

Dorothea Elizabeth Orem's Self-Care Deficit Theory of Nursing

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Objectives



- ❧ Historical overview of Orem's work and achievements.
- ❧ Three nested and interrelated theories presented by Orem.
- ❧ Application of Orem's theory into Education, Practice, and Research

Biography



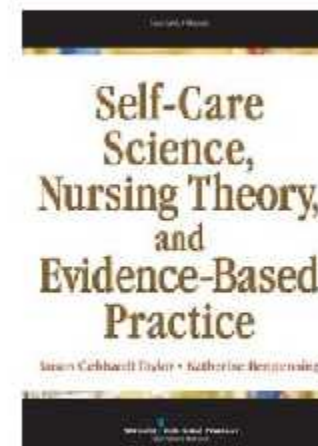
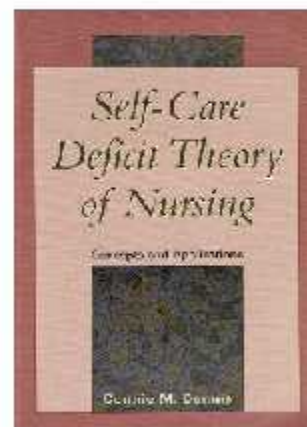
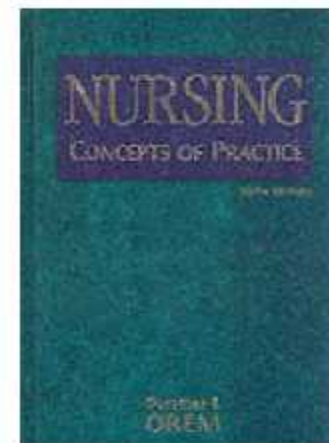
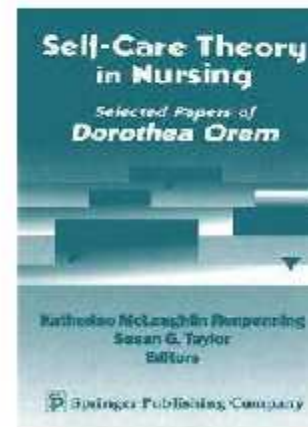
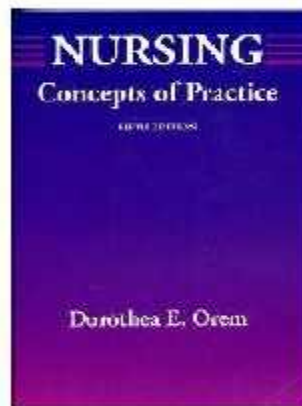
- ❧ Dorothea Elizabeth Orem was born (July 22, 1914) in Baltimore, Maryland.
- ❧ She studied Diploma in Nursing in 1934 at the Providence Hospital School of Nursing In Washington D.C.
- ❧ In 1939 and 1945 she finished B.S. Nursing Education (BSN Ed.) and MSN Ed successively in Catholic University of America, Washington D.C.
- ❧ Her clinical practice included staff nurse in the OR, Pediatrics, and Adult Med/Surg Units.
- ❧ She taught biological sciences and later served as a directors of nursing services and of the school of nursing at Providence Hospital, Detroit University, Michigan.

Biography



- ❧ In 1976 she received Honorary Doctorates: Doctors of Science from Georgetown University and Incarnate word college in San Antonio in Texas in 1980. Received several national and international awards including the most prestigious nursing award from Sigma Theta Tau International in 1997.
- ❧ In 1971 she first published her book titled, “Nursing: *Concepts of Practice*”. The 2nd, 3rd, 4th, 5th, and 6th editions were published in 1980, 1985, 1991, 1995, and 2001 respectively.
- ❧ Orem’s work has been further explained by Susan Taylor and Katie McLaughlin Renpenning.
- ❧ Orem died in June 22, 2007.

Publications





Theoretical Sources

Mentorship

- Cites Eugenia. K. Spaulding as a great friend and teacher.

Experience

- Learning experiences with graduate students and collaborative works with colleagues and nurses.

Work of others

- Nightingale, Abdellah, Henderson, Johnson, King, Levine, Hall, Leininger etc and many other nursing theorists.
- Many authors from other disciplines.

Simple Cycle of Self-Care and Self-Care Deficit



Able Self

+



Unable Self

+



Helped

Major Assumptions



- ⌘ People should be self-reliant and responsible for their own care and others in their family needing care.
- ⌘ People are distinct individuals.
- ⌘ Nursing is a form of action – interaction between two or more persons.
- ⌘ Successfully meeting universal and development self-care requisites is an important component of primary care prevention and ill health.
- ⌘ A person's knowledge of potential health problems is necessary for promoting self-care behaviors.
- ⌘ Self care and dependent care are behaviors learned within a socio-cultural context.

Meta-paradigm



Person (Man):

- ∞ Man is an integrated WHOLE - a unity functioning biologically, symbolically and socially.
- ∞ Man is self-reliant and responsible for self-care and well-being of his or her dependents and self-care is a requisite for all.
- ∞ Man is a logical organism with rational powers.
- ∞ Man's capacity to reflect on his/her own experience and the environment and his/her use of symbols/ideas/words that distinguished him/her from other species.
- ∞ A patient is an individual who is in need of assistance in meeting specific health-care demands because of lack of knowledge, skills, motivation, or orientation.

Meta-paradigm (Cont...)



Health:

- ∞ State of wholeness or integrity of the individual human beings, his parts, and his modes of functioning.
- ∞ This concept is inherent in her nursing systems since the goal in each system is optimal wellness relative to that system.
- ∞ Responsibility of a total society and all its members.
- ∞ A healthy person is likely to have sufficient self-care abilities to meet his/her universal self-care needs.

Meta-paradigm (Cont...)



Environment:

- ∞ Encompasses the elements external to man but she considered man and environment as an integrated system related to self-care.
- ∞ Environmental conditions conducive to development include opportunities to be helped: being with other persons or groups where care is offered; opportunities for solitude and companionship; provision of help for personal and group concerns without limiting individual decisions and personal pursuits: shared respect , belief, and trust; recognition and fostering of developmental potential.

Meta-paradigm (Cont...)



Nursing:

- ⌘ Actions deliberately selected and performed by nurses to help individuals or groups under their care to maintain or change conditions in themselves or their environments.
- ⌘ Encompasses the patient's perspective of health condition, the physician's perspective, and the nursing perspective.
- ⌘ Goal of nursing – to render the patient or members of his family capable of meeting the patient's self care needs.
- ⌘ To regain normal or near normal state of health in the event of disease or injury and to stabilize, control, or minimize the effects of chronic poor health or disability.

Three Major Theories by Orem



Self-Care (SC)

“What is meant by SC?”



Self-Care Deficit (SCD)

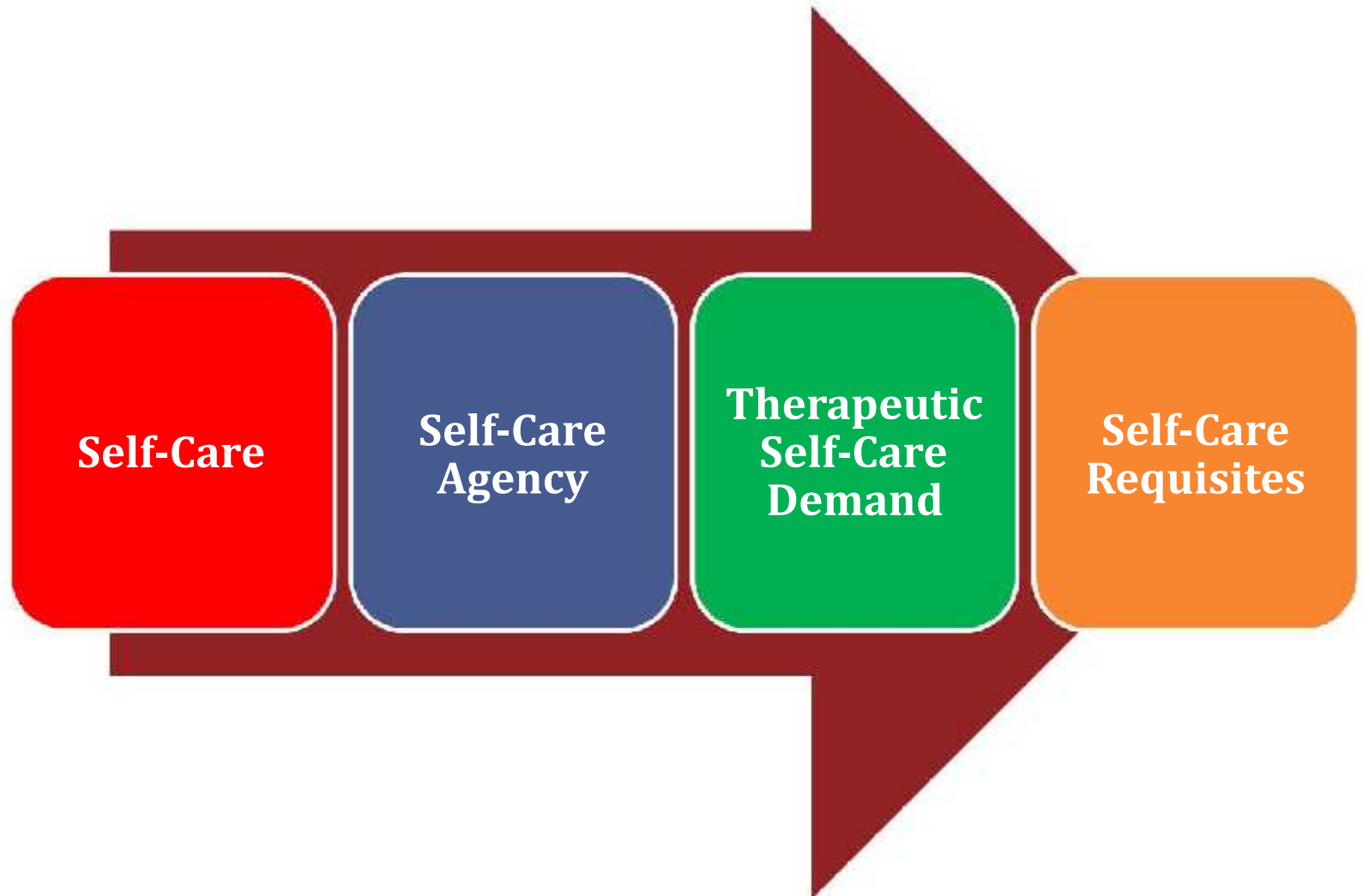
“When nursing is needed?”



Nursing Systems (NS)

“How the self-care needs are met?”

Theory of Self-Care: Major Concept



Theory of Self-Care



Theory of Self-Care: Major Concepts (Cont...)

Self-Care:

- ∞ Is the **performance** or **practice** of activities that individuals **initiate** and **perform** on their **own behalf** to maintain **life, health, and wellbeing**.
- ∞ It helps to maintain **structural integrity** and **human functioning** and contributes to **human development**.
- ∞ Self-care is **learned** through interpersonal relations and communications.



Theory of Self-Care: Major Concepts (Cont...)

Self-Care Agency:

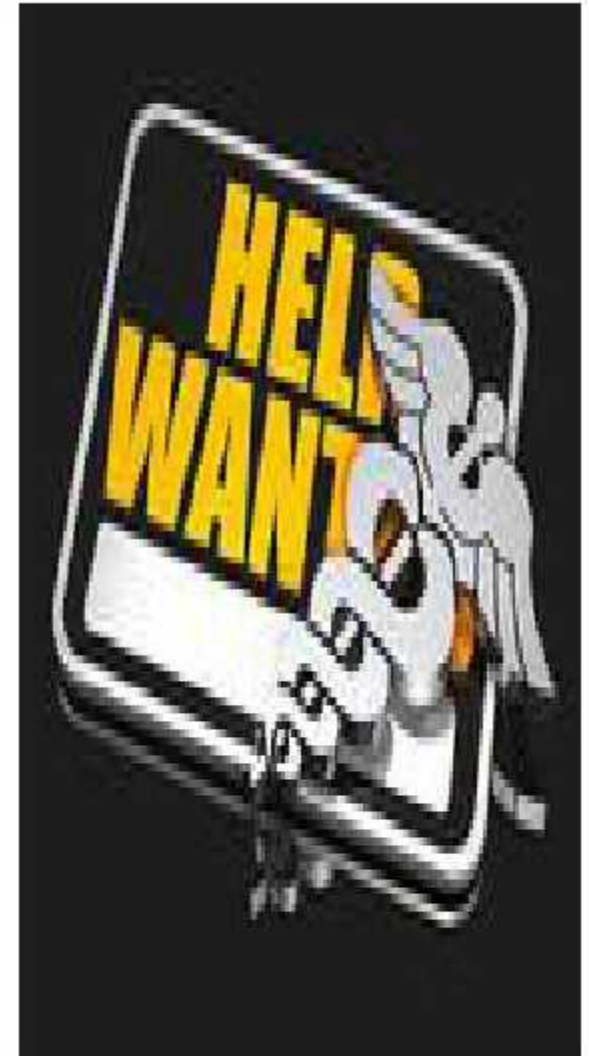
- ∞ Is the **human's acquired powers and capabilities** to engage in self-care.
- ∞ The ability to engage in self-care activities are influenced by “**Basic Conditioning Factors**”, such as age, gender, developmental state, health state, sociocultural orientations, health care systems factors, family system factors, patterns of living, environmental factors, resources adequacy, and availability.
- ∞ In usual circumstances **adult care for themselves.**



Theory of Self-Care: Major Concepts (Cont...)

Therapeutic Self-Care Demand:

- ∞ Is the **total of care activities needed**, either at an identified moment or over a period of time, to meet a person's known requirements for self-care.
- ∞ Is modeled on **deliberate action**, that is intentionally performed by some members of society to benefit themselves or others.



Theory of Self-Care: Major Concepts (Cont...)

Self-Care Requisites:

∞ An additional concept that defines it as the reasons for which self-care activities occur. These are the self-care needs categorized into three distinct requirements/requisites:

Universal Self-care Requisites

Developmental Self-care Requisites

Health Deviation Self-care Requisites.



Theory of Self-Care: Major Concepts (Cont...)

Categories of Self-Care Requisites	Examples
Universal Self-Care Requisites (ADLs)	<ul style="list-style-type: none"> • Maintenance of sufficient intake of air, water, food. • Provision of care associated with elimination and excrements processes. • Balance between activity and rest; between solitude and social interaction. • Prevention of hazards to human life, functioning , and well being. • Promotion of human functioning and development.
Developmental Self-Care Requisites	<p>Associated with developmental processes/ derived from a condition, or associated with an event during the life cycle changes such as adjusting to a new job, changes in body shape, functions etc. It includes life cycle stages i.e. intrauterine, birth, neonatal, infancy, childhood, adulthood, pregnancy etc.</p>
Health Deviation Self-Care Requisites	<p>Changes in human structure and functioning out of the range of normalcy.</p> <ul style="list-style-type: none"> • Seeking and securing appropriate medical assistance • Being aware of and attending to the effects and results of pathologic conditions • Effectively carrying out medically prescribed measures • Modifying self concepts in accepting oneself as being in a particular state of health and in specific forms of health care • Learning to live with effects of pathologic conditions

Theory of Self-Care Deficit

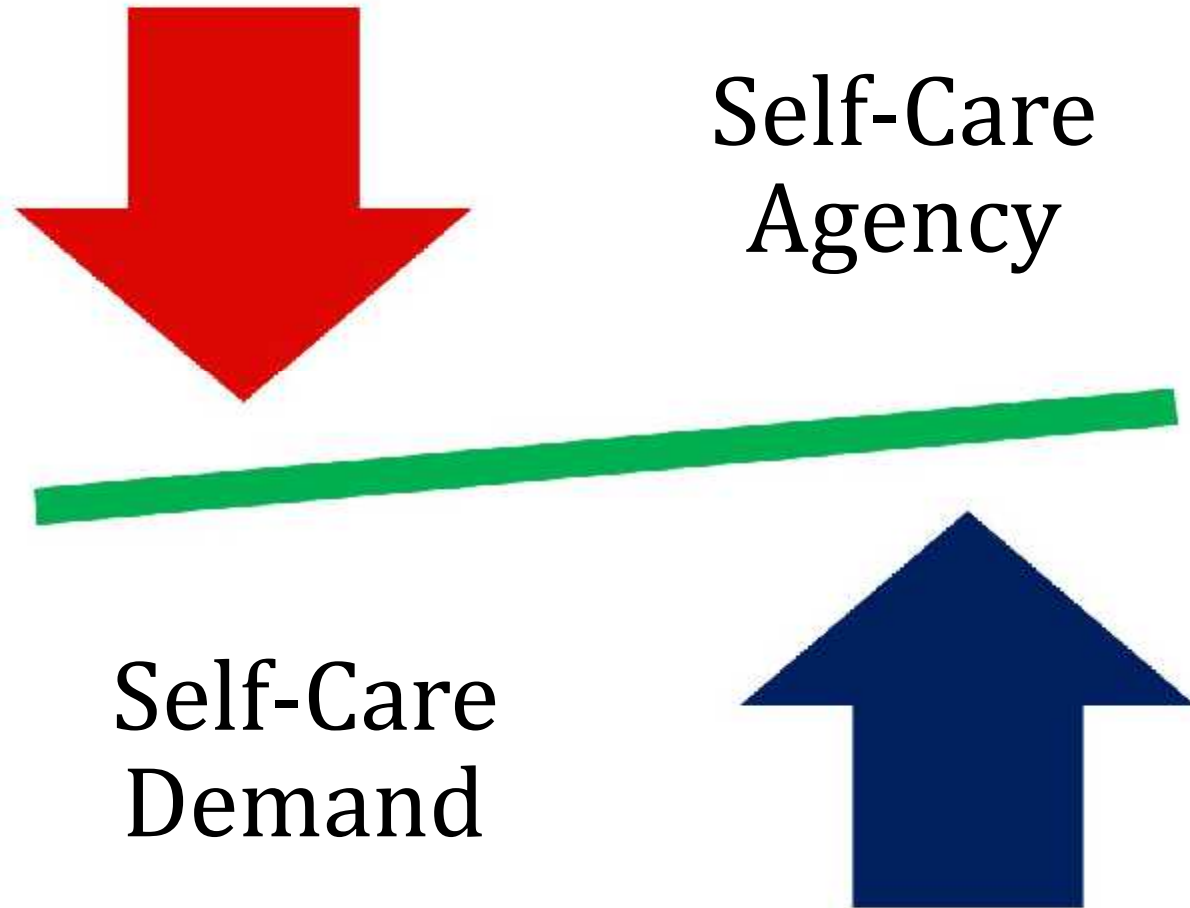




Theory of Self-Care Deficit: Major Concepts

- ☞ Is the basic element of the general theory of self-care.
- ☞ It delineates WHEN nursing is required.
- ☞ Nursing is required when adults (or in the case of a dependent, the parent or guardians) are incapable of or limited in their ability to provide continuous effective self-care.
- ☞ ***If there are more demands (Therapeutic Self-Care Demands) than abilities (Self-Care Agency), nursing is needed.***

Theory of Self-Care Deficit: Major Concept (Cont...)





Theory of Self-Care Deficit: Major Concept (Cont...)

∞ Nurse can help patient recover from Self-Care deficit by five methods of helping:

Acting for and doing for others

Guiding and directing

Providing physical and psychological support

Providing and promoting an environment that supports personal development

Teaching

Theory of Nursing Systems





Theory of Nursing Systems: Major Concepts

- ∞ Describes how the patient's self care needs will be met by the nurse , the patient, or both.
- ∞ Orem recognized that specialized technologies are usually developed by members of the health profession.
- ∞ A technology is systematized information about a process or a method for affecting some desired result through deliberate practical endeavor, with or without use of materials or instruments.
- ∞ Identifies 3 classifications of nursing system to meet the self care requisites of the patient:-
 - Wholly compensatory system
 - Partly compensatory system
 - Supportive – Educative system

Theory of Nursing Systems: Major Concepts (Cont...)

Types of Nursing Systems	Definitions	Example
Wholly Compensatory	Is represented by the situation in which the individual is unable to carry out needed self-care actions, either through inability to be self-directed or due to a medical prescription.	Patients under coma, anesthesia, with fractures , spinal dysfunctions, mental impairment etc
Partly Compensatory	Is represented by a situation in which the patient and nurse are both physically active in meeting the patient's self-care needs and either may perform the majority of the needed actions.	Patients with major surgeries, temporary limitation of activities due to cast application etc
Supportive-Educative	Is represented by the capability of a person to perform self-care activities independently or needs to learn to how to meet therapeutic self-care demands by himself. In either case, the person needs some manner of assistance.	Clients wishing to know about contraceptive methods, adolescent seeking information about pubertal changes, newly delivered mother seeking assistance in breast feeding etc.

Theory of Nursing System: Major Concept (Cont...)



**Supportive-
Educative
System**



**Partly
Compensatory
System**



**Wholly
Compensatory
System**



Theory of Nursing System: Major Concept (Cont...)



**Wholly
Compensatory
System**



**Partly
Compensatory
System**

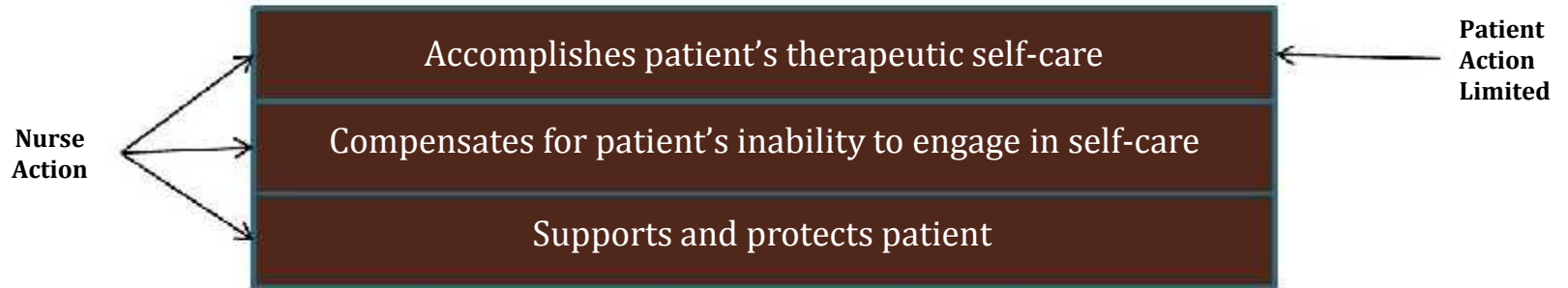


**Supportive-
Educative
System**





Wholly Compensatory System



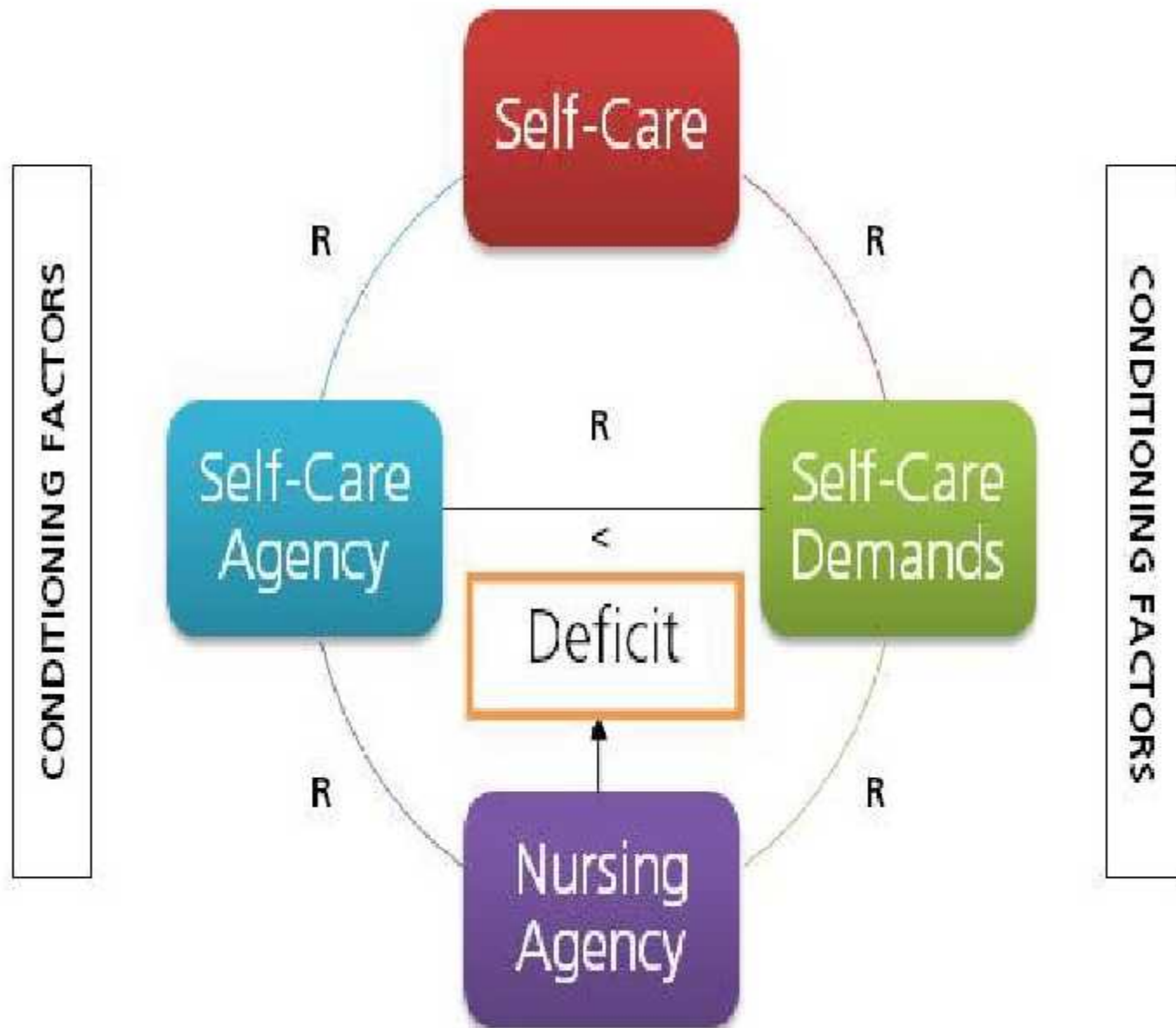
Partly Compensatory System



Supportive-Educative System



Conceptual framework of Orem's theory



Three Steps by Orem versus Nursing Process

Nursing Process	Orem's Nursing Process
<ul style="list-style-type: none"> Assessment 	<ul style="list-style-type: none"> Diagnosis and prescription; determine why nursing is needed, analyze and interpret—make judgment regarding care Design of a nursing system and plan for delivery of care Production and management of nursing systems <p>Step 1 collect data in six areas:</p> <ul style="list-style-type: none"> The person's health status The physician's perspective of the person's health status The person's perspective of his or her health The health goals within the context of life history, life style, and health status The person's requirements for self care The person's capacity to perform self care
<ul style="list-style-type: none"> Nursing diagnosis Plans with scientific rationale 	<p>Step 2</p> <ul style="list-style-type: none"> Nurse designs a system that is wholly or partly compensatory or supportive-educative. The 2 actions are:- Bringing out a good organization of the components of patients' therapeutic self care demands Selection of combination of ways of helping that will be effective and efficient in compensating for/overcoming patient's self care deficits
<ul style="list-style-type: none"> Implementation evaluation 	<p>Step 3</p> <ul style="list-style-type: none"> Nurse assists the patient or family in self care matters to achieve identified and described health and health related results, collecting evidence in evaluating results achieved against results specified in the nursing system design Actions are directed by etiology component of nursing diagnosis evaluation



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Thank
you



