

ROY'S ADAPTATION MODEL OF NURSING

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Introduction of theorist

- Sr. Callista Roy, was a prominent nurse theorist, writer, lecturer, researcher and teacher Professor and Nurse Theorist at the Boston College of Nursing in Chestnut Hill
- she was Born at Los Angeles on October 14, 1939 as the 2nd child of Mr. and Mrs. Fabien Roy
- she earned a Bachelor of Arts with a major in nursing from Mount St. Mary's College, Los Angeles in 1963. a master's degree program in paediatric nursing at the University of California ,Los Angeles in 1966. She also earned a master's and PhD in Sociology in 1973 and 1977, respectively.
- Sr. Callista had the significant opportunity of working with Dorothy E. Johnson
- Johnson's work with focusing knowledge for the discipline of nursing convinced Sr. Callista of the importance of describing the nature of nursing as a service to society and prompted her to begin developing her model with the goal of nursing being to promote adaptation.
- She joined the faculty of Mount St. Mary's College in 1966, teaching both paediatric and maternity nursing.
- She organized course content according to a view of person and family as adaptive systems. She introduced her ideas about 'Adaptation Nursing' as the basis for an integrated nursing curriculum. Goal of nursing to direct nursing education, practice and research Model as a basis of curriculum impetus for growth--Mount St. Mary's College 1970-The model was implemented in Mount St. Mary's school 1971- she was made chair of the nursing department at the college.

The Adaptation Model of Nursing is a prominent nursing theory aiming to explain or define the provision of nursing science. In her theory, Sister Callista Roy's model sees the individual as a set of interrelated systems who strives to maintain balance between various stimuli.

The Roy Adaptation Model was first presented in the literature in an article published in *Nursing Outlook* in 1970 entitled "Adaptation: A Conceptual Framework for Nursing." In the same year, Roy's Adaptation Model of Nursing was adapted in Mount St. Mary's School in Los Angeles, California.

Roy's model was conceived when nursing theorist Dorothy Johnson challenged her students during a seminar to develop conceptual models of nursing. Johnson's nursing model was the impetus for the development of Roy's Adaptation Model.

Roy's model incorporated concepts from Adaptation-level Theory of Perception from renown American physiological psychologist Harry Helson, Ludwig von Bertalanffy's System Model, and Anatol Rapoport's

Major Concepts

Person

"Human systems have thinking and feeling capacities, rooted in consciousness and meaning, by which they adjust effectively to changes in the environment and, in turn, affect the environment."

Based on Roy, humans are holistic beings that are in constant interaction with their environment. Humans use a system of adaptation, both innate and acquired, to respond to the environmental stimuli they experience. Human systems can be individuals or groups, such as families, organizations, and the whole global community.

Environment

"The conditions, circumstances and influences surrounding and affecting the development and behavior of persons or groups, with particular consideration of the mutuality of person and health resources that includes focal, contextual and residual stimuli."

The environment is defined as conditions, circumstances, and influences that affect the development and behavior of humans as adaptive system. The environment is a stimulus or input that requires a person to adapt. This stimuli can be positive or negative.

Roy categorized this stimuli as focal, contextual, and residual. Focal stimuli are that which confronts the human system, and requires the most attention. Contextual stimuli are characterized as the rest of the stimuli that present with the focal stimuli, and contribute

to its effect. Residual stimuli are the additional environmental factors present within the situation, but whose effect is unclear. This can include previous experience with certain stimuli.

Health

“Health is not freedom from the inevitability of death, disease, unhappiness, and stress, but the ability to cope with them in a competent way.”

Health is defined as the state where humans can continually adapt to stimuli. Because illness is a part of life, health is the result of a process where health and illness can coexist. If human can continue to adapt holistically, they will be able to maintain health to reach completeness and unity within themselves. If they cannot adapt accordingly, the integrity of the person can be affected negatively.

Nursing

“[The goal of nursing is] the promotion of adaptation for individuals and groups in each of the four adaptive modes, thus contributing to health, quality of life, and dying with dignity.”

In Adaptation Model, nurses are facilitators of adaptation. They assess the patient’s behaviors for adaptation, promote positive adaptation by enhancing environment interactions and helping patients react positively to stimuli. Nurses eliminate ineffective coping mechanisms and eventually lead to better outcomes.

Adaptation

Adaptation is the “process and outcome whereby thinking and feeling persons as individuals or in groups use conscious awareness and choice to create human and environmental integration.”

INTERNAL PROCESSES

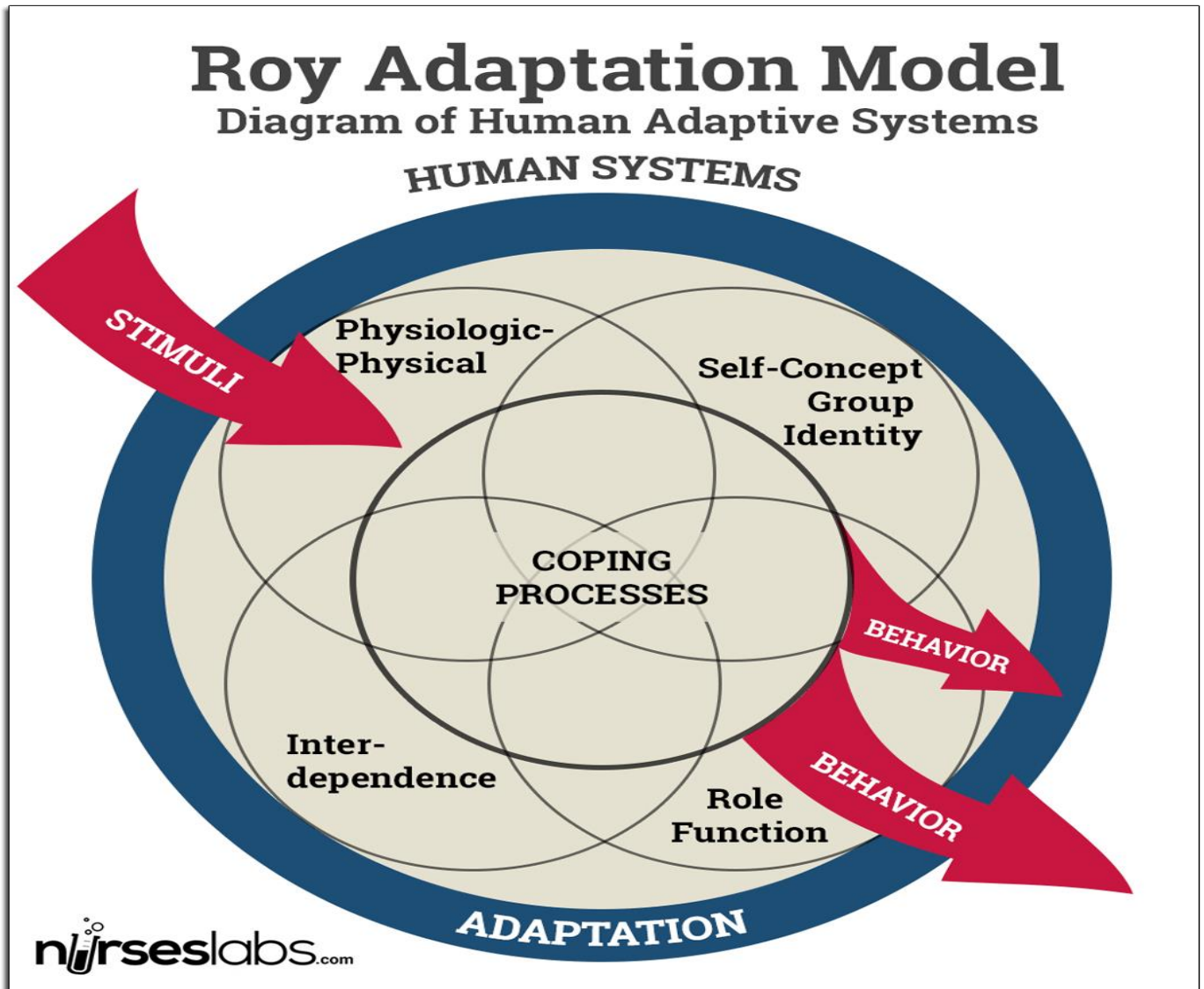
Regulator

The regulator subsystem is a person’s physiological coping mechanism. It’s the body’s attempt to adapt via regulation of our bodily processes, including neurochemical, and endocrine systems.

Cognator

The cognator subsystem is a person’s mental coping mechanism. A person uses his brain to cope via self-concept, interdependence, and role function adaptive modes.

Four Adaptive Modes-



Diagrammatic Representation of Roy’s Human Adaptive Systems.

The four adaptive modes of the subsystem are how the regulator and cognator mechanisms are manifested; in other words, they are the external expressions of the above and internal processes.

Physiological-Physical Mode

Physical and chemical processes involved in the function and activities of living organisms. These are the actual processes put in motion by the regulator subsystem.

The basic need of this mode is composed of the needs associated with oxygenation, nutrition, elimination, activity and rest, and protection. The complex processes of this mode are associated with the senses, fluid and electrolytes, neurologic function, and endocrine function.

Self-Concept Group Identity Mode

In this mode, the goal of coping is to have a sense of unity, meaning the purposefulness in the universe, as well as a sense of identity integrity. This includes body image and self-ideals.

Role Function Mode

This mode focuses on the primary, secondary and tertiary roles that a person occupies in society, and knowing where he or she stands as a member of society.

Interdependence Mode

This mode focuses on attaining relational integrity through the giving and receiving of love, respect and value. This is achieved with effective communication and relations.

Levels of Adaptation

Integrated Process

The various modes and subsystems meet the needs of the environment. These are usually stable processes (e.g., breathing, spiritual realization, successful relationship).

Compensatory Process

The cognator and regulator are challenged by the needs of the environment, but are working to meet the needs (e.g., grief, starting with a new job, compensatory breathing).

Compromised Process

The modes and subsystems are not adequately meeting the environmental challenge (e.g., hypoxia, unresolved loss, abusive relationships).

Six-Step Nursing Process

A nurse's role in the Adaptation Model is to manipulate stimuli by removing, decreasing, increasing or altering stimuli so that the patient

1. Assess the behaviors manifested from the four adaptive modes.
2. Assess the stimuli, categorize them as focal, contextual, or residual.
3. Make a statement or nursing diagnosis of the person's adaptive state.
4. Set a goal to promote adaptation.
5. Implement interventions aimed at managing the stimuli.
6. Evaluate whether the adaptive goal has been met.

Assumptions

Scientific Assumptions

- Systems of matter and energy progress to higher levels of complex self-organization.
- Consciousness and meaning are constructive of person and environment integration.
- Awareness of self and environment is rooted in thinking and feeling.
- Humans by their decisions are accountable for the integration of creative processes.
- Thinking and feeling mediate human action.
- System relationships include acceptance, protection, and fostering of interdependence.
- Persons and the earth have common patterns and integral relationships.
- Persons and environment transformations are created in human consciousness.
- Integration of human and environment meanings results in adaptation.

Philosophical Assumptions

- Persons have mutual relationships with the world and God.
- Human meaning is rooted in the omega point convergence of the universe.
- God is intimately revealed in the diversity of creation and is the common destiny of creation.
- Persons use human creative abilities of awareness, enlightenment, and faith.
- Persons are accountable for the processes of deriving, sustaining, and transforming the universe.

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