19 frontline workers (Vo, 2020). This article operationalizes the concept of theory and uses the amount of frontline healthcare workers burnout as a means to describe the healthcare workers not engaging in comfort measures. This article measures the comfort of an individual based on several factors. These factors include the amount of self-care practices an individual partakes in to avoid burnout such as meditation, engaging in physical exercise outside of work, and performing activities that they find to be comforting (Vo, 2020). Nurses that engage in these self-care practices have been found to have a decreased rate of burnout as opposed to those nurses that are not (Vo, 2020). Thus,



nurses that partake in self-care achieve comfort and nurses that experience burnout do not experience comfort. NSG 5002 Week 4 Grand Theories

The next article talks about how patients in an epilepsy monitoring unit measure comfort. The research was conducted through problem centered interviews with twelve of the patients and measured through qualitative analysis (Egger-Rainer et al., 2017). Factors that decreased patient comfort levels were staying stationary in bed (bed rest), boredom, and the anticipation of oncoming seizures (Egger-Rainer et al., 2017). Factors that were measured as helping the patient achieve comfort were support by family and staff and the amount of hope a patient had for successful seizure control (Egger-Rainer et al., 2017). This study determined that it is vital for a patient to have support from family and staff because that is what patients perceived as achieving comfort (Egger-Rainer et al., 2017). The study also showed how important it is to provide a high level of care to the patients so that they can have the confidence and hope of achieving a seizure free life (Egger-Rainer et al., 2017).

## References

- Vo, T. (2020, October 22). A Practical Guide for Frontline workers During COVID-19: Kolcaba's Comfort Theory. Retrieved March 10, 2021, from <https://journals.sagepub.com/doi/full/10.1177/2374373520968392>
- Egger-Rainer, A., Trinkka, E., Hofler, J., & Dieplinger, A. (2017, February 12). Epilepsy Monitoring – The Patients' Views. Retrieved from [https://www.epilepsybehavior.com/article/S1525-5050\(16\)30386-9/fulltext](https://www.epilepsybehavior.com/article/S1525-5050(16)30386-9/fulltext)

## Example 2 Week 4 Discussion

In nursing research, “middle range theories contain fewer concepts, with relationships that are adaptable and concrete enough to be tested” (Bredow & Peterson, 2016, p.37). A middle range nursing theory can be used to provide the structure to direct everyday nursing practice

interventions for many patient care situations. Nursing practice is based on science and theory. Kristen Swanson's Theory of Caring and Healing is classified as a middle-range theory that focuses on the phenomenon of caring in response to patient events (Butts & Rich, 2017). Swanson's theory can be applied to research in various settings.

Ivarez Najar, Valderrama Sanabria, and Peña Pita (2020) used Swanson's Theory of Caring to evaluate caring on patients with hypertension. Ivarez Najar, et al. (2020) led a qualitative research with 12 individuals which used open in-depth interviews, participant observation, and interview notes. The qualitative research includes accumulating and evaluating non-numerical data. In Swanson's Theory of Caring the five phenomena of care, including the processes of maintaining the beliefs, knowing, being with, doing for, and permitting, were used to evaluate the narratives of the participants experiences of high blood pressure. The study recognized the beliefs, customs, and cultural practices of the person living with high blood pressure and identified the care needs (Najar, et.al., 2020). The participants agreed to attend education meetings every month. Also, the participants shared their feelings, finding that each confronts this disease differently and learns to care for themselves in a particular manner. The participants were asked general questions concerning hypertension such as, "How do you care for yourself since you were diagnosed with high blood pressure?" and, "Do you know what is the cause of your disease?" (Ivarez Najar, et al., 2020, para.12). The study included three interviews with each participant that were transcribed and then "to grant validity to the research, rigorous methodological criteria were kept in mind during the research, such as credibility, dependency or consistency, and confirmability" (Najar, et.al., 2020, para 11). Then the data was gathered after the validity and credibility was verified. NSG 5002 Week 4 Grand Theories

Swanson's of Caring and Healing Theory "represents care based on the maintaining belief in patients, anchored on knowing the reality of the other, transmitted through being with, and enacted by doing and enabling"(Ivarez Najar et al., 2020). The five components of caring

changed the participants of the Ivarez Najar, et al (2020) study. In order to maintain beliefs, the participants began to recognize the religious and cultural influences that indicate that they need to continue to take high blood pressure medication. The knowing portion of the components of caring were described by the participants and included the medical providers who took time to understand each individual and personal concerns that they were facing. Due to the report that medical staff developed with the participants, the being with a portion of caring the participants shared health concerns of possible death due to high blood pressure effects on the patient body. The doing for portion of caring was described as each participant sought individual support differently. Finally, the enabling portion was evaluated from two aspects; on the one hand, self-care actions were discovered and on the other hand, it favored the expression of opinions regarding the disease”( Ivarez Najar et al., 2020, para 20). Swanson’s Theory of Caring assessment of study includes the integral assessment nursing makes of these individuals as fundamental, respecting their beliefs, learning to know it, sharing their feelings and fears as fundamental concepts of care and, thus, permitting advancement in the disciplinary development.

Swanson’s Theory of Caring was applied to patient parturition, childbirth process. Ortega Barco and Muñoz de Rodríguez (2018) used a controlled clinical trial with a group of twenty receiving interventions and a group of twenty participants in a control group with additional interventions. The groups used a rating system to rate the care received. The intervention group provided care based on the care processes proposed by Swanson in the theory of informed caring for the well-being of others. Most of the women in both groups were between 20 and 35 years of age. The participants were asked to rate fifteen questions and that data then was compared.

Swanson’s Theory of Caring was applied in the five components of caring to the birth process and the participants were asked to rate the experiences. The component the knowing the

meaning of the birth event, included understanding and was without judgments. The concepts were operationalized in the five components of caring and the data retrieved from the questioners became measurable and comparable to the control group. The being was utilized by being available and offering emotional support to women and families. The doing for caring component was met by offering information regarding any need for pain control or even an expression of fear based on the birth event. The enabling caring component by the nurse was implemented to protect the women from self-harm and provided guided self-care. "A theoretical analysis was performed and supported by existing evidence; the specific activities were constructed for nurses to apply care processes during the parturition process" As a result, the nursing care provided by theoretical based care increased satisfaction of the woman during the birth process. The study used an electronic device with the scale aggregated, connected to an immediate response in order to maintain a meticulous record of the women's answers. "Higher scores were also observed in the intervention group compared to those of the control group" (Ortega Barco & Muñoz de Rodríguez, 2018) (Ortega Barco & Muñoz de Rodríguez, 2018, para 10) . In conclusion, the intervention derived from Swanson's theory of caring was associated with a better evaluation of professional nursing care by women during the birthing process.

Caring is a nurturing way where one feels a personal sense of commitment and responsibility (Swanson, 1991). The use of Swanson's theory has been applied in research, education, and clinical practice. It is a comprehensive and holistic approach to health care. The concepts of Swanson's Theory of Caring including the five components of care and applied to her assumptions can be useful in almost any setting. It is the process of looking at the patient as a whole, seeing his or her needs, and being supportive of the patient in various events in a caring manner that enhances the patient's wellbeing.

## References

- Bredow, T., & Peterson, S. (2016). Middle range theories: Application to nursing research and practice (4th ed.). LWW.
- Butts, J., & Rich, K. (2017). Philosophies and Theories for Advanced Nursing Practice. (3rd ed.). (<https://digitalbookshelf.southuniversity.edu/#/books/9781284143010/>, Ed.) Jones & Bartlett Learning.
- Ivarez Najar, J., Valderrama Sanabria, M., & Peña Pita, A. (2020). Report of the Experience of living with high blood pressure in light of the theory of caring. *Investigación Y Educación En Enfermería*, 38(2), <https://doi.org/10.17533/udea.iee.v38n2e10>.
- Ortega Barco, M., & Muñoz de Rodríguez, L. (2018). Evaluation of the Nursing Care Offered during the Parturition Process. Controlled clinical trial of an Intervention based on Swanson's Theory of Caring versus conventional care. *Investigación y Educación En Enfermería*, 36(1), e05.
- Swanson, K. (1991). Empirical development of a middle range theory of caring. *Nursing Research*, 40(3), 161–166. <https://doi.org/10.1097/00006199-199105000-00008>.
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[https://nursing.unc.edu/wp-content/uploads/sites/252/2012/11/ccm3\\_032549.pdf](https://nursing.unc.edu/wp-content/uploads/sites/252/2012/11/ccm3_032549.pdf).

## NSG 5002 Week 4 Grand Theories Week 4 Project

### Instructions

### Week 4 Project

Your “Application of Theoretical Concepts to Research” Paper is due this week. Your paper should contain the following sections:

- Background: contains two subsections, which includes a brief description of the theorist and the phenomenon of concern in the theory.
- Theory Description: a description of each of the concepts in the theory, a diagram of the theory, and a description of how the concepts are related.
- An Evaluation of the Theory: a description of the theory's weaknesses and how the metaparadigms are described in the theory.
- Application of the Theory:
  - Describe two studies that used the theory as a framework for their study, including a description of how they operationalized the concepts.
  - How could you use the theory to research a phenomenon in your area of clinical practice? How would you operationalize the concepts?

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You MUST use the attached template [here](#) to complete your paper.

The paper is to be thoroughly researched and well documented, with relevant material from the nursing theorists presented incorporated into the paper. Use the current edition of the APA Manual throughout the paper. Sources should focus on references from nursing theory but may also include conceptual and theoretical material from other professional domains. The paper, excluding references or appendices, is to be limited to 3-5 pages. Writing should be succinct and well organized, as it is impossible for the facilitator to evaluate form and content separately.