

Transcultural nursing theory vs humanistic nursing theory



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The profession of nursing is an action or duty to provide for others, based on the science of caring. Throughout the years, many nursing leaders have developed ideas and concepts about the nursing profession. There have been attempts to define the profession and identify exactly what it is that motivates nurses to give compassionate care to their patients. As a result, nursing theories have been developed to assist in understanding the art of caring. Nursing theories are concepts and ideas that are grouped together for the purpose of describing, explaining, predicting, or prescribing nursing care (George, 2002, p. 5).

Purpose

The purpose of this paper is to compare and contrast the culture care diversity and intercultural nursing theory of Madeleine Leininger with the humanistic nursing theory of Josephine Paterson and Loretta Zderad. There will be identification of the key concepts of each theory, presentation of similarities and differences of the theories, and connection of these theories with other related theories.

Rationale

Nursing is the act of caring for others, which requires the use of knowledge and performing actions to provide health services for other people.

According to Dr. Gail Mitchell (George, 2002), "Nursing science represents clusters of precisely selected beliefs and values that are crafted into distinct theoretical structures" (p. 2). Nursing theories have been present for many years, dating back to the ideas of Florence Nightingale, to the current ideas of nursing leaders of modern day. Madeleine Leininger's theory of culture care diversity and universality was developed in 1976. The formulation of <https://assignbuster.com/transcultural-nursing-theory-vs-humanistic-nursing-theory/>

this theory was a result of Leininger's experiences working in a child guidance home during the 1950's. She realized that recurrent behavioral patterns in the children appeared to have a cultural basis. This motivated Leininger to discover unknown knowledge about cultures and their core values, beliefs, and needs, in order to provide culturally congruent and competent care for all patients (Parker, 2006). This theory became known as the transcultural nursing theory. It addresses the cultural dynamics that have an effect on the nurse-patient relationship.

Josephine Paterson and Loretta Zderad are credited with the formation of the humanistic nursing theory, which was first published in 1976. Paterson and Zderad originally developed the ideas associated with the humanistic nursing theory as a way to define the nursing profession. It was a way to illustrate the values and meanings central to nursing experiences. The nurse-patient relationship is formed when there is a call from a person, a family, a community, or from humanity for help with some health-related issue (Parker, 2006). The response between the two parties, nurse and patient, is the act of nursing.

Madeline Leininger's Intercultural theory

The culture care theory is very established in the contemporary setting and used by various nursing institutions globally. It is in fact regarded as the most noteworthy nursing breakthrough in the health sector in the last century. The culture is renowned for its extensive, holistic but culturally-specific concentration in discovering resourceful healthcare to different world cultures. The theory provides a hypothetical study information for the ever

expanding faculty of transcultural nursing. It avails new educational material on ways of caring for immigrants of various ignored cultures.

The theory remains one of the oldest in nursing having been initiated 1950s and has unique features separating it from the other theories. It is the sole nursing theory overtly centered on cross-cultural relationships of health related complications. It is also the lone theory that attempts to dissect culture care. It is very holistic when compared to the other nursing theories and extends to cover multi-dimensional aspects of culture based healthcare. Its research methodologies extend across global cultures, analyzing the differences or diversities and commonalities of health complications and associated care across cultures. It uses a research method-ethnonursing, a feature that uniquely separates it from humanistic nursing theory. It employs theoretical and practical concepts (Parker, 2006).

The hypothetical tenets of this theory are pulled from Leininger's broad and diverse experiences in nursing, anthropological approaches, experiences of life, human values and ingenious thoughts. The main point of this theory is determine and elucidate different and global ethnically based care aspects that influence health, illness and individual or mass deaths. The research findings of the theory are meant to offer solutions that are safe, resourceful and most importantly congruent with specific cultural identities. The means for safe, resourceful and congruent decisions and actions are the explained in the theory's proposals, a slight deviation from this means would imply illness or death of the patients.

The theory has assumptive theories. First, care of patient is the essence of the practice of nursing and a discrete, overriding, essential and uniting focus. Second, care based on cultural profiling is crucial for health, development, continued existence and in facing disability or death. Third, care based on culture is the broadest, holistic and definitive means of knowing, elucidating, interpreting, and forecasting assistive congruent healthcare practices. Fourth, care based on culture is crucial in attempts to cure and heal, because there can be no healing without specific care. Lastly, concepts, patterns, implications, expressions and procedures differ across cultures, with manifestation of differences and similarities.

Basically, the theory proposes the application of a culture's traditionally used healing methods, then use of worldwide practices. For instance, in the case of a bee sting in a practical example, a mother of a Hispanic male used garlic to try and slow down the swelling from the sting. The use of the garlic to help against the bee sting is that culture's unique curing and healing methods (generic).

Humanistic Nursing Theory

The humanistic nursing theory postulates that professional nurses have a duty to knowingly and deliberately approach the practice of nursing as an ongoing experience. After an experience, nurses have a duty to reflect and draw their calls and response from lessons learnt. Collection and corresponding syntheses of observed nursing phenomena over a period of time will produce explicit description of scientific tenets to be observed in nursing. Humanistic theory views nursing as an experience assembled over time among humans. Every nursing circumstance evokes responses, and <https://assignbuster.com/transcultural-nursing-theory-vs-humanistic-nursing-theory/>

influences the expression and materialization of humans' ability to survive particular existent conditions (Parker, 2006). A nurse has a responsibility to manage these situations and associated conditions of being or herself.

Humanistic nursing takes into account more than caring, technically capable nurse-patient relationship. Rather, it requires that nursing is a liable insight, transactional association whose resourcefulness demands abstraction rooted on a professional nurse's experiential consciousness of self and others.

Existential experience supposes human being awareness of self and others, and recognition of all individuals' singularity existence and their own uniqueness in situations. Only an individual can know his or her situation and therefore understand what is needed in his or her situation. The uniqueness of humans presents both fear and hope. However, while each man is unique in his or her own way, he or she is like other fellow human beings. Man's uniqueness makes him similar to all others, since all are unique.

Existential consciousness necessitates one self's authenticity. This authenticity is more than intellectual, academic or scholarly awareness. Issues involved are " auditory, olfactory, oral, visual, tactile, kinesthetic, and visceral responses" (Peterson & Zderad, 2008). Each of these can transmit distinctive connotation a human being's consciousness. When one is in touch with these issues, he or she can form responses about quality of life and extent of his or her presence with the rest. When human beings stop hiding more of themselves, the more they open up to others. Self-awareness, being in touch with self, acceptance of the self and materialization of potential enables one to enter into a sharing relationship with others. From existential relationship, a nurse confronts a man as a singular and uniquely peculiar, <https://assignbuster.com/transcultural-nursing-theory-vs-humanistic-nursing-theory/>

with his or her own lived existence. The interaction of a nurse and her patient will determine her actions, since she relies on insight from the patient for diagnosis. This theory greatly uses phenomenological account of individual nursing cases from the nurse's viewpoint, the response from the patient and interaction. The main beneficial attribute of the theory is its infusion of art and science in nursing. Caring is emphasized as a key ingredient of nursing.

Difference and Other theories

The transcultural theory as hypothesized by Leininger is a middle-range theory because it is resourceful in ambiguous circumstances. The humanistic theory is a grand theory because it does not have a holistic approach and is merely theoretical. Grand theories have less holistic approaches as compared to the middle-range theories, and are inferior in their practical usefulness. Factual work gained from phenomenological and existential observations provide a powerful framework for the transcultural nursing theory.

An example of a related nursing theory is Kathryn Barnard's Parent-Child interaction Theory that was launched in 1979. It draws from the reality that the development of a healthy child after conception is heavily dependent on the infant's parent or guardian. Such a parent has a duty to raise the child in a caring and loving way (Wacharasin, Barnard & Spieker, 2003). Kathryn has created, published, and implemented child assessment protocols that are based on evidence. In the theory, issues like maternal aspects, growth and development knowledge, depression and stress heavily affect the quality of interaction of infant and its mother.

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Conclusion

These nursing theories have been formulated with the main component being the care of the patient. All the theories respect the quality of life and offer the best course for patient and nurse interactions.