

**Nurses' application of Dorothea Orem's Self Care Theory towards Management of chronically-ill Patients at University of Ilorin Teaching Hospital, Kwara State**

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**Abstract**

*The necessity to care by theoretical thinking and scientific method is recognized by considering a method based on theory to guide our practice hence nursing theories have to be applied to practice. Nursing theory depends on its utility in caring and in the disciplinary development hence, the need to assess the nurses' application of Dorothea Orem's self-care theory towards the management of critically ill patients in the university of Ilorin teaching hospital, Ilorin, Kwara state. The research sought to assess the level of knowledge of nurses' application of the theory as well as factors that influences the application of Orem's theory towards management of chronically ill patients. A descriptive research design was used and a total sampling technique was employed to get the sample size of 105 respondents. Instrument for data collection was a self-structured questionnaire tested for validity and reliability through a pilot study with 0.778 using the Croach Alpha method. The result revealed that nurses are knowledgeable about the theory, a major percentage of the nurses apply the theory to practice. Factors that affect the application of the theory were also identified. To ensure that holistic care is delivered at all levels of health care especially the tertiary, management should employ more nurses, make room for professional development programmes and trainings to update their knowledge periodically so as to care for patients living with chronic illnesses and enhance their quality of life, functional capacity, and personal and social welfare.*

**Keywords:** Application; Care; Nursing Theory.

**Introduction**

There is a shift in paradigm of care of patients. This involves identifying patients' underlying abilities, then motivating them to make the best use of them. Chronic health conditions have significant impact on the quality of life of the patients. These conditions include: diabetes mellitus, congestive cardiac failure, chronic hypertension, cancer, depression resulting from loss of family and community support, social isolation due to fear, disease progression, social and economic problems, and drug abuse among others (Onwuchekwa, Tobin-West and Babatunde (2014). These patients are faced with many physical and mental challenges such as fatigue, weakness, sleep disorders, pains and anxiety resulting from physical, psychological and spiritual needs (Goodwin, 2017). Therefore, an effective way to promote quality of life of chronically ill patients is through the application of Self-Care of Theory and respecting its essential aspects in nursing care. By doing so, health care becomes directed to the patient's needs, and approaches the holistic aspects of care.

Younas (2017) opined that the importance of self-care concept is related to human's need for maintaining and promoting health and recovery. Self-care activities alleviate symptoms and complications of diseases, shorten recovery process, reduces hospital stay and re-hospitalization rate. Lack of self-care knowledge in patients with chronic disease is the main reason for frequent referral and re-hospitalization. Hence, nurses have a major role in providing patients with relevant information on diseases, the plans of care and to encourage them to take responsibility for their own health. Furthermore, nursing responsibility places the nurse at a very important position when self-care theory is to be applied. The nurses' knowledge of Dorothea Orem's self-care theory, identification of the patients' self-care needs and deficit and the various therapeutic self-care demands are very important. Theories are intended to guide nursing practice by describing, explaining, or predicting phenomena, hence, the perspective of theory-based care must continue and be sustained for improved patients care (George, 2015).

Fundamentally, nursing and the nursing process is designed to enhance self-care and to address deficits in self-care. The conditions under which patients with chronic health problems are cared for have changed dramatically

in the past decade and patients often living longer and being cared for at home by their families and nursing supports. Attention is given to a caring relationship in which there is a dependent person in need of care and an individual who serves as that dependent person's agent of care (George, 2015).

While it is acknowledged by health care professionals that health is a dynamic, subjective process that is experienced uniquely among individuals, for those who seek care within the organized health care system, chronic illness imposes a set of behavioral requirements. Re-hospitalization has become a frequent occurrence when it comes to patients living with chronic conditions thus leading to a large number of patients reporting back to the hospital or being referred due to relapse. Majority of the patients seek care because they want relief from symptoms caused by their disease or its treatment.

It has been observed that patients' interaction with nurses motivate them to engage in self-care that can be incorporated into their lifestyle. It is within this context of a mutually rewarding relationship that the self-care of chronic illness takes place. Therefore, this paper assesses the nurses' application of Orem' Self-care theory in the care of chronically ill patients in a Tertiary Health Institution in Ilorin, Kwara State.

### Methodology

A descriptive research design was used and a purposive sampling technique was employed to get the sample size of 105 respondents among all the 662 nurses in the hospital. The 105 represented the number of nurses working currently working in the medical, surgical and pediatric wards and of the hospital with the task requiring them to use the theory. A structural questionnaire closed ended of four-point Likert scale was used to elicit responses from the respondents. The instrument was tested for validity and reliability through a pilot study and 0.778 reliability coefficient was obtained using the Cronbach Alpha method.

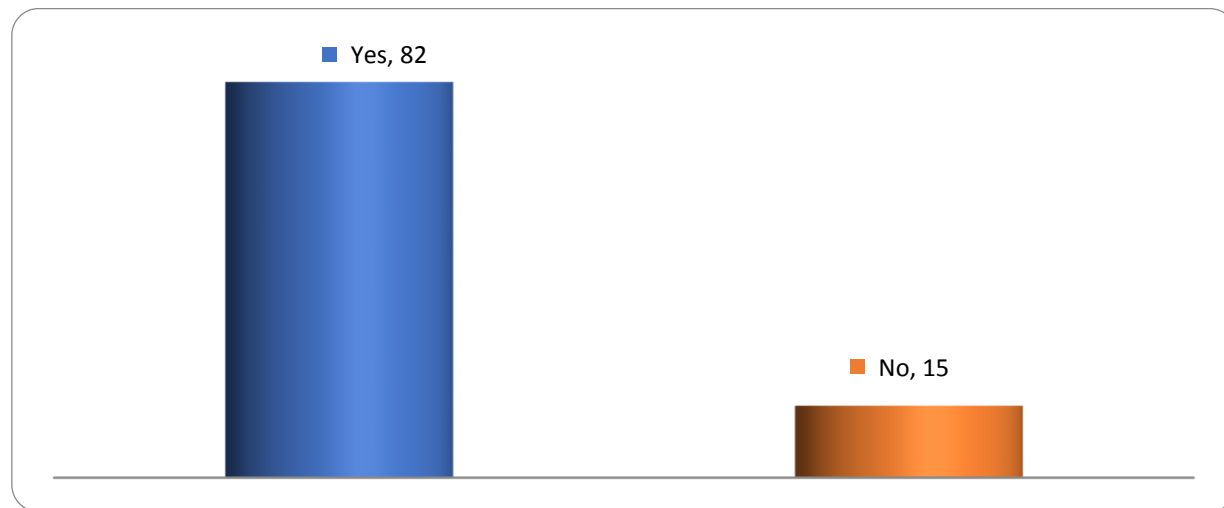
Research hypotheses were formulated, data collected were analyzed using descriptive statistics comprising of tables, charts, percentage. Inferential statistics inform of chi square was used to test the hypotheses. Research assistants were engaged and trained to assist in distribution of the questionnaire and collection in each of the wards. All the ethical parameter for conduct of the research which guarantees the right of the respondents in the study, informed voluntary consent and confidentiality of the participants were observed.

Data was analyzed using Statistical Package for Social Sciences (SPSS) version 20. Data were summarized and presented using both descriptive and inferential statistics. Hypotheses were tested using chi-square at 5% level of significance.

### Findings

**Table 1: Socio-demographic profile of the respondents**

Socio-demographic Characteristics	Percentage	
<b>Age</b>	20 – 29 years	40.2%
	30 – 39 years	25.8%
	40 – 49 years	21.6%
	50 – 59 years	12.4%
<b>Marital Status</b>	Married	50.5%
	Single	46.4%
	Widowed/Separated	3.1%
<b>Qualification</b>	RN/RM	52.6%
	B.NSc.	41.2%
	Others	6.1%
<b>Experience</b>	Less than 10 years	56.5%
	10 – 19 years	15.5%
	20 – 29 years	18.6%
	30 – 35 years.	9.4%



**Figure I: Awareness of Orem's Self-care theory (n=97)**

Figure 1 showed that 84.5% of the respondents have heard about Orem’s Self-care theory, of which 83.5% of them heard it while in the school

**Table 2: Knowledge of Dorothea Orem’s Self-care Theory among nurses ((n=97)**

S/N	Knowledge of Nurses on Dorothea Orem’s Self-care Theory	Level of Agreement
1.	Dorothea Orem’s Theory comprises of three related construct,	59.8% strongly agreed
2	One of the construct is the theory of Self-care which means the ability of a person to perform for him/her activities of daily living	46.4% strongly agreed
3	The second construct is theory of Self-care deficit which occurs when an individual is unable to meet his/her Self-care needs	56.7% agreed
4	The third construct is the theory of nursing system which helps patients in carrying out self-care	53.6% agreed
5	People should be self-reliant and responsible for their own care and others in need of care in their family	59.8% agreed
6	Self-care and dependent care are learned within a social cultural context, greater number	40.2% strongly agreed
7	Self-care, Self-care agency, therapeutic Self-care demands and Self-care requisites are all components of the Self-care construct	53.6% strongly agreed
8	No specific nursing care is required for Self-care deficit	37.1% strongly agreed
9	The wholly compensatory is a modality in the nursing system construct	62.9% agreed
10	Ina wholly compensatory system, the patient requires total nursing care	46.4% strongly agreed
11	Partly compensatory system means the patient does Self-care with the nurses’ assistance while majority	72.2% agreed
12	supportive educative system means the nurse teaches the patient what to do but supervise	72.2% agreed

**Table 3: Attitude of nurses towards Application of Dorothea Orem’s Theory (n=97)**

S/N	Attitude of nurses towards Application of Dorothea Orem’s Theory	Level of Agreement
1.	Performing Self-care activities on patients is easier than teaching them	43.3% disagreed
2	Patients and their relatives do not require Self-care teachings	49.5% disagreed
3	There is so much work to be done while on duty than educating patients about self care	52.6% disagreed

4	Relatives know how to take care of patients on their own without the nurses' intervention	37.1% disagreed
5	Giving total Self-care to patients can be tiring due to number of patients in the ward	49.5% agreed
6	Patients may not ask for information on how to practice Self-care because they already know how to care for themselves	52.6% disagreed

**Application of Dorothea Orem’s Self-Care by Nurses**

Findings reveals that 81.4% of the respondents encourage patients to carry out Self-care by themselves, 53.6% do it by talking to them while 30.9% do that by allowing patients to observe them, 37.1% use supportive modality to carry out self care, doing it while they watch, 59.8% allow them to participate, 30.9% teaches them how to do it, 37.1% assists them 18.6% supervises them while they do it, 64.9% of them claimed their method was effective while 25.8% said it was very effective.

**Table 4: Factors influencing the application of Dorothea Orem’s Self-care Theory to the management of chronically ill patient (n=97)**

S/N	Factors influencing application of Dorothea Orem’s Self-care by nurses	Level of Agreement
1.	Number of nurses on duty	59.8% agreed
2	Knowledge of the theory	72.2% agreed
3	Number of patients	46.4% agreed
4	Disease condition of patients	53.6% agreed
5	Severity of the disease condition	40.2% agreed
6	Cooperation of patients and relatives	66.0% agreed
7	Management Polices	47.4% agreed

**Discussion of Findings**

Seventy (72.2%) of the respondents has varying degree of knowledge about Self-care theory. This finding was corroborated by Goodwin (2017) who viewed Self-care as the individual's capacity to perform all activities necessary to live and survive which is an effective way to promote nursing care through applying the Self-Care Theory and respecting its essential aspects Goodwin, (2017). Similarly, the finding was corroborated by Wilson and Gamling (2009) with the opinion that nurses must be knowledgeable to care for patients need in a holistic approach. Furthermore, the findings showed that the nurses have positive attitude toward Orem’s theory of Self-care thus affirming that Orem’s theory provided sufficient guidance and organization for practice. The finding was corroborated by Moura Barroso, Silva de Brito, Gimenez Galvão and de Oliveira Lopes (2010)

Majority of the nurses (81.4%) encourage patients to carry out Self-care by themselves as exemplified in the burns management which shows the level of acceptance and application. This supports the study on the application of Orem’s theory to burns care that was carried out by Wilson and Gramling (2009) which stated that creating an increased awareness of the need for a nursing theory in the field of nursing is an initial step in enhancing the level of professionalism among nurses. Watkins, Cook, May and Ehleben, (2014) also in corroboration observed that supportive educative system is a part of the theory where the nurse is present to teach, support and to suggest ways to integrate patients back to the society. The major factors that influence the application of Dorothea Orem’s Self-care Theory to the management of chronically ill patient in UITH were knowledge of nurses on Dorothea Orem’s Self-care Theory, cooperation of patients and relatives, number of nurses on duty, and disease condition of patients. The findings are in accordance with Fok and Wong (2013), who stated that factors such as health status, family support system and disease conditions, affects the performance of Self-care practices.

There was no significant relationship between the level of education of nurses and application of self-care with p-value (0.383 greater than the standard p-value (0.05). Also, there was no significant relationship between the

patients' disease condition and the teaching of self-care principles with p-value (0.290) greater than the standard p-value (0.05). This supports Ledge (2015), who stated that holistic care involves the mind, soul and body irrespective of the nature of the patients' illness. Similarly, Duffy (2013) believed that the holistic approach summarizes the psychosomatic approach of a disease and expands it by putting the patient in a specific time and cultural context. It deals with his own special needs and quality of life by respecting his convictions, irrespective of the disease condition.

### **Conclusions**

The independent professional practice of nursing is distinguished from other health-related disciplines in that it strives to care for the entire client. The nursing profession works in collaboration with other allied health care professionals to improve the health care for the presenting client and improve the method of health care delivery. Orem's theory charges nurses to apply professional definition and application to nursing practice. The inclusion of Orem's Self-care Deficit Theory of Nursing supports a consistent method of nursing practice, serves as a practical guide for the application of continence services and provides a consistent framework that encourages strong client responsibility for recovery and maintenance and useful in defining a systematic assessment, treatment, and evaluation of outcome of care incontinence and serves as a pragmatic nursing application of theory to practice. Self-care activities alleviate symptoms and complications of diseases, shorten recovery process, reduces hospital stay and re-hospitalization rate. Lack of self-care knowledge in patients with chronic disease is the main reason for frequent referral and re-hospitalization.

### **Recommendations**

Nurses have a major role in providing patients with relevant information on diseases, the plans of care and to encourage them to take responsibility for their own health. While there is nothing inherently wrong with being task-oriented or goal-oriented in nursing care, if a nurse is overly task-oriented or appears severely rushed such as dilemma of too many patients and not having enough time, it can leave patients feeling like they are just a number or a diagnosis or worse still, a burden. Nurses can use holistic nursing care to enrich the lives of our patients. The key is not necessarily about how long a nurse spent interacting with a patient, but the time spent in building healthy relationships with patients that promotes a healthy psychological, emotional, and spiritual environment.

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