

# Nursing nursing theorist nursing theory - hildegard peplau research paper

[Sociology](#), [Communication](#)



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Nursing converged from the humble beginnings of benevolent caring venture for the ill and ailing towards a scientific endeavor in the twenty-first century.

It has undergone immense changes emerging out of intuitive interventions

towards evidence-based practices articulated by theoretical knowledge. In the following pages of this presentation embraces the contributions made by a renowned nursing theorist, Hildegard Peplau, and how her work has impacted the nursing profession.

## **Nursing: Nursing Theorist/ Nursing Theory - Hildegard Peplau**

### Part 1- Theorist/Theory

#### Introduction

#### Personal information

Dr Peplau (1999) was the first nurse to have published theories after the significant Florence Nightingale era. She has been distinguished by her theory on ' Interpersonal Relationships,' which emphasized that the nurse/client interpersonal relationship is fundamental to nursing practice.

The text outlining her conceptual framework was published in 1948 and was recognized as a scholarly production. Interpersonal Relations in Nursing was considered a masterpiece; not co-authored by a physician. The eloquent scholarship of this publication soon took to nursing school libraries and classrooms across the world after being scrutinized for four years prior to its first release (Forchuk, 1993).

The give-and-take concept of nursing was the highlight of her revolutionary theoretical perspective, which she later expanded and adapted into subsequent theoretical models projecting seven nursing roles. They have been classified as stranger; resource; teaching; counseling; surrogate; active leadership and technical expert (O'Toole & Welt, 1989).

Dr. Hildegard Peplau (1999) obtained her master's and doctoral degrees

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from Teachers College, Columbia University. Adding to her academic credentials was a certificate in psychoanalysis from the William Alanson White Institute of New York City. Peplau (1999) during the 1950's developed a curriculum and taught the first classes for graduate psychiatric nursing students at Teachers College (Tomey & Alligood, 2006).

This luscious career placed Dr. Peplau (1999) in the position of faculty member at the College of Nursing, Rutgers University from 1954 to 1974. There she designed the first graduate level program to prepare clinical specialists in the psychiatric nursing discipline. This nursing legend was acknowledged as a prolific writer and speaker who shared her expertise at workshops and seminars across United States of America (Tomey & Alligood, 2006).

She also served as advisor to World Health Organization lecturing as visiting professor to nurses in Belgium, Africa and Latin America. This distinguished nursing theorist shared her skills as a consultant to US Surgeon General, US Air force and the National Institute of Mental Health. Psychiatric Nursing was her specialty (Tomey & Alligood, 2006).

## **Major Characteristics**

### Theory Identification

For the purposes of this discussion Peplau's (1999) theory on interpersonal relationships will be explored. The assumptions of this theory embrace the concept of give-and take. This consists of an interpersonal model projecting the effectiveness of partnership between nurse and client. This was clearly opposed to traditional nursing practice patterns whereby the nurse/client

interaction consisted of a passive patient/client dispensation of care by the nurse and client/patient receptivity without actively participating in the intervention (Tomey & Alligood, 2006).

Essentially, Dr. Peplau's (1999) theories depicted the concept of a shared experience. The role of nurses in this process she projected were facilitators, observers, describers, formulation of diagnoses, interpretation of outcomes, validation of patients' concerns, and intervention. The example she highlighted in articulating this theoretical perspective was that when a nurse listens to a client/patient's concern he/she perceives the situation from a generalized paradigm. Thereafter, the process of validation follows. Here the nurse allows herself to become aligned with the patient's aspirations by making inferences in establishing accuracy between his/her perception as against the patient's representation of his/her concern. The outcome of this intervention Peplau (1999) predicted could be experiential learning, improved coping strategies, and personal growth for both parties (O'Toole & Welt, 1989).

Further, the theorist identified four developmental stages/phases in the nurse/ patient interpersonal relationship process. Orientation begins the first phase, then identification, exploitation and resolution. These concepts are integrated in Peplau's nursing roles articulation of the nursing process interpersonal relationship intervention cycle (O'Toole & Welt, 1989).

## **Theory Usefulness**

This theory has been applied to the nursing process when making decisions regarding patient/client centered care, especially, if a patient's cooperation

has to be solicited for successful execution of a procedure. These include dialysis; administration of enemas, medication; applying dressings to a wound or even the simple back care intervention. The give -and take mechanism is actively undertaken for effective outcomes in patient care intervention. This theory has been very effective in psychiatric nursing when it is important to communicate with patients/clients whose orientation to time and space seems out of proportion with the nurse's interaction.

## **Part 11 - Discussion of theoretical concepts**

### Major Characteristics

#### Concepts/ Assumptions

The interpersonal relationship theory embraces four profound concepts. They were mentioned previously, but for emphasis here they are again; orientation, identification, exploitation and resolution. Orientation involves the getting acquainted phase of the relationship. At this phase preconceptions are clarified; boundaries of interaction are established; some degree of trust is enacted and roles justified (Peterson, 2009).

During the identification phase a bond begins to build between patient/client and nurse. The patient/client begins to identify issues, which need to be resolved and actions the nurse can take to help in the resolution. Likewise the nurse begins to feel obligated and responds to the client/patient's wishes. In responding the nurse's main role is to help her patients/clients understand the importance of their participation in achieving favorable outcomes (Belcher & Brittain-Fish, 2002).

In the exploitation phase four elements emerge. They embody saturation of

trust levels whereby the client exploits the nurse's services to its full potential and takes every advantage of it. He/she develops the ability to solve problems immediately while preparing for discharge. At this point patient/client's goals have been met (Belcher & Brittain-Fish, 2002).

The fourth and final phase of this interpersonal relationship theory relates to after needs are fulfilled the patient/client and nurse mutually ends the relationship upon discharge. Precisely, the patient develops independence and security to function without the help of a nurse. The patient/client leaves the facility or clinic where the temporary interpersonal relationship was established to function independently (Peterson, 2009).

## **Relationship of Concepts/theory**

Nursing Paradigms/Other theories

The interpersonal relationship theoretical assumptions can be associated with the metaparadigms in nursing as well as the nursing process. Similar to the interpersonal relationship theoretical assumptions, which have four phases the metaparadigms also, have four distinct related stages. They are the person, environment, health and nursing. Within the interpersonal relationship framework the patient is linked to the person in a metaparadigm context and center of the interaction. Environment can be associated with the clinical setting where the interpersonal relationship exists. Health is the goal set to be achieved in the nurse/client interaction and nursing roles enacted by the nurse and client in promoting problem resolution in the interaction.

With regards to the nursing process there are four levels to it as well. They

are assessment, planning, implementation and evaluation. The orientation phase can be associated with assessment in getting- to- know each other interaction, after which a nursing diagnosis emerges. Planning could be linked to the identification phase whereby goals are set with participation from client/patient in the interpersonal relationship interaction.

Implementation and exploitation can be considered as mutually carrying out tasks to achieve goals formulated. Finally, evaluation and resolution the client patient relationship ends after goals have been achieved.

## **Part111- Application of nursing theory and concepts**

Potential for Practice

Education/Leadership

Interpersonal relationship theoretical perspective is applicable to nursing education in designing curricula particularly in executing the nursing process. In gaining cooperation to successfully achieve health goals identified in metaparadigms, an interpersonal theoretical perspective must be embraced. This theory is used in nursing education as the basic approach to patient care intervention.

As a leadership application strategy advanced practice nurses use this theoretical perspective in guiding how they relate to nurses and clients in their private practice outside of hospital settings. It is the same concepts are applied when managing new staff or when interacting with co-workers.

Interpersonal relationships cross disciplines into diverse practice areas.



## Conclusion

Application of examples in research

Dr. Joanie Connors (2012) linked interpersonal relationship with systems theory in research to advance that psychotherapy practitioners and psychological scientists tended to be most concerned with individuals. It was not until interpersonal psychology and systems theory emerged around fifty years ago that they were perceived as being co-existing perspectives. Only then she contended interpersonal psychology embraced investigating elements of an interaction that initiate successful intimate relationships. Meanwhile they continue to contend that systems thinking added 'holism, boundaries, and the change process to the analysis of relationships' (Connors, 2012).

Hays (1961) applied the interpersonal relationship theory towards experimental teaching. It embodied applying phases and steps towards measuring the concept anxiety: 'Findings revealed that when taught by the experimental method, the patients were able to apply the concept of anxiety after the group was terminated' (Nursing theories 2012). Other studies when utilizing the interpersonal relationship theoretical framework revealed that students became competent when interpersonal relationships concepts were practiced. This conclusion emerged after a test was designed to test various levels of anxiety in patients (Nursing theories 2012).

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