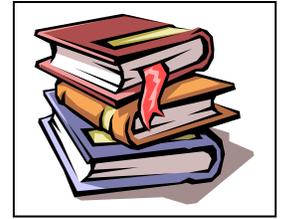


Bevis Made Easy: A Humanistic Existentialism Philosophy

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### ***Bevis Curriculum Process***

The process and key concepts from Dr.Em Olivia Bevis' Curriculum Building Framework (1973, 1982, and 1989) have been adopted by the University of Windsor, and St.Clair and Lambton Colleges. Additional resources can be found at [www.uwindsor.ca/nursing](http://www.uwindsor.ca/nursing) on the link "Bevis Comes Alive".

#### **Adaptation**

- A process. Interaction of variables with the dynamics of stress and strain.

#### **Advocacy**

- for self and others may be expressed and demonstrated when the principles of social justice are applied to situations of oppression, marginalization, and victimization.

#### **Bonadaptation.**

- Eustress, healthy response.

#### **Caring**

- Four Stages of Caring were espoused namely: Attachment, Assiduity, Intimacy, and Confirmation (Bevis, 1989, p. 128). "transactional relationship".
  - 1) Attachment- *with phases of: recognition- acknowledgement, self-revelation (step1; data gathering) validation, potency*
  - 2) Assiduity- *with phases of: respect, potentiality, attentiveness, honesty, self-revelation ( step 2; individual's sense of self, values, fears, affirmation of meaning , responsibility, confidence, courage*
  - 3) Intimacy- *with phases of: probity, self-reflection(step3; personal vulnerabilities, secrets, covert experiences, self-doubts, shame/guilt. revelation of intimate depth and honesty, confession ), perspicacity, sexuality, inclusiveness*
  - 4) Confirmation- *with phases of: personal validation, augmentation, sustainment-empowerment, expansiveness*
- Caring is a process, a state, an attitude, a strategy, an enabling factor, as well as a tool.

#### **Common and Distinct Manifestations of Episodic and Chronic/Long-term Conditions**

- Organizational strategies to manage and sort data into Common and Distinct
- Manifestations of holistic health states such as:
  1. Signs and symptoms of health and illness
  2. Life Processes and Sub Processes
  3. System responses such as excesses (hyper) and insufficiencies (hypo) manifestations.
- These were all viewed as variations from the desired centre-balance or homeostasis position, and normative state. Homeostasis and Norms are the desired outcomes.

1. The *Person* as the individual client (intrapersonal system & interpersonal system)
2. *Family* as client (interpersonal system)
3. The *Group* – loosely connected individuals who share a task or goal focus (temporary or long term)
4. *Community* (or population level of affiliation) – identifiable groups clustered in similar places, for identified purposes and of clusters of groups, families, and individuals referred to as the community system
5. *Populations* – collective communities and identified by common characteristics, environment, target health risk threat, need or resource.

### **Communication**

- a process, a skill, a core competency, a strategy, and an enabling factor that will enhance the quality and efficacy of the nursing process and all other nursing interventions.

### **Community System**

- The target of nursing behaviors that facilitate optimal functioning of a “group of people having common organization and mutual interest”. Nurses with in numerous communities. Any activity the nurses engages in to promote community coping or maturation qualifies as a community activity (Bevis, 1982, p.19).

### **Critical Thinking**

- Through a higher level of thought, the human is able to create elements of logic, and explore the benefits and consequences of actions. Critical thinking progresses from simple to complex levels in purposeful ways.

### **Creativity**

- A unique plan designed to help individualized collective client systems find meaning in experiences to foster adaptation and maturation.

### **Decision-making**

- Decision making is the acquiring, ordering, and selecting of tools, resources, or alternatives for reaching goals or fulfilling needs.

### **Empowerment for Self-responsibility and Advocacy**

- This is a process whereby individuals become active in their healthcare by directing their own resources, processes, personnel, and tools within their environment so that they may achieve optimal health, wellness, and well-being.

### **Enabling Factors**

- Enabling factors within a system are features that assist with the operation and flow of the system and enhance the efficacy of the outcomes.
- Enabling Factors for the Collaborative Bevis Nursing System for Education and Practice are: *Caring Communication Creativity Critical thinking Cultural sensitivity Ethics Economics Empowerment Health, well-being, and safety Healthcare technology Influence Optimal quality standards Professionalism Research Reflection*

### **Environment**

- An environment may be internal and physiological or external involving an individual’s immediate surroundings including all that is living, and non-

living. Plans and actions for human survival, optimal holistic health and well-being must be considered in any nursing care plan for the client system.

### **Existentialism**

- Each person is unique, the whole of a human being is different from his/her parts, and humans are thinking beings that can make choices.
- A human is free and possesses freedom to choose but they are accountable to themselves and other human beings.

### **Generative Behaviors**

- nursing measures that are innovative, productive, reproductive, and/or rehabilitative. These are included in tertiary care components.

### **Generative Interventions (G)**

- Identify dangerous and unhealthy variables in the environment that may cause harm, distress, and discomfort, which threaten recovery or rehabilitation. Interventions are focused on the removal of these unhealthy and noxious factors and the development of role adjustment during aspects of crises, distress, strain, malfunctioning, lack of information or uncoordinated resource allocation and availability.

### **Health**

- Health is a resource for everyday life. It is the goal of all nursing behaviors. Culture, life choices, resources, power, place and time, as well as many other variables can influence health. Health can be enhanced by the utilization of enabling factors. Health is a dynamic process where the individual, family, or community is able to realize aspirations, satisfy needs, and change or cope with the environment.

### **Humanism**

- Emphasizes value, beauty, and importance in being human and is concerned with human existence and quality of life.

### **Interpersonal**

- The target of nursing behaviors that promote optimal functioning of groups, families, and communities.

### **Intrapersonal**

- The target of nursing behaviors. (Within a personal space).

### **Leadership/Management/Planned Change**

- The process of leadership/management/planned change subsumes the processes of leadership, organizational structure, and management. Planned change is the purposeful planned adaptation to a shift in the environment

### **Learning**

- A change in behaviour, perception, insights, attitude, or a combination of these that can be repeated when the need is aroused, is considered to be learning.

### **Lifestyles**

- are the choices that client systems make in regard to health options, practices, beliefs, cues and behaviours.

### **Lifespaces**

- refer to the environments or where the client system conducts their life styles and life ways

**Lifeways**

- strategies, actions, behaviours, and methods that client systems use to achieve the health goals.

**Maladaptation**

- a matter of perception, not the intent of the systemic response

**Nursing**

- Nursing is a process with a purpose of promoting optimal health and well-being of individuals, families, groups, and communities. Nursing's role is to facilitate life processes and subprocesses in the client system. Nurses are regulated health professionals who provide care with the purpose of promoting "the highest possible level of health or self actualization for clients/patients" (Bevis, 1982, p.16-17).

**Nursing Process**

- The phases of the Nursing Process are: Assessment, Diagnosis, Prioritization, Planning, Implementation, and Evaluation. These phases are spread across the 3 stages of the client system (Input, Throughout, and Output.) with feedback and reassessments expected continuously.

**Nurtrative Behaviors**

- nursing measures that are therapeutic, curative, comforting, and supportive. (Secondary care)

**Nurtrative Interventions (N)**

- Designed to be helpful, facilitate change, and encourage ongoing observations and activities to foster homeostasis, adaptation and maturation, comfort care, and healing interventions which would promote recovery and recuperation. This is referred to a secondary prevention. It is focused on limiting injury and illness.

**Person**

- Individuals are unique, holistic persons who experience the world through their own lived experiences. Individuals seek to understand who they are, their purpose, and their place across the dimensions of time and space. They are worthy of respect and care, are responsible beings capable of entering relationships that foster maturation and self-actualization

**Philosophical Foundation**

- Provides insight into beliefs about persons, environment, health, and nursing while simultaneously influencing values, attitudes, choices, and behaviors.

**Population System**

- Collections of communities or groups with identifiable indicators that form a significant target for concern for nursing behaviors to be applied. This may occur on a global scale (e.g. with disaster planning).

**Problem-solving**

- a dynamic, orderly process and is used to arrive at a place where decisions can be made.

**Protective Behaviors**

- prevent disease or diminishing health; maintain and promote health. (Primary care)

**Protective Interventions (P)**

- Focused prevention, safety, well-being, optimal health, primary health, and adaptation focused activities. These are referred to as primary prevention.

**Purpose**

- Through preventative (protective), therapeutic (nurturing), and rehabilitative (generative) nursing behaviors, and in collaboration with individuals, families, groups, and communities, nurses strive to achieve, maintain or restore health. Health or a high level of wellness is central to the whole system and is the purpose of the nursing process

**Research**

- an orderly process of problem examination, inquiry, exploration, and validation that will assist systems to explore and examine phenomena and unknown questions related to client systems (of all kinds).

**Strain**

- human response to stimuli that attempts to foster health adaptation and promotes coping to individual stress stimuli or clusters of stressors.

**Stress**

- refers to those forces or stimuli that press in upon or stimulate a system.

**Subprocesses**

- contribute to the flow and context of the Life Processes.

1. Stress/Strain
2. Critical thinking
3. Communication
4. Learning
5. Human growth and development needs and maturation
6. Change/Leadership
7. Self-responsibility
8. Caring
9. Lifeways and lifestyle elements (stress control/change, physical

fitness/exercise, nutrition/diet/healthy weights, self-responsibility for healthy life choices etc.) and lifespaces.

**Teaching**

- purposeful activity designed to facilitate learning and hence, becomes linked to learning. Teaching is a process of creating an environment where learning can take place.

**Theoretical Basis: System and Process***General Systems Theory*

- A system functions as a unit with separate parts that can stand alone or be organized in an interdependent fashion to create a sense of “oneness”.
- The system is never static and “being” is never the same over time
- The major focus is on the person as a system.
- Individuals are open systems. Systems have inputs (energy and information going into the system), throughputs (processes and interactions), and outputs (energy and information going out of the system).
- Nurses function within the state of the client system by applying the Nursing process to gain an understanding of their needs, goals, life processes and

subprocesses. They then plan tools and strategies to implement to facilitate desired outcomes for client systems.

Table 1

Life Processes	Subprocesses	Nursing Tools and Strategies
Maturation	Stress/Strain	Caring
Adaptation	Change	Communication
-	Critical thinking	Teaching
-	Communication	Problem Solving
-	Learning	Decision making
-	Growth and development	Leadership/Management
-	Management, leadership	Planned change
	Caring	Research
	Self responsibility, lifestyle	Empowerment for self responsibility and advocacy

*Organization of General Systems Theory*

Input → Throughput → Output

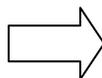
*Input*

- Derived from assessment data and information concerning the needs, goals, problem, and desire of the client system.

Table 2

*Throughput*

Theories
Processes
Concepts
Constructs
Paradigms
Nursing knowledge and information From science and the arts (related to humanity)



Synthesized into useful content to inform nursing measures, thought, action, effect, decision making, life processes and subprocesses, nursing strategies and tools. (See Table 1)

**Output** - The nursing behaviors or actions, skills, roles, services, and functions of nursing comprise the output of the system and result from the synthesis of the throughput component. *Output* :All output fosters the life processes.

**Tools and Strategies for Nursing Practice**

1. Caring
2. Communication
3. Teaching
4. Problem-solving/Decision-making
5. Leadership/Management/Planned change
6. Research
7. Empowerment for Self-responsibility and Advocacy

