

# Research paper on review of hendersons basic needs theory

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## **Review of Henderson's Basic Needs Theory**

The basic needs theory was advanced by Virginia Henderson in 1964.

According to the theory, nursing care is based on 14 basic needs. Of these, eight are relate directly to bodily functions whilst the other six pertain to safety and the discovery of meaning in life (Funnell, Koutoukidis, & Lawrence, 2008, p. 19). In this paper, Henderson's credentials, the foundations, propositions, views of the metaparadigms of nursing, strengths, and weaknesses of her theory will be explored. The other aspects to be addressed in the essay include the theory's applicability to current and future nursing practice, acute, chronic/rehabilitative care, and wellness care.

## **Virginia Henderson's Credentials**

Virginia Henderson was a nurse, nurse educator (O' Malley, 1996, p. 3), researcher, scientist, leader (Jezierski, 1997, p. 386), an author, an artist, and a quintessential human being (Halloran, 1996, p. 17). She is also called the mother of modern nursing (Butts & Rich, 2011, p. 390). She graduated from the Army school of Nursing, Washington, DC, with a bachelor of science (Nursing) degree in 1921. She also graduated with a master's degree in nursing education from the Teachers college, Columbia University in 1931. She coauthored several nursing books and conducted extensive nursing research. In the 1930s and 40's, she taught at the Teachers college, Columbia University. After 1953, she started teaching at the Yale School of Nursing (Klainberg & Dirschel, 2010, p. 35).

## **Foundations of the Needs Theory**

Henderson's theory is considered a needs theory because it describes the potential roles and functions of nurses in relation to patient needs. It emphasizes on the nurses's role in substituting, supplementing and complementing patient's needs with the overall goal of maintaining or achieving independence (Kim & Kollak, 2006, p. 19). The theory is also considered a grand theory as it attempts to describe the meaning of the phenomenon of nursing. The philosophical foundation of the theory matured from the theorist's personal experiences from working in surgical, medical, pediatric, psychiatric, and home-based nursing. The 14 points of care developed by Henderson are based on essential philosophical values the theorist believed are indispensable in the provision of care. Care in the theory is accomplished via attendance to the 14 points of care identified (McEwen& Wills, 2007).

## **Propositions of Henderson's Needs Theory**

Henderson did not state the propositions of her theory explicitly. Primary relationship statements can be extrapolated from her theory though. These statements relate to the nurse-patient relationship and include: the nurse is a substitute for the patient, a helper to the patient, and a partner of the patient. During times of serious illnesses, Henderson suggested that the nurse substitute acts as a substitute for whatever the patient lacks due to deficits in strength, will, or knowledge. When the patient is convalescing, the nurse helps him or her to regain his or her independence. The nurse and the

patient also work together as partners in formulating a plan of care for the patient (Butts & Rich, 2011, p. 397).

## **View of the Metaparadigms of Nursing**

### **Person**

The perspective of the person gleaned from the theory is that of a patient who is composed of four inseparable components: biological, psychological, spiritual, and social aspects. The patient according to the theory requires assistance in achieving independence in meeting the 14 basic needs congruent with the 14 components of nursing care identified by the theory. Henderson in her theory views the patient and family as a unit (Butts & Rich, 2011, p. 393).

### **Environment**

According to Henderson, the environment is the sum of all external conditions and influences that have impacts on the life and development of a living organism. She considers the environment as comprising of three components: biological, physical, and behavioral. The biological elements comprise of all living things including microorganisms, plants, and animals. The physical components consist of water, sunlight, oxygen, carbon dioxide, nutrients, and organic compounds. The biological and physical components converge to form what Henderson refers to as an intricately balanced ecosystem. This implies that from her view, there is an interdependent relationship between living organisms and their environs such that fluctuations in one part results in changes in other components of the ecosystem. The behavioral component refers to the way human beings

engage in social interactions, economic, customs, legal, religious, and political systems, all which influence health. In her theory, Henderson postulates that illness subverts one's ability to control the environment and the role of the nurse is to alter the environment in a manner that supports the patient (Butts & Rich, 2011, p. 395).

## **Health**

Henderson did not provide an explicit definition of health, she, however, equated health to independence. According to the theory, one's level of health is directly related to the person's ability to meet the 14 basic needs independently. The theory also suggests that individuals maintain or achieve health so long as they have the necessary will, strength, and knowledge to do so (Butts and Rich, 2011, p. 394).

## **Nursing**

Henderson in her theory defines the functions of nursing. She describes the roles of the nurse as substitutive, supplementary, or complementary. These roles emphasize on helping patients to become independent. Henderson also expresses the view that implementation of the medical plan of care is also a function of nurses. She, however, points out that nurses are independent practitioners in the provision of basic nursing care and they utilize both scientific knowledge and critical judgment in determining and meeting the care needs of their patients. Nurses attend to the holistic needs of their patients through emphatic and educated attention to the 14 basic needs outlined by Henderson (Butts and Rich, 2011, p. 395).

## **Strengths of the Need's Theory**

The assumptions that underlie the theory are logical and congruent with empirical and literature conclusions of scientists in other fields. Additionally, Henderson's definition of nursing and basic needs though simply stated are broad in scope to incorporate the whole person and roles of nurses at all practice levels. The conceptual definitions and relationships expressed in the needs theory display a lot of internal consistency. Moreover, her theory has sufficient scope to influence nursing curriculum and theory development, clinical nursing research, and clinical nursing practice (Butts & Rich, 2011, p. 396).

## **Weaknesses of the Theory**

Henderson did not develop operational definitions or the interrelated theoretical statements that enable a theory to be tested empirically. The concepts of the theory can, therefore, not be measured via research (Butts & Rich, 2011, p. 396).

## **Application of the Needs Theory to Current and Future Nursing Practice**

The concepts of Henderson's theory are narrow in words but broad in scope of application. They are applicable to all kinds of patients, levels of nursing practice, and current and future nursing practice. Current nursing practice utilizes the 14 components of nursing care described by Henderson as a framework for the administration of nursing care.

In the assessment phase of the nursing process, nurses assess patients needs based on the 14 basic needs identified by Henderson. Depending on

the findings of the assessment and considerations of the patient's will, strength, and knowledge, nurses decide whether a patient needs assistance in meeting his or her basic needs. Plans of care are then developed for patients found to have deficits in certain areas. The planned interventions are aimed at meeting the patient's care needs in a way that promotes his or her independence. During the implementation phase, interventions aimed at helping the patient perform activities that promote the achievement or maintenance of health or go through a peaceful death are provided. These interventions are individualized to the patient's needs and are based on physiological principles.

In the evaluation phase, the patient's ability to meet his or her basic needs without assistance is assessed and nursing care adjusted as appropriate. The theory is also applicable to future nursing practice because the basic human needs outlined by Henderson are unlikely to change with time. In addition, Henderson's definition of nursing will be completely viable with the advanced roles that nursing may embrace in the future (Butts & Rich, 2011, p. 392). For instance, if current trends continue, advanced practice nurses will soon be allowed to perform roles that were previously in the realm of physicians. Henderson had noted in her theory that these roles are complementary with the independent functions of nursing practitioners in regard to basic care. Acutely ill patients require assistance with most activities of daily living in addition to medical care. Henderson's needs theory thus provides a framework for the assessment and delivery of nursing care in acute care. The aim of rehabilitative and chronic care is to enhance the patient's independence by improving their self management capacity. This can be

achieved through patient education and tapering off of medical and nursing care as appropriate. Henderson's needs theory provides a framework for the provision of rehabilitative and chronic care to patients. Lastly, the theory provides a holistic and comprehensive approach to patient care hence it can be used to promote health and wellness.

## **Conclusion**

In summary, the essay has outlined Virginia Henderson's credentials and described the foundations, propositions, treatment of the metaparadigms of nursing, strengths and weaknesses of her basic needs theory. Also discussed is the viability of her theory to current and future nursing practice, acute care, chronic/rehabilitative care, and wellness care.

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