

Evaluation of dorothea orem's theory



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Introduction

“ Nursing is a practical endeavor, but it is practical endeavor engaged in by persons who have specialized theoretic nursing knowledge with developed capabilities to put this knowledge to work in concrete situations of nursing practice (Alligood, 2014 pp. 240).

Dorothea Orem's theory of self-care deficit is client centered, because it involves the patient being the focus of care done to the patients' inability to perform selfcare which leads to health-related problems. Her contribution is widely used in our standard of practice as well as Educative.

Self-care according Alligood, 2014 defined Orem's theory as that which comprises of various activities that maturing and mature persons initiate and perform within specified time frames for themselves in order to maintain a good life, healthful functioning, continuing personal development and well being by meeting needs for functional and developmental regulations.

How Does Your Theorist View the Individual in Care?

According to Orem's theory, it is focused on the individual's role in maintaining health with increased understanding of illness patterns, Orem acknowledge the effects of multiple lifestyle factors such as diet and exercise reminding nurses that patients can look after their own health and also that they must learn to care for themselves within their families and communities (Potter et al., 2019, pp. 69).

“ Individuals are responsible for universal self-care requisites:

- Maintaining sufficient intake of air, water and Food
- Maintaining a balanced between activity and rest, and between solitude and interaction
- Providing for elimination processes.
- Promoting hazards to life, functioning, and well-being.

Promoting functional and growth in social groups in accordance with human potential” (Potter et al., 2019, pp. 69)

When the individual involved cannot take care of himself or herself, self-care deficit will occur. Therapeutic self-care deficit is the relationship between an individual's therapeutic selfcare demands exceeds selfcare agency, in this case a self-care deficit exists and nursing is needed. (Alligood., 2014, pp. 246).

How Does Your Theorist View Nursing Care?

According to Orem, Nurses are to act temporarily for the Patient until they could resume a more independent role in selfcare. (potter, et, al 2019).

Nursing care: Orem's Approach to the nursing process provides a method to determine the self-care deficits and then define the role of patients or nurses in meeting self-care demands.

Classifications of Nursing System

The nursing systems are classified as:

- Wholly compensatory system: patient being dependent

- Partly compensatory system: meet some self-care requisites but needs a nurse to help meet other needs.
- Supportive-Educative system: when a patient can meet self-care requisites but needs assistance with decision making. (Orem et al., 2003, pp. 110-116)

How Does Your Theorist Resonates with You with Minimum of Two Examples?

The theory resonates with me by having a foreknowledge of potential problems and this will help in promoting self-care attitude. Also, that individual should be dependent and responsible for their care (families and communities). Selfcare actions are learned through the behavior and interaction with others. It helps to bring nurses and individual together. Responsibility for one's action helps primary care prevention and ill health.

Examples

1. During childbirth I had episiotomy. The nurses educated me about it and taught me the aftercare by sit bath which means sitting the affected area in warm water thrice daily to prevent infections. I did it and I noticed the affected area was healed up within few days.

2. When I gave birth to my second son, the nurses said on getting home I should continue to use water for the cleaning of his navel to prevent infection and also for healing. After doing it I noticed the umbilical cord was detached within few days and the healed up faster.

3. Also another example there was a time I had a strain in my joint so my family doctor referred me to the pain management clinic and I was given a

steroid injection on the joint of my right hand. After the procedure the nurses taught me on how to do physiotherapy on the hand that it will make it heal up faster which I start doing after few days and I feel lots better after

Orem's theory actually made me to be self-reliant, educated and responsible for my own care.

It really promotes selfcare.

Discuss How Theory Can Be Demonstrated in Nursing Practice and Provide Three Examples

The theory of selfcare deficit describes how people can be helped through Nursing by Educating patients as well teaching them on selfcare importance to be able to know what to do. Also, Provision of an environment that promote personal development, this can be for the seniors that live in the long-term care that have the health care aides providing care for them. In most cases nurses are also to guide and direct individuals about selfcare. Provision of physical or psychological support when needed, giving patients supports really go a long way taking them through the process. Acting for or doing for another. A helping method is a series of action that, if performed will compensate for ill health. Nurses use all methods, selecting and combining them in relation to demand on individual under nursing care.

(Alligood. M. R., 2014. pp 246)

Examples

1. When a patient undergo surgery in the abdominal area. The patient will need the help of

the nurse for some needs while the patient performs some too on her own. In this case the patient and the nurse perform a major role in selfcare. The nurses Educate and orientate the patient after being discharged on how and things to do on selfcare.

2. For instance, in a case of an accident and the patient goes to coma. In this case the nurse

will need to perform the entire role, from the daily self-care to monitoring the patient's bowel movement and ensuring that the patient looks presentable for when the family members come around to see their loved one.

3. Also, for patients that are mentally retarded. Nurses help will be needed for their needs

especially in maintaining a conducive environment for them, most of the patients may not be cognitive but with the nurses around, they help in making their environment welcoming and this also helps in the healing process for the patient because they pick on what they see and having a good care protects their dignity.

4. In the case of an accident and the patient has Fracture or spinal cord injury. The patient is

aware of his surroundings but will not be able to perform selfcare. For spinal cord injury, most patients are usually quadriplegic or paraplegic, this limits their range of motion and makes them incapable. With the help of the nurses, it gives them self-confidence and a sense of worth that they are an important part of the society. The nurses help with their daily care and feeding.

Nursing diagnosis are diagnosis which nurses are permitted to diagnose a patient according to NANDA and within the scope of nursing practice. It is usually in response to actual and potential health problems of the patient. Nursing diagnosis is what helps nurses to intervene for the patients and to achieve desired outcomes.

A nursing diagnosis are developed and it includes the following components:

- Common related factors which includes etiologies related with a diagnosis for an actual problem.
- Defining characteristics which is the assessment data that supports the nursing diagnosis
- Common risk factors which includes those situations or conditions that contribute it the patient's potential to develop a problem or diagnosis.
- Common expected outcomes.
- Ongoing assessment
- Therapeutic intervention, both independent and interprofessional.

Nursing diagnosis:

Self-care deficit: Bathing, dressing, feeding, toileting, transfer and ambulation as related to neuromuscular impairment, musculoskeletal impairment, alteration to cognitive functioning, perpetual impairment, fatigue, weakness, pain, decrease in motivation and environmental barrier as evidenced by impaired mobility to bathe and groom self independently, impaired ability to dress/undress self independently, impaired ability to feed self independently, impaired ability to perform toileting tasks independently,

impaired ability to transfer from bed to wheelchair and impaired ability to ambulate independently.

SUMMARY

Orem's theory is based on the individual action in maintaining health. The theory formed by Dorothea Orem (1971) is a self-care theory, which explains the ways in which individual is responsible for meeting the necessary basic self-care requirement or needs for maintaining life, health, and wellbeing. When self-care is effectively performed it helps to maintain integrity and human functioning. This helps to promote human development. The theory of selfcare deficits describes the limitation involved in meeting requirements for ongoing care and effects they have on the health and wellbeing of the person. The theory of nursing systems provides the structure for examine the actions and knowledge required to assist.

References

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