Nursing Process Theory and Phenomenon of Interest

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Introduction

The phenomena of interest are actually what the research is related to; they explain and describe. The phenomena of interest, the person, environment, health, and nursing, are central to nursing science. The meta-paradigm – a framework that acts as an encapsulating unit that a more restricted structure develops under it – of nursing consisted of four concepts that are the person, environment, health, and nursing, and these all concepts were interrelated.

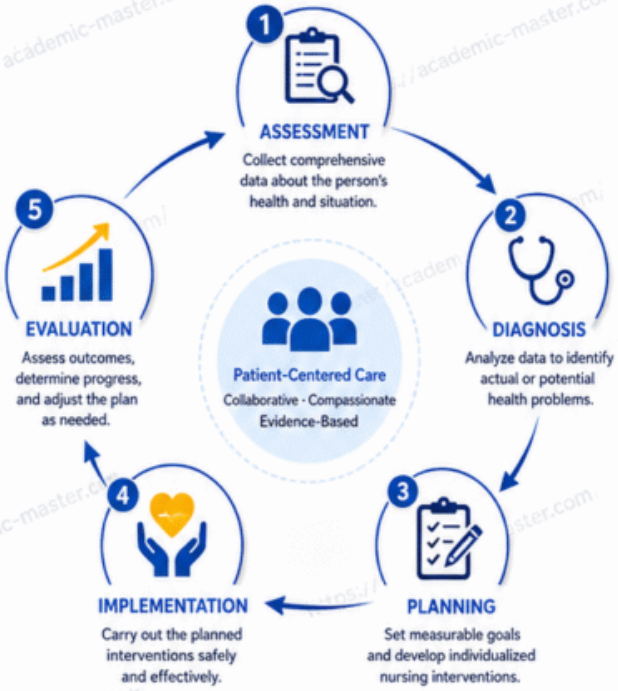
In the meta-paradigm, all the concepts have almost equal importance; however, in literature, there is no significant contradiction between the four concepts of the meta-paradigm of nursing. In grand theory, it is evident that the author discovered that cultural and care knowledge is lacking and associated it with the missing link to nursing understanding. It is necessary for nurses to follow many variations in culture and expertise required in patient care to support compliance, healing, and wellness.

The middle-range theory, “Nursing Process Theory,” used in the study contends that a proper communication system is needed to be developed so that the patient’s essential and immediate needs for help would be fulfilled. Complexity theory used states that a complexity system is a collection of individuals who are free to act unpredictably and whose actions are interrelated and interconnected. In the process, one individual’s actions change the context for other individuals (reciprocal impact). Complexity theory is often used interchangeably with other terms. One of the terms mostly known is complex adaptive systems (CAS). Thus, the phenomena of interest are discussed in light of multiple theories and concepts.

NURSING PROCESS THEORY AND PHENOMENON OF INTEREST

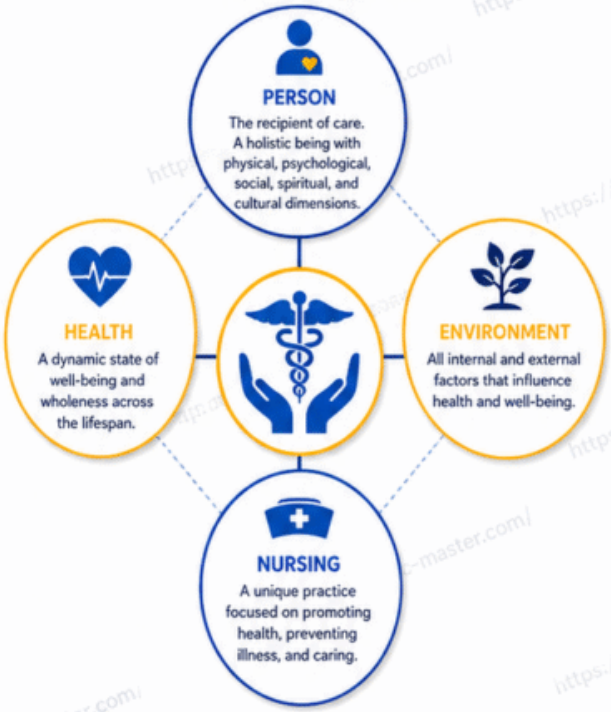
The nursing process is a systematic, evidence-based approach to care that uses critical thinking to promote optimal health outcomes.

THE NURSING PROCESS



FAWCETT'S META-PARADIGM OF NURSING

Provides the broadest view of phenomena relevant to nursing practice.



THEORETICAL PERSPECTIVES IN NURSING: A COMPARISON

	GRAND THEORY	MIDDLE-RANGE THEORY	COMPLEXITY SCIENCE
FOCUS	Broad, abstract concepts about nursing and human health.	Narrower concepts addressing specific phenomena.	Examines dynamic, interconnected systems and patterns.
SCOPE	Very broad and general.	More specific and limited than grand theories.	Complex, adaptive, and ever-changing systems.
PURPOSE	Provide a foundation for nursing knowledge and practice.	Explain, predict, and guide practice in focused areas.	Understand how diverse elements interact to produce outcomes.
EXAMPLES	Orem's Self-Care Deficit Theory, Roy's Adaptation Model, Neuman Systems Model	Imogene King's Goal Attainment Theory, Pender's Health Promotion Model	Complex Adaptive Systems, Network Theory, Chaos Theory
APPLICATION	Guide overall nursing philosophy, education, and research.	Inform clinical decision-making and evidence-based practice.	Applied to understand health systems, population health, and innovation.

KEY TAKEAWAY

- The nursing process operationalizes care through a continuous cycle of steps.
- Fawcett's meta-paradigm anchors nursing in the interconnectedness of Person, Environment, Health, and Nursing.
- Theoretical perspectives provide lenses to understand, explain, and improve health and care.

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Discussion

Phenomena of interest

The proposed phenomena “phenomena of interest” are actually what the research is related to, explain and describe. The phenomena of interest, the person, environment, health, and nursing are central to the nursing science. In the current study, these phenomena of interest are brought into consideration. It is argued that in the current era of multimedia technology, one wonders why some of the essential services are not provided to the extent that they should be. For instance, some of these services are mentioned as immunization of children and adults and the yearly checkup for men and women. Besides, some services related to prenatal and dental care as well as to childbearing women and adolescents, are other services that are not provided 100 percent. Community awareness plays a vital role in preventing healthcare malfunctions (preventive healthcare). It is particularly crucial for the national administration and the ones responsible for community healthcare how crucial community awareness is in preventing malfunctioning of health. It is explained that a study that included 190 nurses who were caring for different communities, namely Asians (Southeast Asians), blacks, and Puerto Ricans, of the community health, showed a different level of confidence scores. The self-efficacy associated with the culture was noticed to be high when blacks cared, and surprisingly the score was low when they cared for other categories, i.e., Latinos and Asians. The items such as knowledge about the factors of health beliefs and the practices of respect, modesty within individual culture, and authority were counted for the low level of scoring. However, the score reached higher when interpreters were used to conveying the correct messages. The problem was a lack of confidence resulting from working in a diverse culture while treating patients. These were weaknesses contained in the nursing curriculum, which helps nurses to understand and respond to different patients of different cultures and groups (Fooladi, 2015).

Most of the time, governments like Iran and other departments implement preplanned healthcare initiatives to address the issues related to community-preventable healthcare. However, private sectors in metropolitan cities have assured their existence by offering services mainly based on both urban and sub-categories in urban communities. The farther and rural regions, access to multimedia is limited. Therefore, they need to be focused on primary care and preventive health services. Moreover, researchers in British studies established the view that the nursing role is essential to preventive health, and they also stated that nurses reduce the risk factors to a large extent by playing their part in cardiovascular disease in middle-aged patients. Thus, the theory of Community health responds to the concepts of nursing domains to rectify issues related to the environment, resiliency, and community abilities for healthcare in the diverse community. In essence, the nurses get the opportunity to encourage, motivate, and, most importantly, create awareness and lead the public to make it consider health screening habits, yearly check-ups, and immunizations for childhood and adults. Finally, Nurses play a crucial role in the successful social healthcare program. They are an integral part of both private and government-funded health plans, local and universal, and their role

in developing the health and well-being of a society cannot be denied (Fooladi, 2015).

Fawcett's Meta-paradigm of Nursing

The meta-paradigm of any discipline, as in the paper (Fawcett, 1984), is explained as being a statement, or it may be the number of statements that identify phenomena relevant to them. Meta-paradigm only highlights concepts related to the discipline, but it does not link them to the assumptions of different views of the world (MacIntyre & Mcdonald, 2013). However, according to Eckberg and Hill (1979), the meta-paradigm is a framework and acts as an encapsulating unit that a more restricted structure develops under it. Fawcett (1984) introduced the meta-paradigm of nursing as a result of arguments that scholars jump from one topic to another very soon, leaving a topic and area unconcluded. The nursing meta-paradigm consisted of four concepts, which are named person, environment, health, and nursing, and these four concepts were interrelated. Thus it guides nurses to perform critical thinking, and it contributes to conceptual of the theory. It also guided the nursing process in everyday experiences in clinical settings. It can be, consequently, said that the meta-paradigm is related to the phenomena of interest.

In the meta-paradigm, all the concepts have almost equal importance; however, in literature, there is no significant contradiction between the four concepts of the meta-paradigm of nursing. Within the context of these four concepts and components of meta-paradigm and their interrelationships theory development has proceeded in nursing. Theoretically, one of the parts may be emphasized because of the way in which the concepts and their relationships are viewed. Despite these arguments, the role of nursing is somewhat important as it is an essential part of the paradigm as it plays a pivotal role in the paradigm.

The concept of the person, as a focal point for the first exploration, needs attention so that other ideas of the meta-paradigm of nursing could be in depth explored. The concept of a person includes individuals, families, groups, and communities that are subject to nurse care (MacIntyre & McDonald, 2013, p.63). Concerning the diversity of creation, it is evident that none of the individuals is born with the same identical features and behavior. Each person may have unique characteristics, such as different biological, psychological, social, and spiritual bases (Thorne, 2010, p.66). For nurses, it is necessary to consider that each will experience different feelings because of these diverse characteristics of their body and behavior.

The second concept of the meta-paradigm of nursing, the environment, is explained by the other concepts. Its relation to other concepts shows the importance of the integrity of the meta-paradigm. In literature, the theme of "environment" is explained by behavioral patterns of the individuals who are described and predicted about their surroundings (environment). Moreover, individual behavior is influenced by environmental factors during both periods – wellness and illness. It is essential to study individuals along with the environment but not in isolation. A system and mechanism known as "regulators" in humans prepare every individual to adapt to the specific environment, which changes

continuously (Roy and Roberts, 1981). Newman's theory has explained the impact of the environment on the individuals' health as a combination of all intrinsic and extrinsic forces. The individuals are the powerful beings that continually deal with such interactions of these forces (internal and external). The model showed that many stressors –the risk factors- work against the defense system of the body. Stressors interact and affect the defense system, and hence the defense system is breached. Consequently, the patient will be exposed to the risk of a variation in health. However, responding to the changes in the environment would develop the immune system and promote and maintain wellness.

The third concept is health which is the absence of any disease in the body, and health care behavior, which is any activity that is undertaken for the health and prevention of diseases by a person. But the term opposite of health is the illness. The illness behavior is explained as any activity undertaken to define the state of health by a person who feels ill. These activities would be aimed at discovering suitable remedies (Green & Murphy, 2014).

The fourth concept is Nursing which is the large umbrella. Nursing is defined in literature by (American Nurses 'Association, 1980, p. 9) as the diagnosis and treatment of human responses to the problems related to health. Nursing is also an integral part of society, and nursing has grown from the same society, and still, it is in the phase of evolution. Professionally it is highly valued both within and outside that society as it is highly responsive to the needs of society. Nurses are responsible to society because societies have given respect and want them to align their professional interests with the interests of society to a large extent. The nursing profession is dynamic but not static, and it responds to the changing social needs of the people. Besides, health care is of utmost importance over the world therefore, nursing provides a leadership role in leading the general mass and political leaders on many issues. Also, the general public has valued nursing to be an essential and trusted profession. However, in turn, the trust imposes responsibility for nurses to try their best to provide the best health care to the public. This does mean that the nurses should be well-informed (educated), clinically smart, and professionally organized. The nurses would establish a robust and firm code of ethics, standards of care, and practice. They are also required to devise educational and practice requirements that help the needs of the day and policies that govern the profession (Neuman, 1990).

Grand theory discussion

One of the famous grand theories is the "Culture Care and Diversity and Universality theory presented by Leininger (1988)". In theory, the author holds that cultural care is regarded as providing nurses with the comprehensive and most important means for study. It also provides the resources to describe, explain, and predict nursing knowledge and connected nursing care activities and practice. The theory is so designed to shape a structure for culturally compatible nursing care practices. Also, the author explains that if the nurses fully discover care meanings, patterns, and processes, they would be able to explain and predict all about the health of the people.

In theory, it is evident that the author discovered that cultural and care knowledge is lacking and associated it with the missing link to nursing understanding. It is necessary for nurses to understand many variations in culture and knowledge essential to patient care to support the conditions of wellness, compliance, and healing. These insights started the development of a new construct and phenomenon related to nursing care which is called transcultural nursing in theory. Transcultural nursing is a substantive area of study and practice as explained by the author and it is intended to focus on various cultural care values, beliefs, and practices of patients belonging to either the same or different cultures. However, the primary purpose of providing universal nursing and culture-specific care practices is to promote health or well-being.

In the light of the theory, the key concepts discussed are the people belonging to the different cultures, nurses and nursing, health, and culture (environment). The four concepts of the phenomena of interest are encircled in the discussion of the theory. The person the one belonging to different cultures are discussed as having different needs and showing different behavior. Likewise, the health conditions are based on the diversity of the patients of different cultures as evident from the subsequent discussion of the theory. The other concept of the phenomena is nursing which is the pivotal point of the phenomena. In theory, the concept is more emphasized in understanding the behavior of the patients belonging to the different cultures so that the nurses can respond in the correct and precise manner. Last but not least, the concept of the environment is discussed in theory as being transcultural. It is argued that patients with different cultures possess different behaviors. Humans being universally caring survive in a diversity of cultures, and they provide universality of care in a variety of ways. The caring depends on differing cultures, needs, and settings. Thus nursing practices need to be designed to respond to the diversity of the behavior.

Middle-range theory discussion

In contrast to grand theories, the Middle-range theories are narrower and more concrete. Middle-range theories consist of factors (concepts) with a limited number the testable statements that are given at a relatively concrete and specific level. Typically middle-range theories are of three types. Amongst them, descriptive middle-range theories are the basic type of theories. The descriptive theory is characterized to describe or classify a particular phenomenon. It may encompass just one concept throughout the discussion.

Some theories are used to discuss the nursing phenomena. But the current study will be discussed in light of the “Nursing Process theory” written by Orlando (1961). According to this theory, a proper communication system needs to be developed so that the patient’s urgent need for help would be fulfilled. The patient’s prevailed behavior for help might be different from usual, i.e., it may be a cry for help. But sill, the help the patient needs may be different from what it appears to be. In such circumstances, nurses are required to perceive and think about the particular behavior so that they can understand the feeling produced by their thoughts. This would help to explore the meaning associated with the behavior patient, and it would not be possible otherwise. Thus, the process helps

nurses evaluate the nature of the patient's needs and provide the help he or she requires.

It is further explained that the creation of an effective response would require the nurses to decode the social information. However, the decoding process would be achieved by using a cognitive process that evaluates multiple factors. Apart from this, emotional regulation and planned response construction are essential to arrive at an appropriate, achievable, and beneficial response (Sheldon & Ellington, 2008).

In the light of the above grand theory, several aspects of phenomena are clear. The theory can be articulated with the four concepts discussed in the above sections. As far as the concept of person is concerned, the theory explains the alternative word of the patient to the person. In theory, three concepts are used, one of which is patient behavior. The nurse-patient communication is developed when patients send cues in the form of behavior. In the whole process of communication, the patient's behavior is interpreted and responded to with a suitable answer. The cognitive ability of the nurses makes it possible to perceive the behavior and interpret it properly.

The second component that has been discussed in theory is the nurse, an essential concept in the phenomena of interest. The relation, in theory, is mainly based on the interaction between the nurses and patients. The nurse is the behavior-responding component (Nurse's Reaction) in theory. Nurses react in two ways to respond to the patient's behavior. One is an observable reaction, and the other is a non-observable reaction. The non-observable response consists of thoughts, perceptions, and feelings. But the observable response is the final activity to respond to the patients' behavior. Orlando's theory suggested that non-observable reaction is the effective an effective practice. Nurses establish a reciprocal relationship with patients, and the relationship becomes more dynamic and collaborative.

Since the theory is based on the communication and collaboration between the patient and nurse, the process of nursing is developed as a result. Nursing in the POI section has been defined as the diagnosis and treatment of human responses to problems related to health, and the relation is confirmed in the theory of the nursing process.

Keeping the whole discussion in mind, it can be argued that one concept – Environment- of the phenomena of interest is less focused directly on the theory. However, the idea of environment cannot be ignored in the current discussion. Moreover, no theory can be developed without considering the environment. In theory, the environment can be the hospital; it can be the friendly relationship between the nurse and patient. In one way or the other, the concept has been discussed. For instance, communication is developed when patients send cues in the form of behavior, and the behavior pattern is influenced by the environment. Thus the patient's behavior is the function of the situation (context), which generates a unique behavior. And in that environment, the nurse responds to the unusual behavior so caused.

ComplexityScience

Complexity science has gained much popularity in different disciplines. Complexity is the interactions between the different parts of the system. Complexity science is concerned with the wholes, not just the elements. It is because to understand a phenomenon in a more in-depth and qualitative way. Complexity theory is defined as a collection of individuals who are free to act unpredictably and whose actions are interrelated and interconnected. In the process, one individual's actions change the context for other individuals (reciprocal impact). The complexity system consists of a vast variety of components, and the elements have specialized functions. These components are organized at the level of internal hierarchy. The array of connectors is involved in linking the levels and parts, highlighting the high density of interconnections. However, complexity theory is often used interchangeably with other terms. One of the terms most known is complex adaptive systems (CAS) (Notarnicola, Petrucci, De Jesus Barbosa, Giorgi, Stievano, Rocco & Lancia, 2017).

In light of the complexity of science and complex adaptive systems, it can be argued that nothing is static. The human body is not a machine which is operated sequentially. In the nursing profession, updated knowledge is very much necessary to comprehend the behavior of the patients. However, the learning of the nurses is an unpredicted process as illustrated by the CAS. The knowledge and the response to the patients are developed as a complex and contingent environment. It contends that most of the time, things happen unplanned, and the planned ones rarely happen because circumstances change. Thus, it emphasizes the importance of the person, environment, and nursing.

Conclusion

The phenomena of interest are actually what the research is related to, explain and describe. Different but mostly few and specific concepts are used in phenomena of interest. Four of them are the person, health, environment, and nursing; central to the nursing science. The meta-paradigm has shifted the concentration of the scholars towards the left gap in nursing in the four concepts. The meta-paradigm has argued that the general public has valued nursing as a highly trusted profession, and in turn, the trust makes nurses responsible for providing valuable health care. This phenomenon of trust does mean that the nurses should be well-educated, clinically astute, and professionally organized. Several overarching theories are used to encircle the importance of the phenomena of interest. However, the grand theory is used in the study to explain the phenomena. In grand theory, they discovered that cultural and care knowledge is lacking and associated them with the missing link to nursing understandings. The author emphasized that it was necessary for the nurses to follow many variations in culture and expertise required to support the wellness, compliance, and healing of the patients.

The middle-range theory, "Nursing Process theory," used in the study contends that a proper communication system needs to be developed so that the patient's immediate needs for help would be fulfilled. The creation of an effective response would require the nurses to decode the social

information. However, the decoding process would be achieved by using a cognitive process. Finally, the complexity theory states that individuals are free to act unpredictably and whose actions are interrelated and interconnected. In the process, one individual's actions change the context for other individuals (reciprocal impact). In the process, multiple components are involved, and these components are organized at the level of internal hierarchy. A variety of connectors are included to link the levels and elements, highlighting the high density of interconnection.

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