
Katharine Kolcaba Nursing Theory

Nursing Theory

Katharine Kolcaba developed Kolcaba's nursing theory of comfort in the 1990s. The theory is known to be a mid-ranged holistic theory that focuses on the demands of patients. Middle-range theories are known to be specific as they relate to nursing practices such as conditions or situations of patients or individual inhabitants. The theory also contains solutions, suggested results as well as actions for the nurses. Kolcaba defines comfort to be a state for addressing the basic demands for relief, ease, as well as transcendence achieved in four categories of experience (environmental, sociocultural, psychospiritual, and physical) (Alligood, 2017). Katharine used these four metaparadigms because patients are the center of the theory. Nurses are also important since they provide the care that is fundamental in boosting comfort. The surrounding is essential as it plays a key role in the theory as distress or comfort can be achieved from the patient's environment. In case there is cooperation between the three factors, then patients will be at a better position in elevating their health. Kolcaba's comfort theory wasn't only based on physical comfort; instead it also focused on a holistic practice that is achieved through feelings of relief, ease, as well as through transcendence (Lima et al., 2016). Ease is known to be an absence of certain disorders. Relief is the condition of having a severe discomfort alleviated or mitigated. Lastly, transcendence involves the ability to go above discomfort, especially when they can't be avoided. The purpose of coming up with this theory was to analyze comfort in clarifying its use, in theory, practice as well as research. In doing so, Katharine spends time to evaluate the relationship as well as the final results of patients based on comfort.

Kolcaba's comfort theory focuses on nursing leadership, education, informatics as well as health policy. The unique components of comfort's theory are achieved from the examination of several disciplines such as ergonomics, psychology, English, psychiatry, nursing, and medicine. This theory has the ability to position comfort in a health care environment hence making it a good outcome in nursing care (NG, 2017). This theory was developed from the analysis of doctor's paper in the master's research thesis as well as a dissertation. In the research, the doctor proposed methods of defining as well as measuring comfort as revealed in theory, practice, as well as research. Kolcaba reflected on the need for caring for the older people; this pushed her towards building of the theory that she had begun to support and develop. She did not lie fully on her experience alone, but she utilized the work of other theorists. For instance, Katharine examined Henderson's Need Theory where she proposed that the completion of the fourteen key needs elevate the comforting outcome (Lima et al., 2016). From here, it is important to note that patient satisfaction is the foundation of attaining comfort results

Concepts of The Theory

Kolcaba developed this theory based on three types of comfort which included ease, transcendence, as well as relief. These comforts assist patients in overcoming various difficulties that might accompany their ailments. In defining the theory, Katharine used terms like health care demands, comfort, health-seeking behaviors, intervening variables, institutional integrity, as well as best policies. According to Kolcaba, comfort is the preferable care results

that a patient receives while health-seeking characters or behaviors are the physical satisfactions that patients get when they go for medical care (Bosch Alcaraz et al., 2018). Healthcare needs are the patient's aspirations while in a given environment. Institutional integrity encompasses wholeness, values, as well as the financial stability of care. Intervening variables are factors that can alter the structure of service delivery that providers can't control. Lastly, Kolcaba illustrated that best policies involve all evidence-based strategies that institutions come up with for delivering healthcare services. Kolcaba shows a higher level of uniformity while putting in action the concepts as well as definitions, and this is known as explicit, in the theory.

This theory requires nurses to recognize physical demands that give comfort to patients that have to be met. From here, nurses are required to come up with interventions that are in line with the needs that were identified earlier. This is the point where the intervening variables come in while designing the interventions and it requires that any strategy that is chosen to be evidence-based. In case an increased comfort is achieved, then nurses are required to reinforce patients by facilitating health-seeking behaviors (Bosch Alcaraz et al., 2018). A fully deployed health-seeking behavior should make an institution to perform better with higher integrity while improving the engagement of patients.

Evaluation of the Theory

Some of the assumptions on the theory include; first, Kolcaba believed that human beings have holistic reactions to complicate stimuli. Secondly, comfort is seen as a prudent holistic result that is aligned to self-discipline in nursing. Third, it can be an active attempt to achieve as well as keep maintaining the level of comfort. Lastly, institutional integrity has a huge component that depends on the "patient-focused value system."

Application

Healthcare administration can apply this theory to lead them in assessing the comfort demands of a patient and later conduct an evaluation on its usefulness in their institution towards achieving the identified needs or concerns. This can assist them in enhancing patient outcomes as well as their satisfaction. The comfort theory motivates nurses in thinking deeper about what the patient is comfortable about together with what causes distress together with what promotes comfort.

Comfort theory has been can be applied in the field of education to guide training nurses in incorporating holistic care while delivering their services. Incorporating this theory in training nurses while assisting the learners in emphasizing the reason for applying the theory in achieving patient's comfort as they care for them (NG, 2017). Therefore, it is important for training nurses to learn how they can incorporate comfort in improving their potentialities in the application of day to daycare for patients.

The comfort theory can be applied by nurses in research to guide them in coming up with approaches that can be used in improving patients' satisfaction. The theory can be included in research work to investigate ways that healthcare institutions can improve patients' healthcare results in the current world of improved technology. This theory can also be used in research to see whether nurses are ready to accept it in their day-to-day practices.

In conclusion, comfort theory has proved to be easier to apply as well as improve patient outcomes, and these are reasons that have resulted in its widespread application in healthcare settings. Katherine Kolcaba-Comfort Theory can be applied in nursing and also learning centers that prepare nurses. Kolcaba's theory gives a step-by-step application process that can be used in a practitioner nursing environment making its adoption to be easier. The pioneer to this theory exploited a variety of theories together with her top-notch experience she achieved in the field before coming up with Comfort Theory. It is important to note that patient care and the outcome are a primary focus in the field of nursing. Kolcaba's theory gives a theoretical framework that assists nurses in performing their assessment, evaluate as well as implement the care and the care plan as the patient adjusts to the environment (Puchi et al., 2018). This holistic care approach is important in fostering a mission in providing world-class patient care, education, and research. Therefore, Katherine Kolcaba-Comfort Theory has proved to be appropriate and available in every nursing environment.

References

1. Alligood, M. R. (2017). Nursing theorists and their work-e-book. Elsevier Health Sciences.
2. Bosch Alcaraz, A., Falco Pegueroles, A., Alcolea Monge, S., Delso, D., Santaolalla Bertolin, M., & Jordan, I. (2018). COMFORT THEORY IN NURSING CARE. REVISTA ROL DE ENFERMERIA, 41(10), 48-52.
3. Lima, J. V. F., Guedes, M. V. C., Silva, L. D. F. D., Freitas, M. C. D., & Fialho, A. V. D. M. (2016). Usefulness of the comfort theory in the clinical nursing care of new mothers: critical analysis. Revista gaucha de enfermagem, 37(4).
4. NG, S. H. (2017). Application of Kolcaba's Comfort Theory to the Management of a Patient with Hepatocellular Carcinoma. Singapore Nursing Journal, 44(1).
5. Puchi, C., Paravic-Klijn, T., & Salazar, A. (2018). The comfort theory as a theoretical framework applied to a clinical case of hospital at home. Holistic nursing practice, 32(5), 228-239.