

Four Nursing Metaparadigms

CHAD BRANCH, HALEY DEAK, CHERYL HINER, & TRAVIS HOLZWART

Abstract

This paper focuses on the four nursing paradigms which are comprised of person, health, environment, and nursing. Each metaparadigm plays a key role in the nursing process and is essential when providing patient care. The paper compares and contrasts three nursing theorists' individual interpretations of the four nursing metaparadigms. Jean Watson is a modern day theorist who developed the Theory of Human Caring. Her focus is on the holistic approach to healing and believes that in order for a person to be fully healed, it is imperative to include the healing of the mind, body, and the soul. Florence Nightingale was a 19th century nursing theorist who paved the way for the nursing profession today. Armed with her war experiences, Nightingale created some of the most innovative ideas of her time and focused on the importance of environment. Dorothea Orem was a 20th century nursing theorist who created a self-care model. She believed that it was the duty of the patient to take charge of their own health to prevent potential ailments. The information obtained from these theorists was used to create our own personal definitions of the four nursing metaparadigms. These personal definitions were then applied to a patient scenario to exemplify their applicability to the nursing process.

The four metaparadigms of nursing include *person, environment, health, and nursing*. The metaparadigm of *person* focuses on the patient who is the recipient of care. This may encompass things such as a person's spirituality, culture, family and friends or even their socioeconomic status. The metaparadigm *environment* includes both internal and external factors related to the patient. This may include the interactions patients have with visitors as well as their surroundings. The metaparadigm of *health* refers to the quality and wellness of the patient. It also includes the access the patient has to health care. The fourth metaparadigm is the *nursing* component. This refers to the nurse and how he or she will apply their knowledge and skills when caring for patients. It also refers to the attributes of the nurse who is providing the care. It is essential for nurses to apply these four metaparadigms to the nursing process when caring for patients in order to address patient care as a whole. Three nursing theorists who provide their individual interpretations of these four metaparadigms are Jean Watson, Florence Nightingale, and Dorothea Orem. There are similarities and differences in their viewpoints of these metaparadigms, but all share the common goal of striving to achieve the best possible patient care possible. Our aim is to examine these viewpoints in greater detail, use the framework of these theorists to create our own definition of the four nursing metaparadigms, and use them in real-life scenario in order to demonstrate their significance and importance current-day patient care practices.

As modern day medicine advances, some may be fearful that it could lead to a more methodical and less altruistic approach in healthcare. With this fear, Jean Watson, an American Nurse and Theorist, developed the Theory of Human Caring. Watson's approach, views caring as a separate entity from curing. She believes that curing refers to more than the healing of an illness, but includes mental and spiritual healing as well. Rather than focusing solely on curative factors, those that address physical ailments of a patient, nursing should also include "carative" factors as well. Carative factors provide the guidelines for modern day nurses to use so that they are able to practice healing through the mind, body, and soul. This set of factors provide the structural framework to Watson's Theory of Caring and demonstrates the distinc-

tion between nursing and medicine.

Watson's interpretation of the nursing metaparadigm, *person*, promotes the practice of satisfying human needs through human care. She believes that every individual has their own unique and unpredictable set of needs and it is imperative to accept and honor a person's needs, regardless of their wishes, customs, or beliefs. She also feels that in order for a person to be fully healed, a holistic approach which focuses on the mind, body, and soul, is imperative. She contests that omitting even one of these components, prevents the healing process from being fully achieved. Each individual patient needs to be valued and understood, with the nurse always being authentically present and each patient deserves the right to have their dignity maintained and protected at all times. For example, a patient who has suffered a chronic illness, may feel powerless and vulnerable. It is of utmost importance for the nurse to spend quality time with the patient in order to prevent these types of feelings from occurring. It has been indicated that Watson's Theory of Care impacts patients universally. A study in Saudi Arabia found that over ninety-seven percent of patients perceived the behavior of caring from nurses to patients as important (Suliman, 2009). The patients felt that a caring environment was a way to accelerate the healing process by making them feel safe and comfortable. This example demonstrates that Watson's Theory of Caring benefits not only people within the United States, but people all over the world.

Watson's interpretations of *health* is described as much more than simply curing an illness. She believes that although curing is imperative, it is much more than a physiological response. In order for health to be achieved, nurses must also take a holistic approach with patients, one which is structured around the mind, body, and soul. She states that in order for healing to be effective, that there needs to be a complete balance of person's physical, cognitive, and spiritual-self. It is essential for each of these components to be unified and functioning at their highest capacities to achieve health. Another important aspect of health involves nursing assessment. It is crucial to assess patients based on their individual needs in order to maintain optimal health. Patients in acute health care settings, for example, may require multiple assessments daily, while patients in other areas of the nursing field may require less observation. Watson stresses that if a person appears to be in good health, it does not necessarily equate to health being fully achieved. It is important to note, Watson's Theory stresses the equal importance of illness prevention with total health. Through this ideology, it is important for nurses to implement care plans that are structured not only to treat current illnesses, but also to assess a patient's mental state and background, and prevent potential illnesses as well.

When describing her viewpoints on the metaparadigm of *nursing*, Watson believes that it is essential for nurses to establish relationships with their patients. She pinpoints that while medicine and science are crucial curative factors, that they are not always the most dominant factors. It is equally important for caring to be another essential component to the nursing process by focusing on the person as a whole and ensuring that nurses will provide care to patients physically, mentally, and spiritually. By establishing meaningful relationships, nurses can ensure that they feel safe and comfortable. Achieving this helps to strengthen the bond between the nurse and patient, curing and caring. Establishing relationships can ultimately lead to nurses gaining even more patient information, which helps to promote better healing. Watson stresses that it is imperative for nurses to educate and guide patients to restore optimal health. The nurse should be a leader who is able to teach patients ways to further promote the healing process. Many leaders and administrators in the nursing field have applied Watson's theories in hospitals around the country. Her theories are used as criteria for the nursing staff to apply the deepest levels of caring (Watson, 2009). Watson also believes that assessing and evaluating patients is crucial in preventing further illnesses from occurring.

Watson is also a firm believer that *environment* plays a huge role to the nursing process.

Environment not only affects patients and their ability to heal, but can also affect nurses as well. One example provided involved a nursing unit whose morale hit an all-time low. Because of this, the nursing managers had the idea to apply some of Watson's ideologies to the unit. This proved to be greatly beneficial to staff and ultimately led to strengthening the bonds and morale between co-workers within the unit (Summerell, 2015). This example demonstrates how not only Watson's Theory of Human Care can strengthen bonds between nurses and patients, but between nurses and medical staff as well. Watson feels that when establishing patient environments, it is important for patients to feel that they are similar to home-like environments including private areas for patients, which allows them to feel more safe and comfortable. Noise levels for the patients should be kept at a minimum to promote serenity. As a result, patients are likely to feel calm and relaxed, which can help to alleviate any further stress and anxiety. Lighting is another essential component because it has proven to be uplifting for patients reducing stress and anxiety. In addition, access to nature can play a huge role in the healing process. She believes that it is important for patients to have access to nature when creating therapeutic environments. Examples of this include open windows to expose nature and natural lighting or encouraging nurses to take their patients outside for a walk. Other environmental factors for consideration include scents and the amount of space in rooms. Although not all of these factors may apply to every patient, they are all important things to consider and are ways to further promote the healing process.

Florence Nightingale was a nurse who dedicated most of her life to helping others in the 1800's. She essentially laid down the foundation for the modern nursing metaparadigm of *environment* in supporting patient health in the medical field. Florence Nightingale set the standard for nursing as a profession that is still used today. In the early 19th century, not much was known about bacteria and how infections were transported and contracted. During Nightingale's time, doctors and nurses were more focused on curing a disease. Not many individuals in healthcare were focusing on aseptic techniques or cleaning methods, like using bleach, to keep bacteria growth down. The people of this era really did not even understand that a simple thing like adequate shelter could drastically support the health of a person. Nightingale was a nurse at the forefront of the theory of environment and realized the positive differences it could make on the health of patients in the medical field.

Over the course of Nightingale's life, she established that not only does medication save lives, but changing the environment around the person supports a healthy life as well. The environment around a patient in a health care setting was never really examined before. When the Crimean war broke out in 1854, Nightingale was a nurse who worked in British hospitals and was kept a record of the deaths in the hospital (McDonald, 2014). Through evidence-based practice, she began changing things in the environment in order to promote a healthier setting. Better food, water, and cleaner areas around the hospital were a few of the changes she made. She discovered that within a year of her changing the environment, she was able to promote health drastically throughout the British forces during the war (McDonald, 2014). This was one of the first moments where a nurse really took into account what changing the environment could do for patient health. Nurses are now built on this idea of promoting health in any way possible. Nightingale was able to think critically and analytically about how the environment might change a patient's health. Through nursing observations and critical thinking, Nightingale was able to decipher that noise, lighting, ventilation, and smell all played a part in the environment for a patient's health (Zborowsky, 2014). Changing just a few environmental factors in the medical setting showed tremendous improvements on patient health. Hospitals and nurses constantly think about what could be changed in the environment to help their patient's health. Nightingale's theories helped urge nurses to think critically about environmental factors and how the role they play in promoting health and life.

Although Nightingale's theory was built on environment, she specifically focused on the environment for the *person* or patient. Without the person, you would have no need for an environment, medically speaking. "Nightingale's environmental theory can be viewed as a systems model that focuses on the client in the center, surrounded by aspects of the environment all in balance" (Zborowsky, 2014). In this respect, the whole point of her theory is centered on supporting body, mind, and spirit of the patient. Through assessments and observations, Nightingale was able to notice what made people calm, what caused them to be more anxious, or what made them irritable. She would then implement whatever made that person calm or happy to other patients in order to see if the overall affect was the same.

Nursing was not known as a respected job title in the 1800's. People believed nurses could be taught everything they needed to know in a month or two. During Nightingale's career, she was able to show that nursing is not just about doing what doctors order nurses to do, but is also about promoting health (Arnone and Vitzsimons, 2015). Thinking critically about a patient was a huge revolutionary change in the nursing career. This is when nurses began to start looking at the overall health of the patient, rather than just what the doctor might think is making the patient ill. Nightingale believed that becoming a nurse wasn't just a job title or a career, but a calling to help the patient's mental and physical health (Stichler, 2014). She believed that nursing is something that only certain people were capable of doing, to help take care of those who needed medical care and attention. Nightingale was able to demonstrate that nursing is not just a career, but a professional calling that requires education and training to deal with almost all direct patient care (Stichler, 2014). Nurses must always be thinking critically to try and figure out the next best course of action for each individual patient, no matter what the situation. This is why the nursing profession is considered such a respected job, nurses are advocates for their patients.

Health, of course, is the primary factor in patient care. Nightingale's theory shows that through caring, cleanliness, preparedness, and other medical needs, nurses can improve individual's health substantially. The fact that her theory is based in the 19th century and she was able to decipher the importance of some basic medical needs, like clean water and food, in her era is inspirational (Stichler, 2014). Nightingale changed the way people thought about improving someone's health when they needed care. Prior to Nightingale's revelations, medical care consisted mainly of diagnosing the patient. Rather than just trying to fix a problem, she focused on maintaining their health, which as we know now, is just as important as diagnosis and treatment of *person, health, environment, and nursing*.

Dorothea Orem was a twentieth century nurse and theorist who developed the theory of self-care, which focuses on the metaparadigm of *person*. She received numerous accolades for her achievements and contributions to the nursing field, including honorary degrees from various universities. Her theory consists of three components: the theory of self-care, the self-care deficit theory, and the theory of nursing systems. Orem's main emphasis is to provide patients with the education and tools in order to take control of their own health and well-being. Orem believes that nurses play a key role in this process by being leaders and teaching patients the proper strategies to achieve optimal self-care.

Many people with hypertension would rather take medications than change their daily exercise or change their diet just for the fact that it is easier. This is one of the reasons Dorothea Orem created her theory of self-care. She believes that people should care for themselves as best as they can. If someone is extremely sick though there is no way that they can get better without taking some type of medication. There is an exception when it comes to the health of some individuals, but she believes the individuals that can take care of themselves should take care of themselves. She believes self-care is the essence to a greater life.

Life expectancy in 1840 was around 40 years; today life expectancy has risen to almost 80 years. People have come to better learn how to take care of themselves not only physically, but also mentally and emotionally. Dorothea Orem's theory of self-care has helped to increase life expectancy in the United States. She believes that people should do everything they can to promote good health. People have the ultimate decision about the way they live their life and the things they choose to do with their lives. If someone is diagnosed with breast cancer they have the decision to both move on with their life and do everything they can to treat it, or they can sulk about it and not do anything for themselves.

Orem's theory was applied to a study done on self-care for elderly patients who were on peritoneal dialysis. Renal failure is increasing in elders in the United States. Peritoneal dialysis can help patients move on with their life and have a feeling on self-worth. This type of therapy requires patients to be able to do things on their own and forces them to integrate self-care into their daily routine. Using Orem's theory is integral in teaching patients to perform therapy at home (O'Shaughnessy, 2014). This therapy allows patients to decrease the number of hospital stays and live more freely on their own.

Nurses are the backbone of healthcare. Keeping this in mind, the metaparadigm of *nursing* is displayed through Orem's Theory of Self-Care. Patients are the center of self-care, but when it comes to diseases and therapies, nurses are essential to the course of healing. Nurses are there to help their patients heal and instruct them on what to do in the healing process. Most people don't automatically know how to do peritoneal dialysis. That is something the nurse has to teach them how to do. Nurses encourage self-care by teaching their patients everything that they need to know. They realize that individuals are all different and require different types of care in order to teach them what they need to learn.

Self-care is encouraged not only in the hospitals, but also outside of the hospitals by family, friends, and coworkers. Orem stresses the importance of *environment* by stating that if a family member with cancer, needs to be surrounded by supportive forces to remain healthy and happy. Support systems keep patients from self-neglect by making sure loved ones are taking care of themselves the way they should. Self-care also includes staying away from things that are detrimental to one's health. This includes substance abuse, smoking, unhealthy diets, or anything of that nature. People should learn about these topics and how they are affecting their lives and nurses can help educate them.

Health is essential for anyone's life. Orem finds that people who take care of themselves typically live a happier and longer life than those who neglect caring for themselves. Her Theory of Self Care stresses that without self-care, health conditions plummet. Eating an unhealthy diet, failing to identify and treat obesity or high blood pressure, or even letting a disease take over all facets of one's life are all examples of failed self-care. Self-care encourages people to seek health care when they aren't feeling well. It pushes people to take care of themselves and not let themselves lose sight of their future health. Orem's theory sets concrete standards for nursing practices today and teaches the importance of education and support from nurses for their patients' well-lived and healthy life.

The *patient* is the main focus and priority in the system of healthcare. Jean Watson, Florence Nightingale, and Dorothea Orem all had slightly different takes on the concept of person but did share some ideas. One of those ideas is that each patient is unique and thus should be cared for as an individual. Orem recognized the fact that nurses care for all types of patients, and the care for each will be different. Although she was a major advocate for self-care, she acknowledged the notion that each of her patients will have individual needs. Similarly, Nightingale furthered this idea by catering her care based on factors that affected her patient's emotions. Nightingale would individualize her care for patients by linking actions to

a patient's emotions. She would observe what makes her patient calm, anxious, or happy and improve the care she provided through these mechanisms. Furthermore, Watson disregarded the idea that each patient was predictable, and rather that they each were unique. She implemented this idea into the care for her patients and structured the way she nurtured and cared for each individual around it. Watson also acknowledged that each patient has his or her own special needs and wishes. She believed that it is the duty of the nurse to accept these notions, and implement them into the care of the patient. Although the theorists agreed on the idea of individuality, they did have their own beliefs they emphasized. Watson, for example, advocated being there for the patient during their time of hardship. Watson believed that the support of the nurse improves the patient's outcome. Orem was a big encourager of self-care. She believed that if people took care of themselves outside of the hospital, it would reduce hospital visits. This results in fewer patients that need care, and better care for those who do present to the healthcare facility. Nightingale believed all care should be centered on the patient. With this idea, all actions should stem from the direct needs of the patient.

The concept of *environment* is important because it directly impacts the patient and healthcare workers. An environment that embodies the ideas of safety, support, and health will improve the patient's outcome. The three theorists examined in this paper agreed that environment plays a key role in the well-being and success of the patient. Orem built on her idea of self-care by shedding light on the importance of environment. She noted that environment is essential in a patient's health, and thus their self-care. Orem's environment included friends and family, and this environment would dictate the care that the patient exemplifies. Watson expanded on the idea of how environment influences the patient by expressing that it should have a therapeutic effect. This is because a therapeutic environment will facilitate the health of the patient and improve their healthcare experience. Watson's environment included space, smells, lighting, and noise. Watson believed that if these factors expressed a remedial environment, it would positively influence the patient. Nightingale held similar beliefs, concluding that environment such as smell, noise, lighting and ventilation impact a patient's wellbeing. Nightingale came to this conclusion by conducting experiments. She found that a positive change in environment resulted in a more favorable patient outcomes. Although these three theorists had slightly different interpretations of the concept of environment, they all established that it had an impact on the patient's experience.

The three theorists held similar stances on the metaparadigm of *nursing*. The theorists concluded that nurses play vital roles in teaching, providing holistic care, and building relationships with their patients. Watson weighed in on this concept by believing that the act of caring is part of the healing process of the patient. She believed that the care provided by a nurse facilitates the health of the patient. This is accomplished through bonding and developing a positive rapport with the patient. Nightingale expanded on this notion because she believed nurses should always be advocates for the patient. She noted that nurses must look beyond what the simple orders are by the physician and think critically to provide holistic care. Nightingale denounced the idea that nurses should merely follow the orders of doctors and not provide their own therapeutic care. Similarly, Orem believed nurses should provide the care necessary to help a patient's health so that they can take care of themselves. Orem was a strong supporter of self-care and maintaining the integrity of the patient. Orem thought that although physicians gave the orders, nurses had more direct patient interaction and the responsibility of promoting self-care and education rested on the shoulder of nurses.

The concept of *health* is one of the most important ideas in healthcare. The major goal of the healthcare field is to restore and maintain the health of the patient. The three theorists approached the metaparadigm of health in their own ways. For instance, Watson believed health to be much more complex than just physiological processes. She considered health to

include things such as spirit, mind, body, soul and much more. Watson argued that through these aspects, health could be addressed. She also believed health should be addressed on a day-to-day basis. This was due to the fact that the health of a patient can vary drastically between one moment and the next. Orem, on the other hand, argued that self-care is the driving factor of a patient's health. She argued that it is best for patients to take care of themselves and embrace a healthy lifestyle in an effort to prevent health issues. If patients did this, should they become ill, their situation would be less severe. This also makes providing care for the patient much easier and efficient. Nightingale addressed the paradigm of health in her own way as well. Nightingale expressed that the health of a patient can be improved by maintaining cleanliness, being prepared to provide care, and utilizing the therapeutic resources available in the medical field. Nightingale was ahead of her time. As we now know, cleanliness is one of the most important aspects of maintaining the health of patients. Although they each shared their own sentiments in regards to the paradigm of health, they all shared the same general intentions. Restoring and maintaining the health of the patient can be accomplished through many different avenues as proved by their differing approaches.

Our Definitions

Our interpretation of the metaparadigm, *person*, is an individual who is unique, with their own personal set of values, beliefs, and ideologies. This person will also have their own cultural identity, which may not always coincide with the value system of others. Because of this, it is very important for nurses to keep an open mind, setting aside any pre-conceived notions, biases, or judgments towards their patients. The patient is someone who deserves to be respected, regardless of personal differences. Things such as a patient's religion, personal beliefs or socioeconomic status should play no role in how they are treated. The patient also deserves for their privacy to always be maintained and never compromised. If the nurse is able to achieve these things, the patient will likely be more open and comfortable when providing subjective data during assessments. This will result in a stronger rapport between the nurse and the patient, resulting in better overall patient care. It is important for the nurse to build a strong, trusting relationship with patients in order to improve the patient's experience. A patient who trusts their nurse will be more open and better outcomes will be achieved.

We often tend to think of *health* as a person's physical well-being and in order to achieve peak health, that they should be free from injury or disease. Although treating an illness does involve this physiological approach, we also feel that it should include much more. We believe that healing is not complete until the person is treated as a whole and that the holistic approach to healing is crucial. This should include treating and evaluating not only a person's physical health, but also their mental and spiritual health as well. For example, if a patient went through vigorous physical therapy sessions after a surgery and finally gained full range of motion, this would not necessarily indicate complete health. It's very possible that they could have emotional issues from either their injury or possibly something else going on in their life. Without treating all aspects of the healing process, optimal health cannot be achieved. Another important factor of health is that it should be routinely monitored and evaluated. Health is something that is always ongoing and often changing. Because of this, it should never be ignored. Routine evaluations may play a huge role in health and may impede future illnesses from occurring. Preventing an illness from occurring is the best solution because it saves resources, time, and the patient from experiencing hardship.

In regards to the metaparadigm, *nursing*, a nurse is someone who should not only understand the science and physiology behind an illness when treating patients, but should also genuinely care for the well-being of others. Compassion and empathy should be an innate quality within a nurse and he or she should be able to set aside any personal biases or judgments, regardless of things such as race, religion or socioeconomic status. A nurse should

exude professionalism at all times, whether or not he or she is at work. Nurses are one of the most respected professions and they are role models within their communities. A nurse should also be a leader as well as an educator, taking the time to work with patients to improve their quality of care. It is important that nurses take the time to show patients procedures and teach them essential habits to better their quality of life. Nurses should also not only treat existing illnesses, but take the initiative to do all that they can to prevent further illnesses from occurring. It is also essential that nurses never take any shortcuts to ensure that their patients are receiving the best possible care possible.

Another aspect of the healing process that may be more subtle, yet highly effective, is the *environment*. It is very important to create a therapeutic environment for the patient in order to promote healing. When creating this environment for the patient, a nurse should take into account a patient's individual needs. This environment should be a place where the patient feels safe and it should remind them of home. Sometimes subtle but meaningful changes can be made to promote comfort, such as opening a window to increase sunlight for patients. This may relieve feelings of stress, anxiety, or depression, which is harmful to the patient's immune system. It may also benefit certain patients to see nature, which may allow them to feel more calm and relaxed. A nurse could also take into consideration the colors in the room, adding flowers or plants or certain wall décor to help improve patient environment. When creating a therapeutic environment, the sense of smell is important to consider. Eliminating foul odors and incorporating pleasant smells may help promote patient health. It may be beneficial to use aromatherapy, which has been believed to stimulate brain function. Another factor which benefits the patient's environment includes having visitors such as friends or family to keep a patient's spirits lifted. Some patients may also benefit from animal therapy. It is important for nurses to create a patient's environment based on their own individual needs, whatever that may be, in order for the patient to feel safe, comfortable and happy.

Our Scenario

A scenario was created to personify what our interpretation of the four nursing metaparadigms, *person, health, nursing, and environment*. An RN named Jackie starts her shift at 0700 on the oncology floor. Today she has been assigned a new patient with the initials, T.J, who is a ten year old boy from Brazil, battling lung cancer and recently admitted to the hospital. As Jackie enters the room, she immediately begins her assessment and gathers some objective data. As she greets the patient, she immediately notices that the patient's airway is open as he verbally responds to his name. The nurse then notices that his breathing is unlabored and he is not displaying any signs of cyanosis. She also notes that the patient does not appear to have any skin abnormalities, lesions, or ulcers. One thing that Jackie did notice was that T.J appeared to be a little distressed. She sees that the patient is making very minimal eye contact and is giving very short answers when answering questions. Jackie takes the patients vital signs and documents all of her findings on his chart.

Jackie then begins to collect subjective data from the patient. The first thing that the nurse learned was that T.J is from Brazil. Jackie then asks the patient to tell her a little about his culture. She learns that in his country, it is a sign of disrespect to make eye contact with an authority figure. Jackie quickly realizes that his lack of eye contact was simply a demonstration of respectfulness according to his cultural belief system. The nurse makes sure that although the patient is from a foreign country and has a different value system that she will not display any judgments on the patient. Next Jackie inquires about T.J's pain status and the patient reveals that he currently is a four out of ten. The nurse does notice though that the patient appears to be withdrawn and asks T.J if he has been feeling sad lately. The patient nods and Jackie asks him if he wants to talk about it. T.J then tells her that he feels very isolated in the hospital room and misses going outside and playing with his friends. Jackie tells him that

she can understand why he feels that way and asks about T.J's hobbies. The patient informs her that he loves airplanes because his father is a pilot. He also mentions that he loves the outdoors and his family used to go hiking and camping before he got sick. Right away the nurse makes sure to open the window, not only to expose sunlight into the room, but to display the trees, plants, and flowers for T.J. After learning that T.J loves airplanes, Jackie decides that the next time that she sees T.J that she will surprise him with a toy airplane to lift his spirits. She informs T.J that once he is feeling stronger, she will take him outside for a walk, which immediately brings a smile to his face. Jackie learns is that T.J has been feeling like he has been a burden to his family. He mentions that when he sees his mother cry, he feels tremendous guilt for making her upset. Jackie makes sure to tell T.J that while she understands his feelings, it's not his fault. She is sure to document all gathered data in T.J's chart.

Jackie goes to the lobby where T.J's mother and father are waiting. Her goal is to educate the patient's family about how to respond and interact with their son in order to assure that he sustains a healthy mentality. Jackie discusses the importance of keeping T.J's spirits lifted by putting on a brave face for their son to prevent any further stress. She also lets his parents know that she understands how difficult this time is for them, but reiterates the importance of not letting T.J see his mother and father upset. She also suggested that the family interact with T.J in the same way that they did prior to his cancer diagnosis as a way to take his mind off of his diagnosis, which the family agreed to. Jackie also offers resources to T.J's parents for families coping with cancer.

The nurse was able to implement our definitions of the four metaparadigms of nursing throughout her interactions with the T.J and his family. She illustrated our definition of *person* by recognizing the patient's cultural differences as well as accepting and valuing them without judgment. Jackie also demonstrated that she was a good listener by learning about T.J's love for nature and airplanes. The nurse was able to demonstrate the metaparadigm *health* by using the holistic approach to her care taking. Rather than solely focusing on treating T.J's cancer, she realized that his mental and spiritual health needed to also be assessed. Jackie quickly realized that T.J was mentally distraught and felt like a burden to his family and she was sure to discuss this with his parents to prevent T.J from any further mental anguish. Jackie also was able to demonstrate the metaparadigm of *nursing*. The nurse was able to exemplify the metaparadigm of *environment* through her care plan. She immediately opened the window to expose nature into the room along with sunlight. Jackie also made the plan to bring an airplane for T.J the next time she saw him and mentioned to T.J that once he feels up to it that they would start going on walks outside to lift his spirits. By utilizing our definitions of the four metaparadigms of nursing, Jackie was able to provide exceptional care for her patient.

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