



มหาวิทยาลัยราชภัฏนครปฐม

# Conceptual Model of Psychiatric Nursing

**THAT IS THE WAY TO  
LEARN THE MOST...  
WHEN YOU ARE DOING  
SOMETHING WITH  
SUCH ENJOYMENT  
THAT YOU DON'T  
NOTICE THAT THE  
TIME PASSES.**

Asst. Prof. Wariya Chankham



# Theory

- **Biomedical Theory : Adolf Meyer**
- **Psychoanalytic theory** จิตวิเคราะห์
- **Erikson's Psychosocial theory** จิตสังคม
- **Sullivan's Interpersonal Theory**
- **Humanistic (Maslow)**
- **Behavior theory ( Pavlov & Skinner)**
- **Peplau/ROY/OREM**

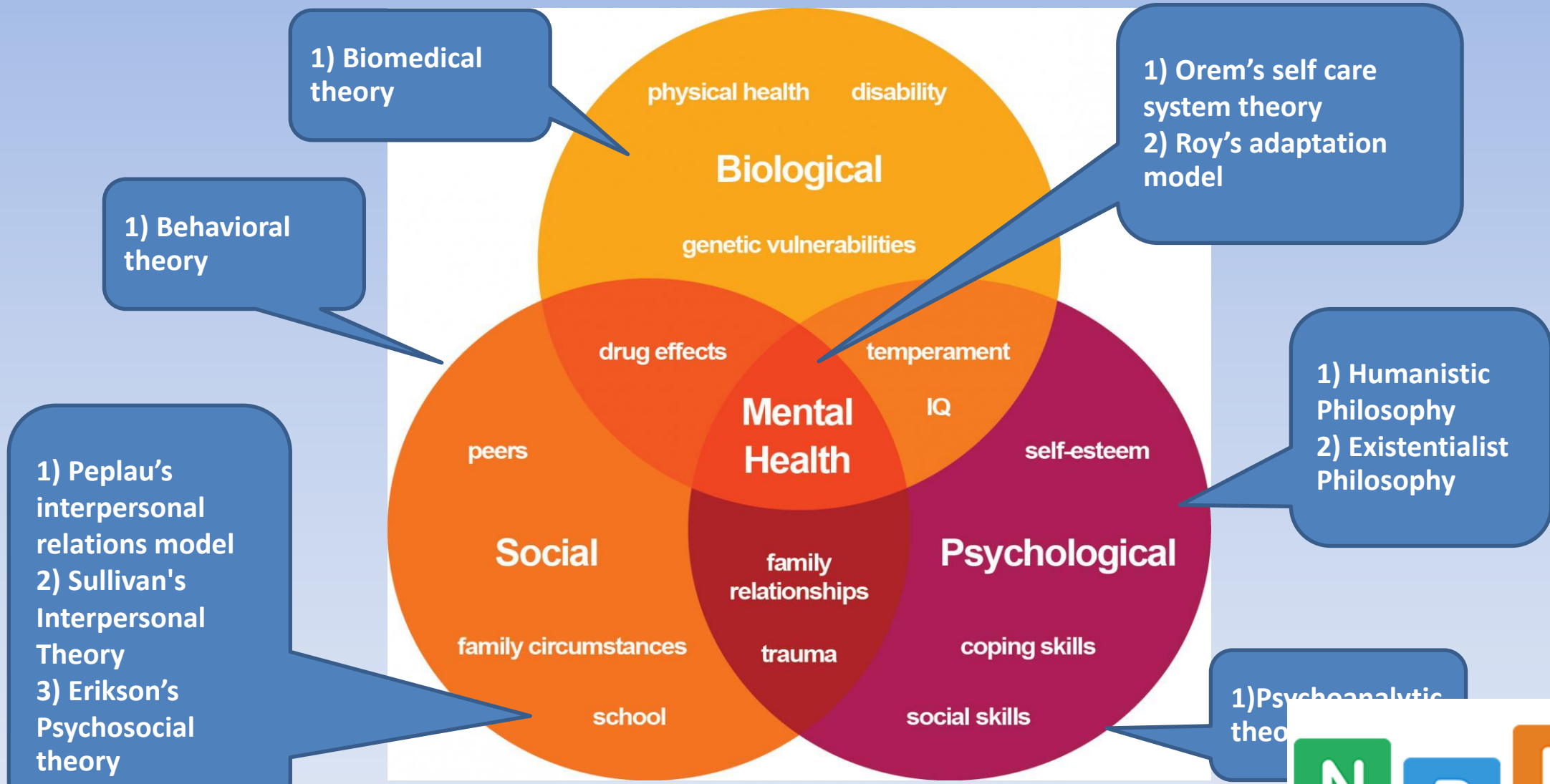


# ปัจจัยที่ทำให้เกิดโรค

## Biopsychosocial model

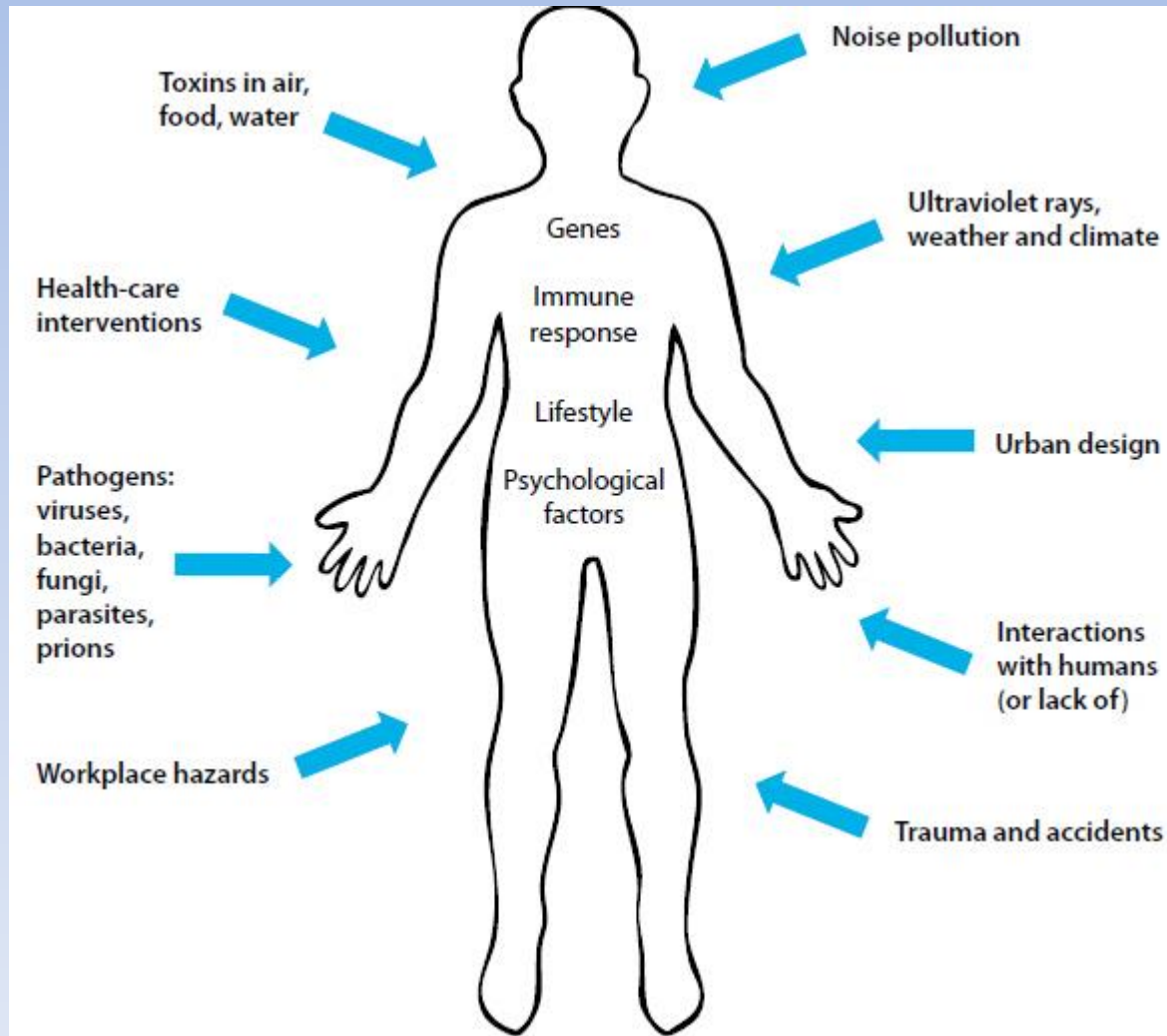


# Model of mental health and mental illness



# 1) Biomedical Theory : Adolf Meyer

Examples of internal and external causes of disease and ill health



A vertical stack of four colored boxes, each containing an icon and text:

- Genetic factors**: Teal box with a DNA double helix icon.
- Dopamine hypothesis and other biochemical factors**: Orange box with a brain scan icon.
- Brain structure**: Green box with a brain icon.
- Associated factors - Bi**: Orange box with a fetus icon.

# Nursing care based on Biomedical Theory

## \*Biological Approach\* (AO1)

Explain these in more detail...

### Brain Damage

Abnormal behaviour can occur if the structure of the brain is damaged

### Infection

Some forms of infection can give rise to types of mental illness, such as schizophrenia and general paresis

### Genes

Research suggests that some people may be genetically at risk of developing certain disorders

### Biochemistry

Neurotransmitters are thought to be unbalanced in the nervous system of people who have some psychological disorders



SHOULD



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## Neurotransmitter Functions and Effects

Neurotransmitter	Function	Effect
Dopamine	Inhibitory	Fine movement, emotional behavior. Implicated in schizophrenia and Parkinson's.
Serotonin	Inhibitory	Sleep, mood, eating behavior. Implicated in mood disorders, anxiety, and violence.
Norepinephrine	Excitatory	Arousal, wakefulness, learning. Implicated in anxiety and addiction.
Gamma-aminobutyric acid (GABA)	Inhibitory	Anxiety states.
Acetylcholine	Excitatory	Arousal, attention, movement. Increase = spasms and decrease = paralysis.

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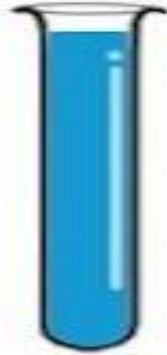
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Schizophrenia



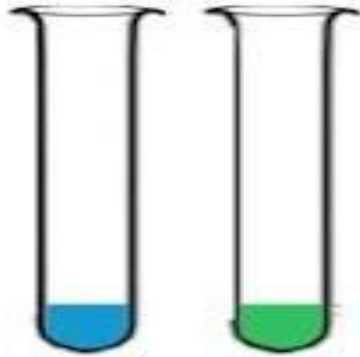
Anxiety



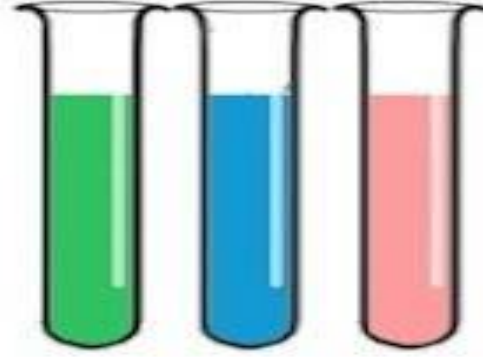
Happiness



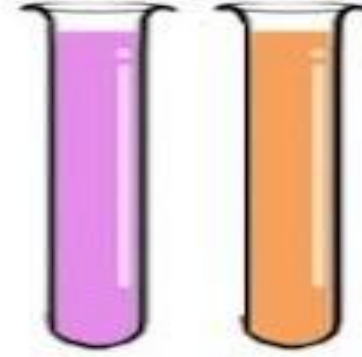
Depression



Love



Fight or Flight



They rule our lives

key:

-  - Dopamine
-  - Serotonin
-  - Oxytocin
-  - Noradrenaline
-  - Adrenaline

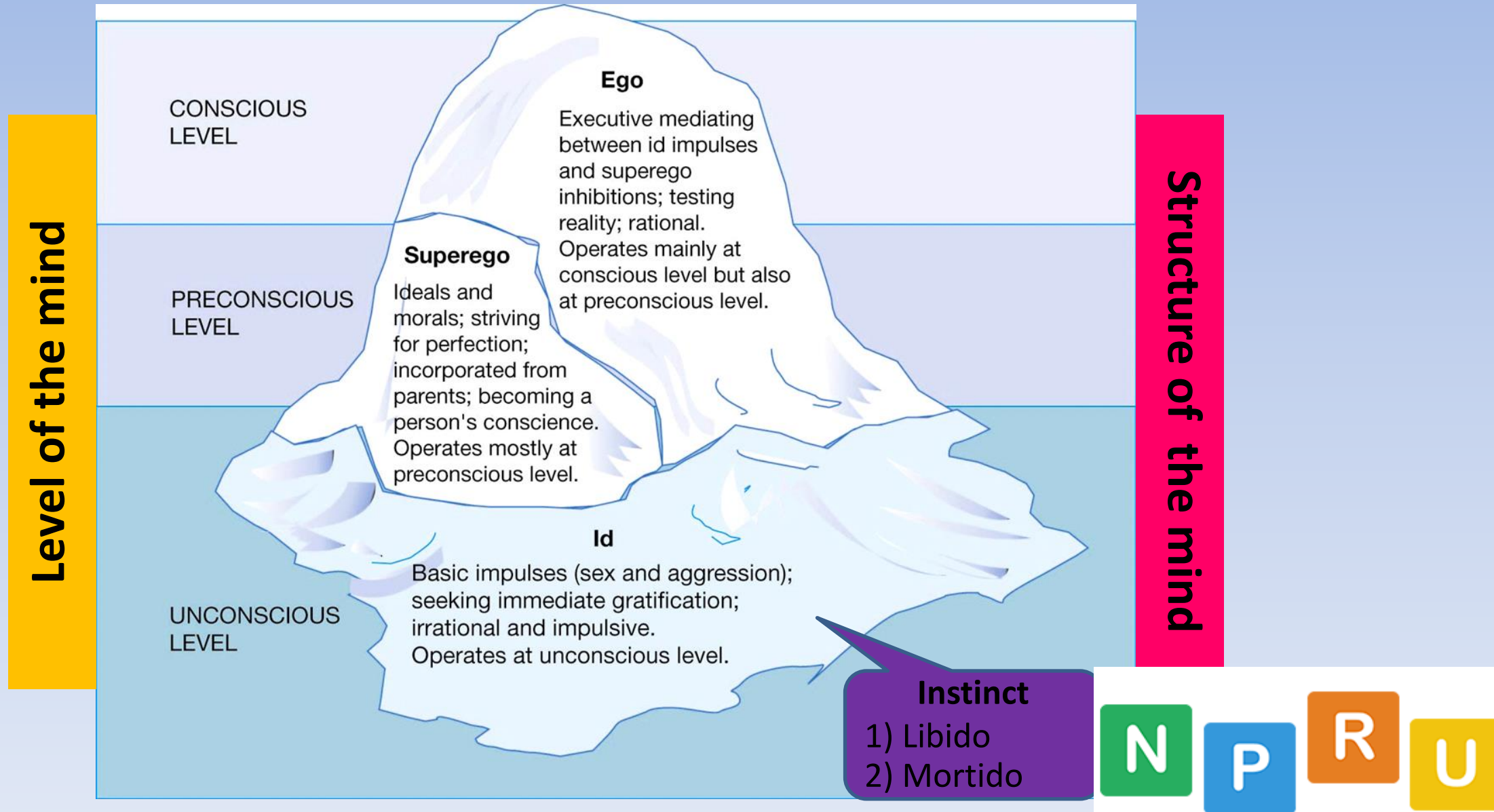
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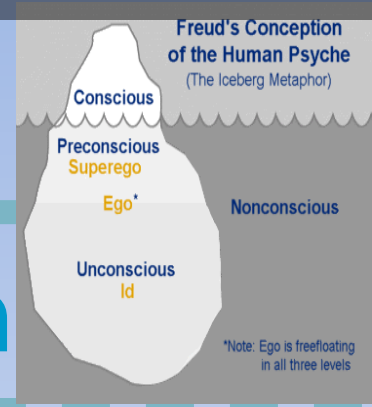
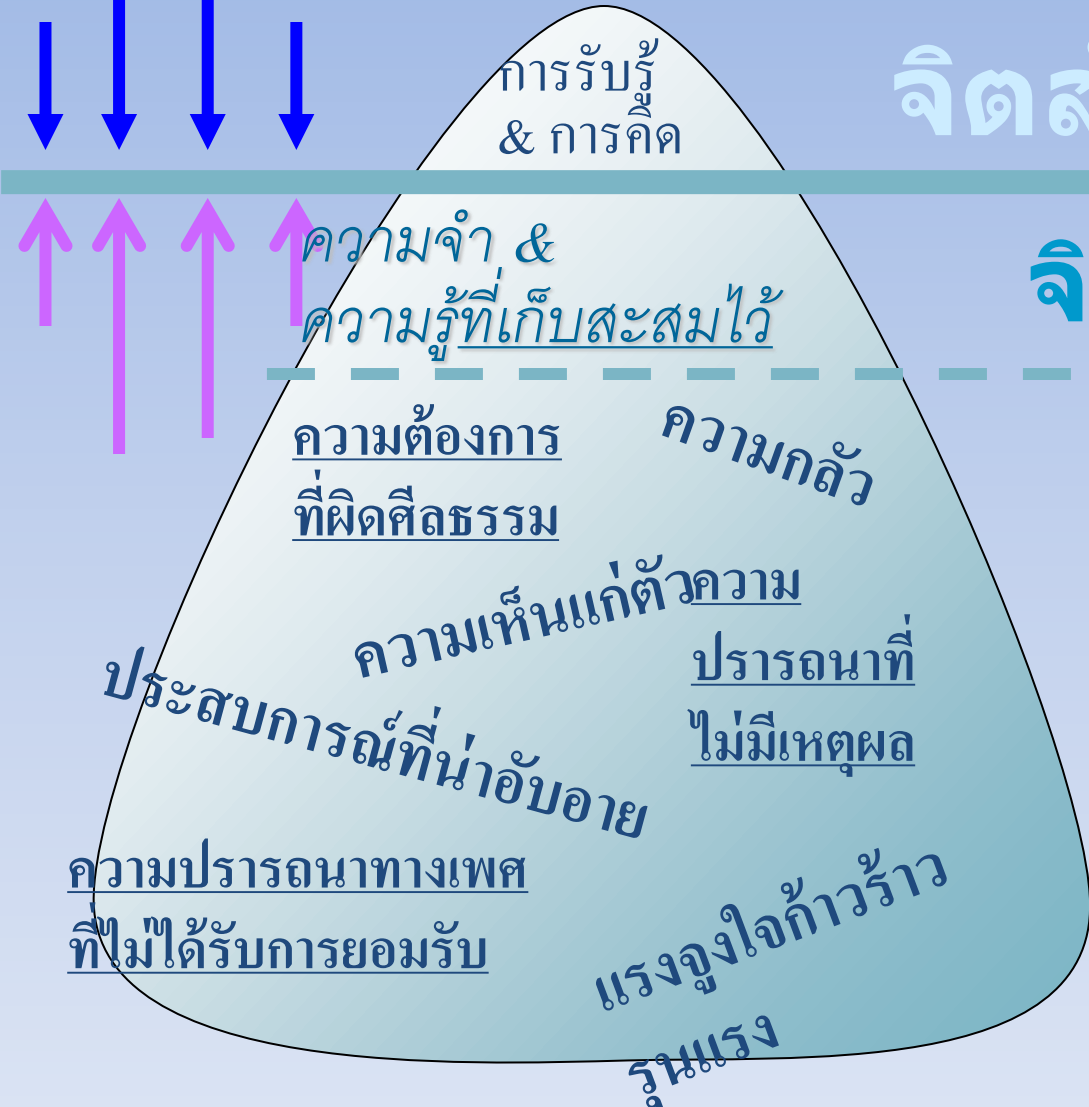
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## 2) Psychoanalytic theory : Sigmund Freud



# Psychoanalytic Theory



## ► Freud's Psychosexual Stages of Development



**ORAL** 0-2  
Infant achieves gratification through oral activities such as feeding, thumb sucking and babbling.



**ANAL** 2-3  
The child learns to respond to some of the demands of society (such as bowel and bladder control).



**PHALLIC** 3-7  
The child learns to realize the differences between males and females and becomes aware of sexuality.



**LATENCY** 7-11  
The child continues his or her development but sexual urges are relatively quiet.



**GENITAL** 11-Adult  
The growing adolescent shakes off old dependencies and learns to deal maturely with the opposite sex.

**Table 1: Freud's stages of psychosexual development**

<b>Stage</b>	<b>Age</b>	<b>Sexual Focus</b>	<b>Key Developmental Tasks</b>	<b>Fixation results in</b>
<b>Oral</b>	Birth – 1 year	Mouth (chewing, sucking)	Weaning	Obsessive eating, smoking or drinking (alcoholism)
<b>Anal</b>	2 - 3 years	Anus	Toilet training	Obsession with cleanliness, Sexual anxiety
<b>Phallic</b>	4 - 5 years	Genitals (masturbation)	Identifying with gender role models (Oedipus / Electra complex)	Difficulty with intimate relationships
<b>Latency</b>	6 – 12 years	None	Social interaction	No fixation occurs ( <i>this stage does not occur in all societies</i> )
<b>Genital</b>	Puberty & later	Genitals (sexual intimacy)	Intimate relationships productivity	Previous fixation = low sexual interest / no previous fixation = r sexual moti

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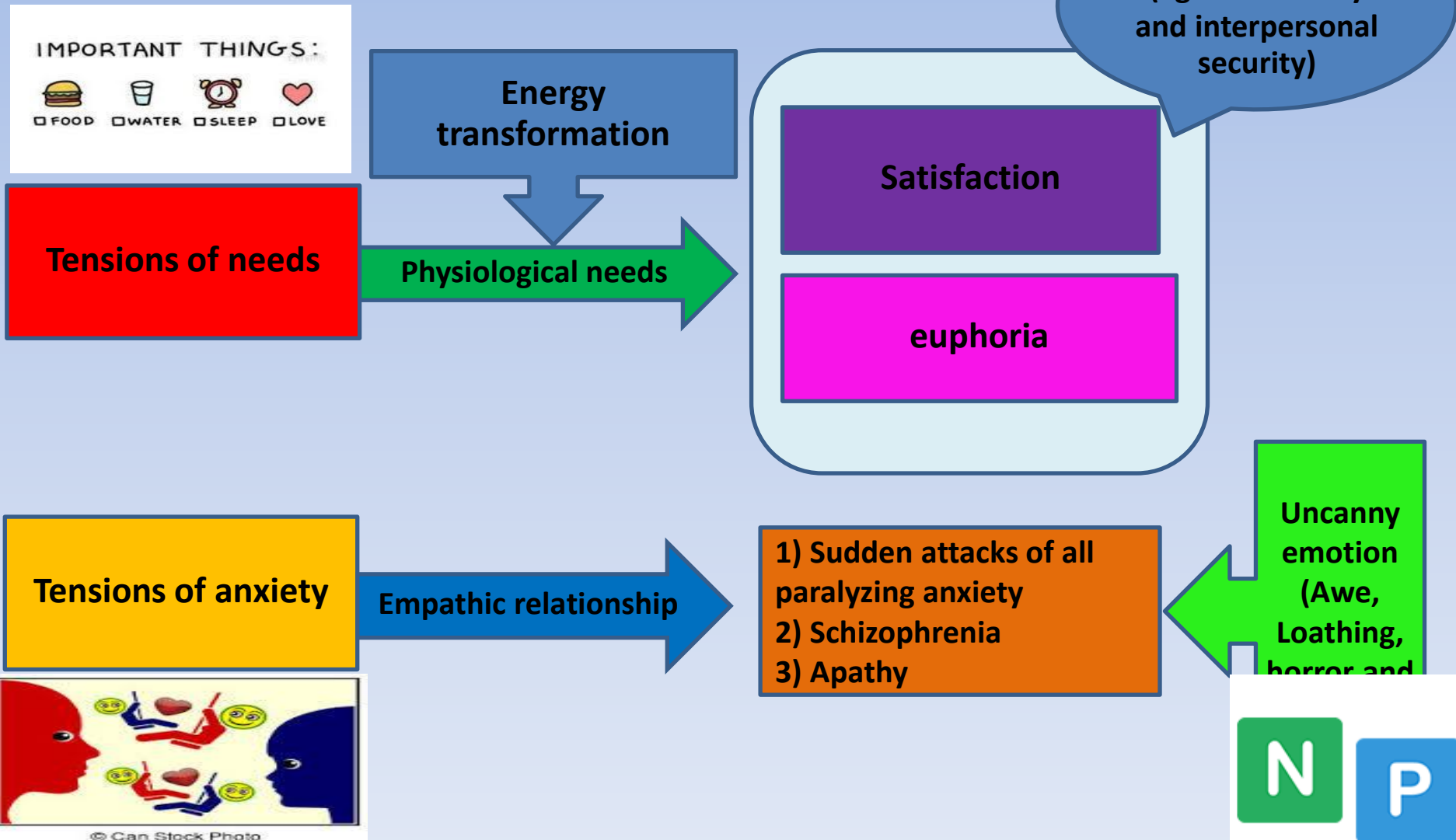
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# 3) Sullivan's Interpersonal Theory

Sullivan's conceptualized personality

## 1) Dynamisms



# Sullivan's conceptualized personality (cont.)

## 2) Personification

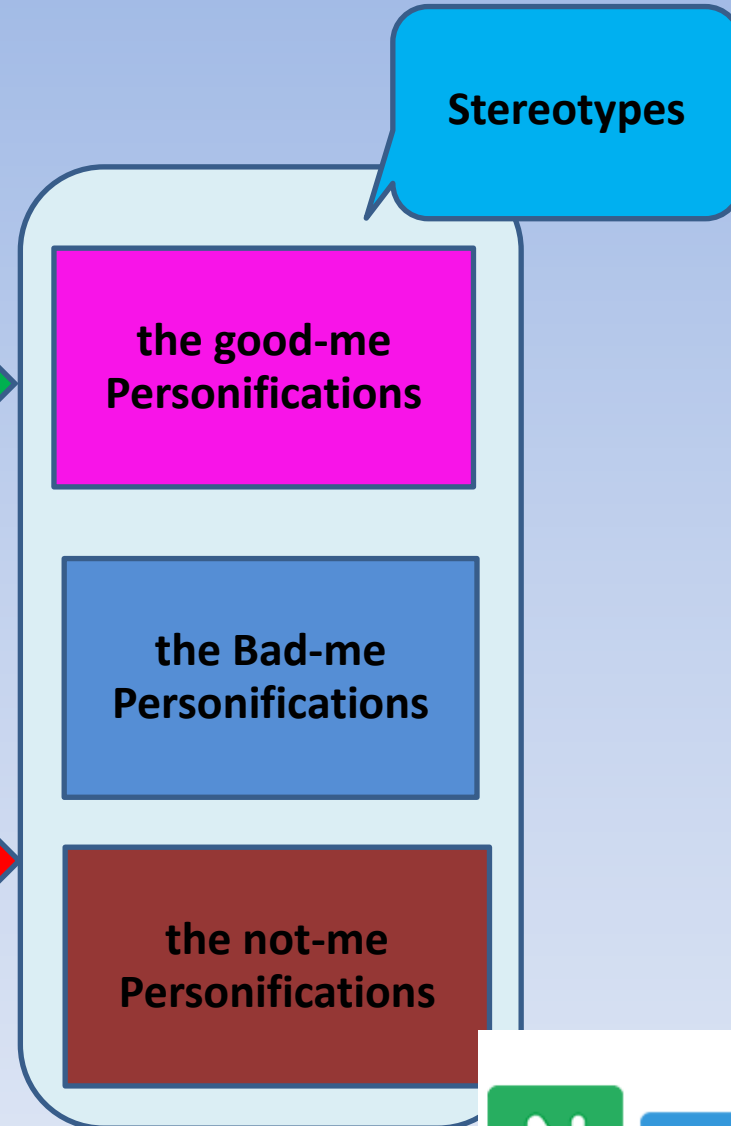
subjective perceptions  
(images of self and others  
throughout )



Bad-Mother,  
Good-Mother

reward and  
approval

punishment and  
disapproval



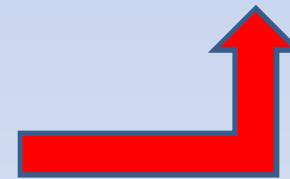
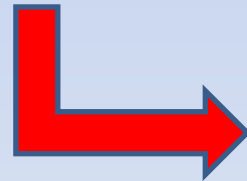
# Sullivan's conceptualized personality (cont.)

## 3) Cognitive process



Syntactic

Prototaxic



Parataxic





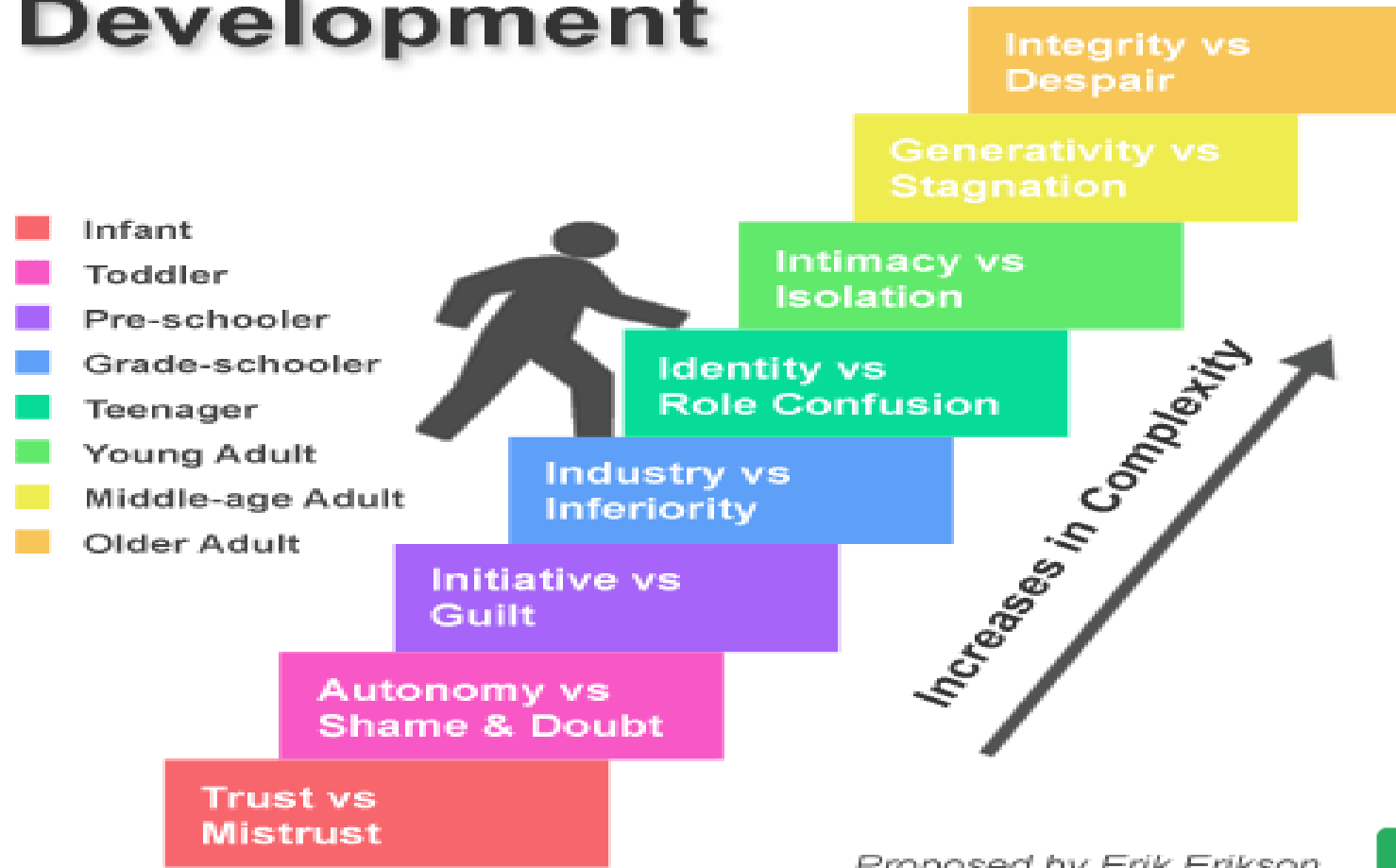
# Stages of Development

Stage	Age	Significant Other	Interpersonal Process	Learnings
Infancy	0-2	Mother	Tenderness	Good / Bad
Childhood	2-6	Parents	Imaginary Playmates	Syntactic Language
Juvenile Era	6-8.5	Playmates	Living with Peers	Competition, Compromise, Cooperation
Preadolescence	8.5 – 13	Single Chum	Intimacy	Affection & Respect
Early Adolescence	13 – 15	Several Chums	Intimacy and Lust	Balance, Security Operations
Late Adolescence	15 -	Lover	Fusion of Intimacy and Lust	Discover self & w



# 4) Erikson's Psychosocial theory

## Stages of Psychosocial Development



Proposed by Erik Erikson

## ERICKSON'S PSYCHOSOCIAL STAGES

<i>Stages</i>	<i>Crisis</i>	<i>Favorable Outcome</i>	<i>Unfavorable Outcome</i>
<b>Childhood</b>			
<b>1<sup>st</sup> year of life</b>	<i>Trust vs. Mistrust</i>	Faith in the environment and future events	Suspicion, fear of future events
<b>2<sup>nd</sup> year</b>	<i>Autonomy vs. Doubt</i>	A sense of self-control and adequacy	Feelings of shame and self-doubt
<b>3<sup>rd</sup> through 5<sup>th</sup> years</b>	<i>Initiative vs. Guilt</i>	Ability to be a "self-starter," to initiate one's own activities.	A sense of guilt and inadequacy to be on one's own
<b>6<sup>th</sup> year to puberty</b>	<i>Industry vs. Inferiority</i>	Ability to learn how things work, to understand and organize.	A sense of inferiority at understanding and organizing.
<b>Transition years</b>			
<b>Adolescence</b>	<i>Identity vs. confusion</i>	Seeing oneself as a unique and integrated person.	Confusion over who and what one really is.
<b>Adulthood</b>			
<b>Early adulthood</b>	<i>Intimacy vs. isolation</i>	Ability to make commitments to others, to love.	Inability to form affectionate relationship.
<b>Middle age</b>	<i>Generativity vs. self-absorption</i>	Concern for family and society in general.	Concern only for self— one's own well-being and prosperity.
<b>Aging years</b>	<i>Integrity vs. despair</i>	A sense of integrity and fulfillment; willingness to face death.	Dissatisfaction, despair over past.

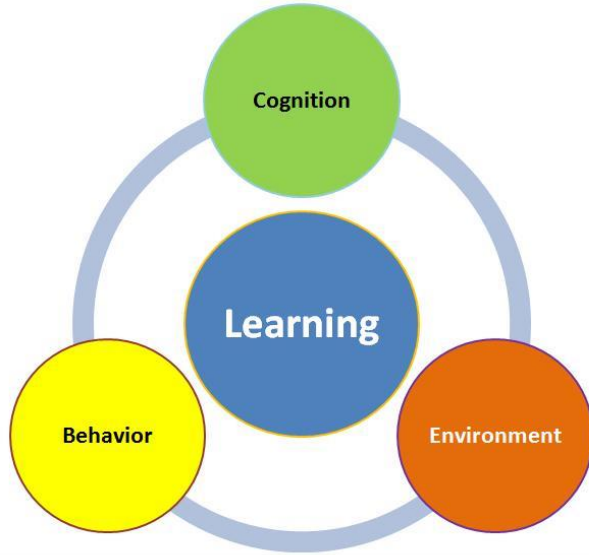
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# 5) Behavioral theory



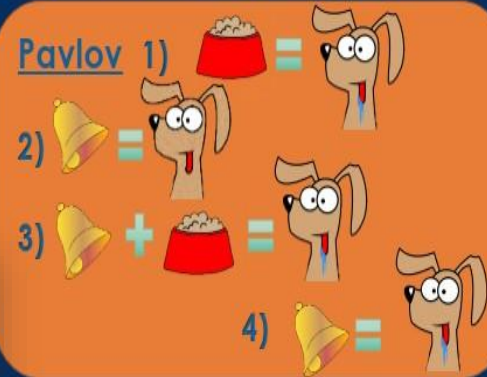
**THOUGHTS**



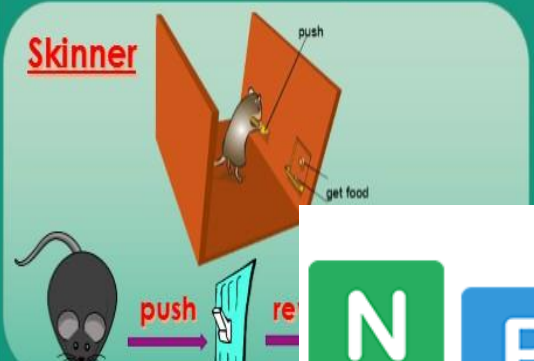
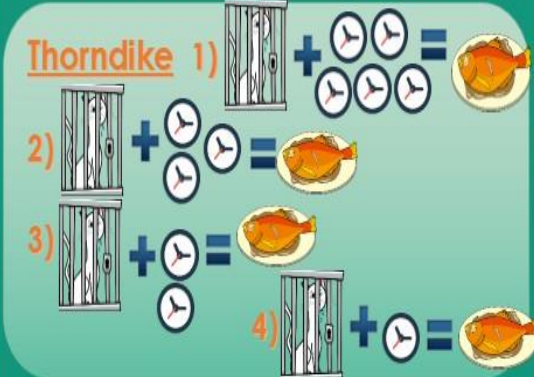
**BEHAVIORS EMOTIONS**

## BEHAVIORAL THEORIES

### Classical Conditioning



### Operant Conditioning



# CLASSICAL COUNTER CONDITIONING

**BEFORE**



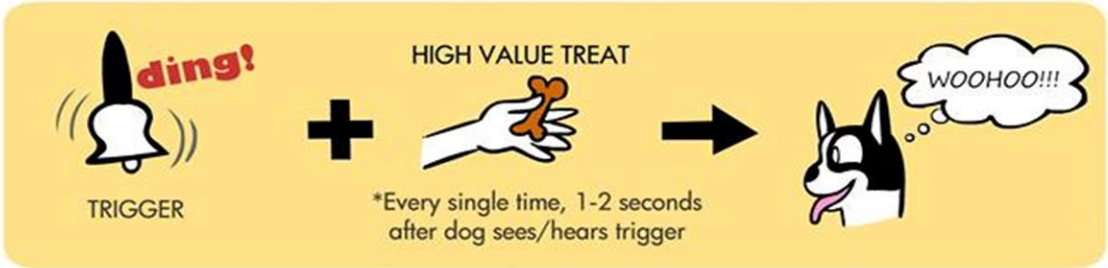
TRIGGER

FEAR  
barking, growling



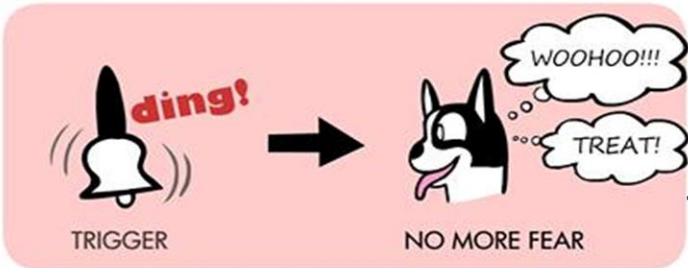
JOY, ANTICIPATION

**DURING**



*random intervals, many times*

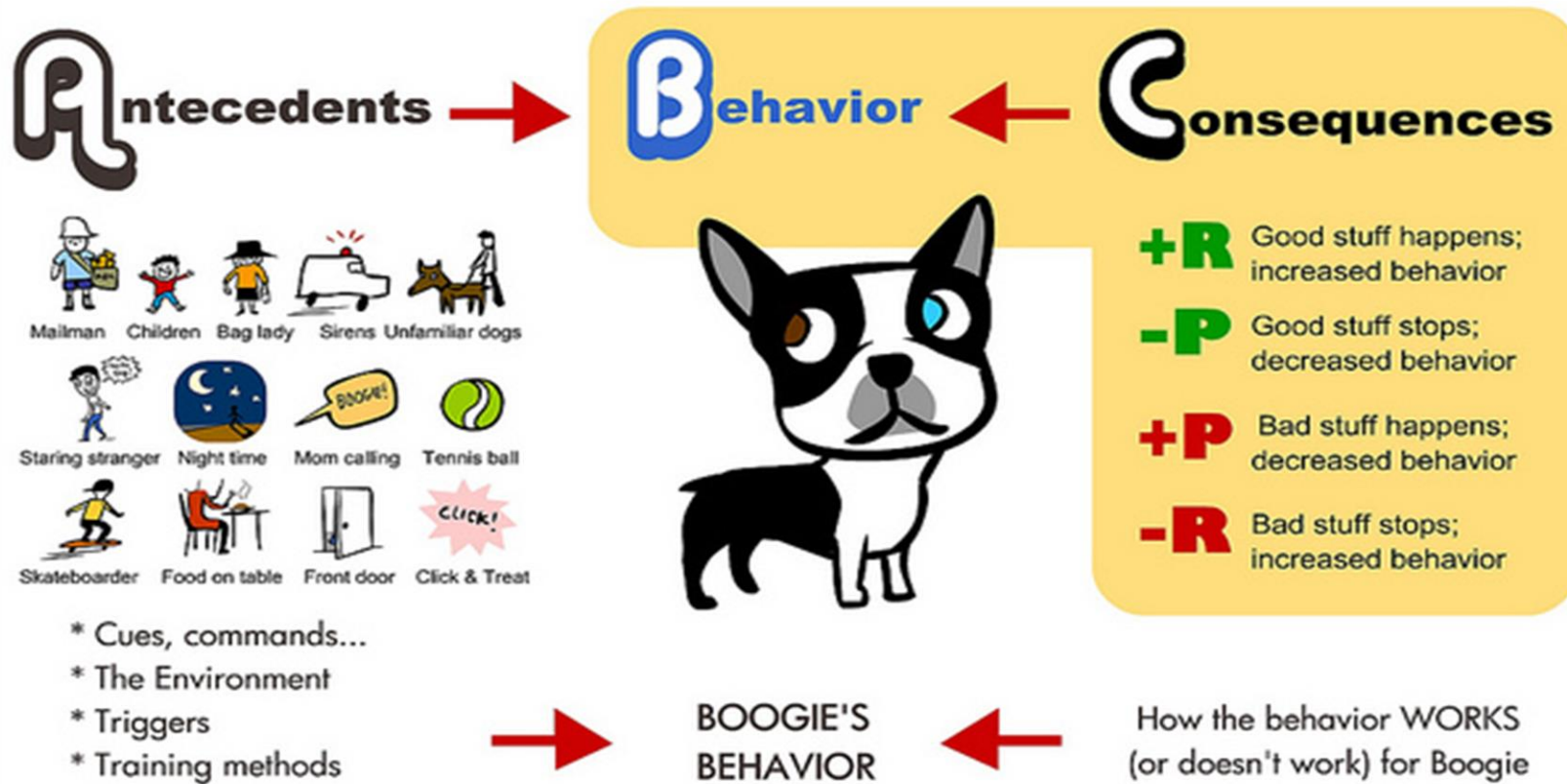
**AFTER**



“Pavlov”



# LEARNING THEORY: OPERANT CONDITIONING



**"The Most Fundamental Law of Behavior is that CONSEQUENCES DRIVE BEHAVIOR."**

"Skinner"

N P R U

	<b>Reinforcement</b> (Increase / maintain behavior)	<b>Punishment</b> (Decrease behavior)
<b>Positive</b> (add stimulus)	<b>Add</b> pleasant stimulus to <b>Increase / maintain</b> behavior	<b>Add</b> aversive stimulus to <b>Decrease</b> behavior
<b>Negative</b> (remove stimulus)	<b>Remove</b> aversive stimulus to <b>Increase / maintain</b> behavior	<b>Remove</b> pleasant stimulus to <b>Decrease</b> behavior



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**Primary Reinforcer**

**Secondary Reinforcer**

*Buys Food Primary (Reinforcer)*

**Aids Survival**

**My Rules at School**

look at the teacher	listen	do work	be quiet	raise hand to speak

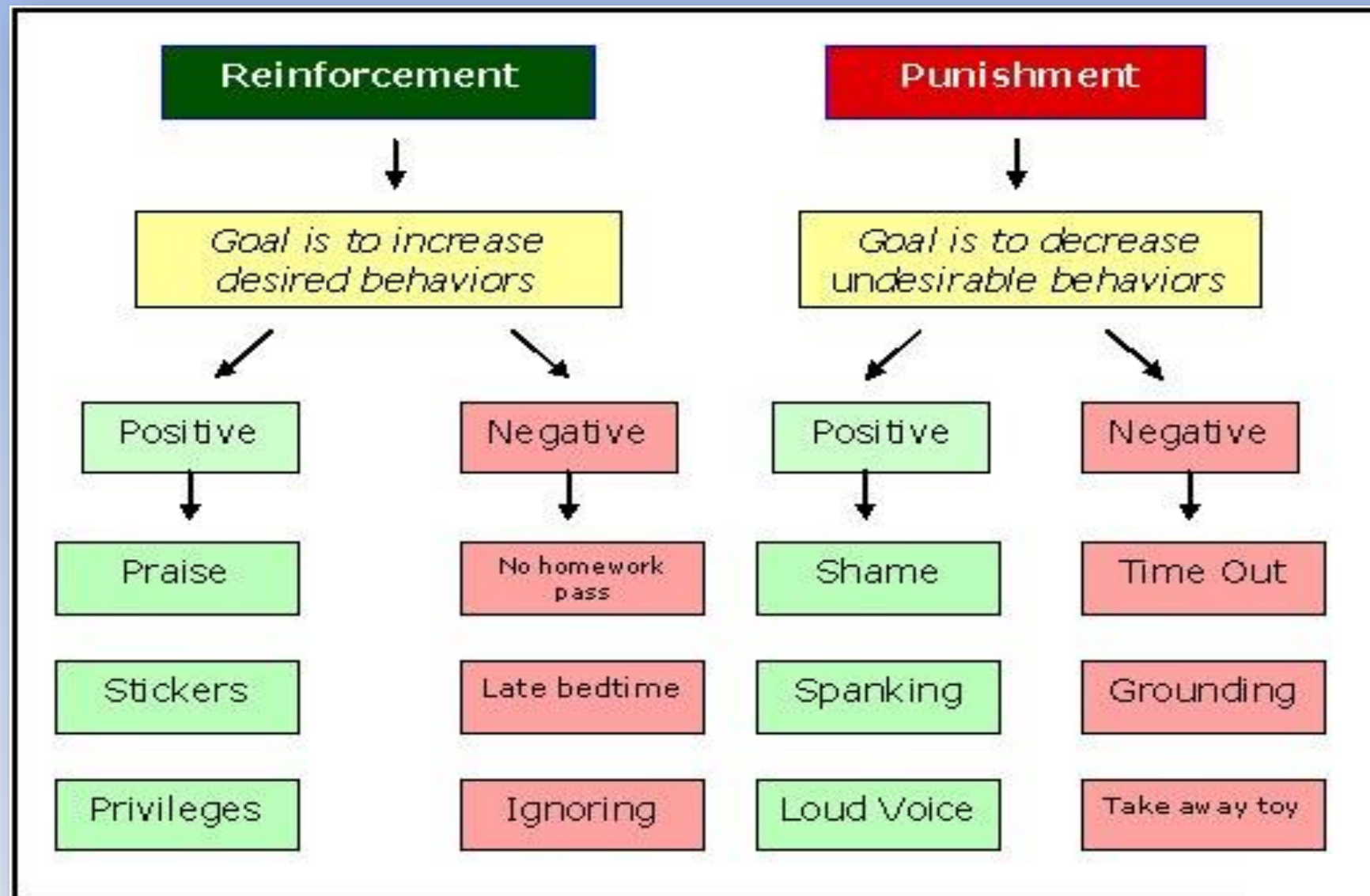
I am working for

**"What I'm Working For" Token Economy**

**What I'm Working For** Free Time

**N P R U**



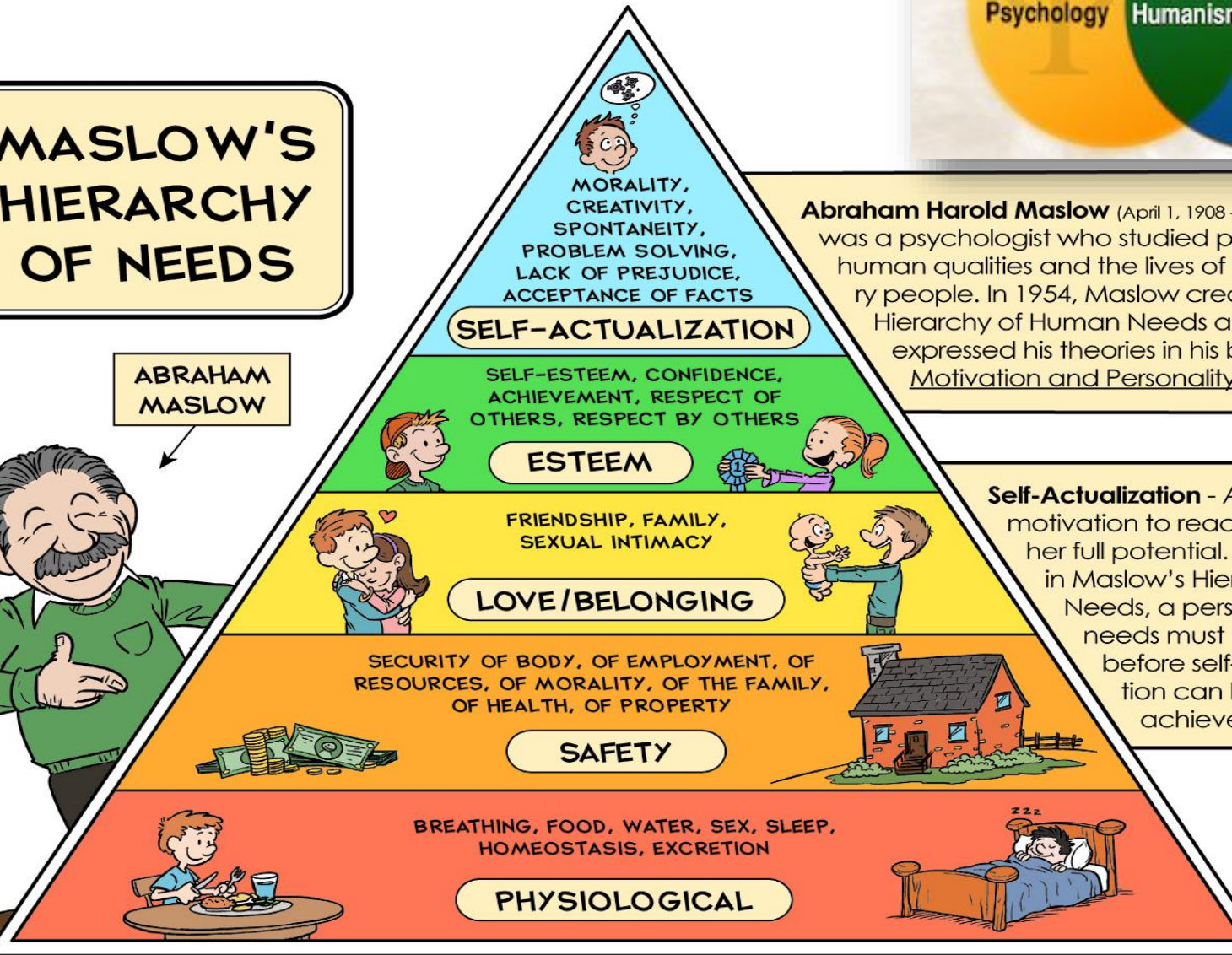


# 6) Humanistic Philosophy



## MASLOW'S HIERARCHY OF NEEDS

ABRAHAM MASLOW

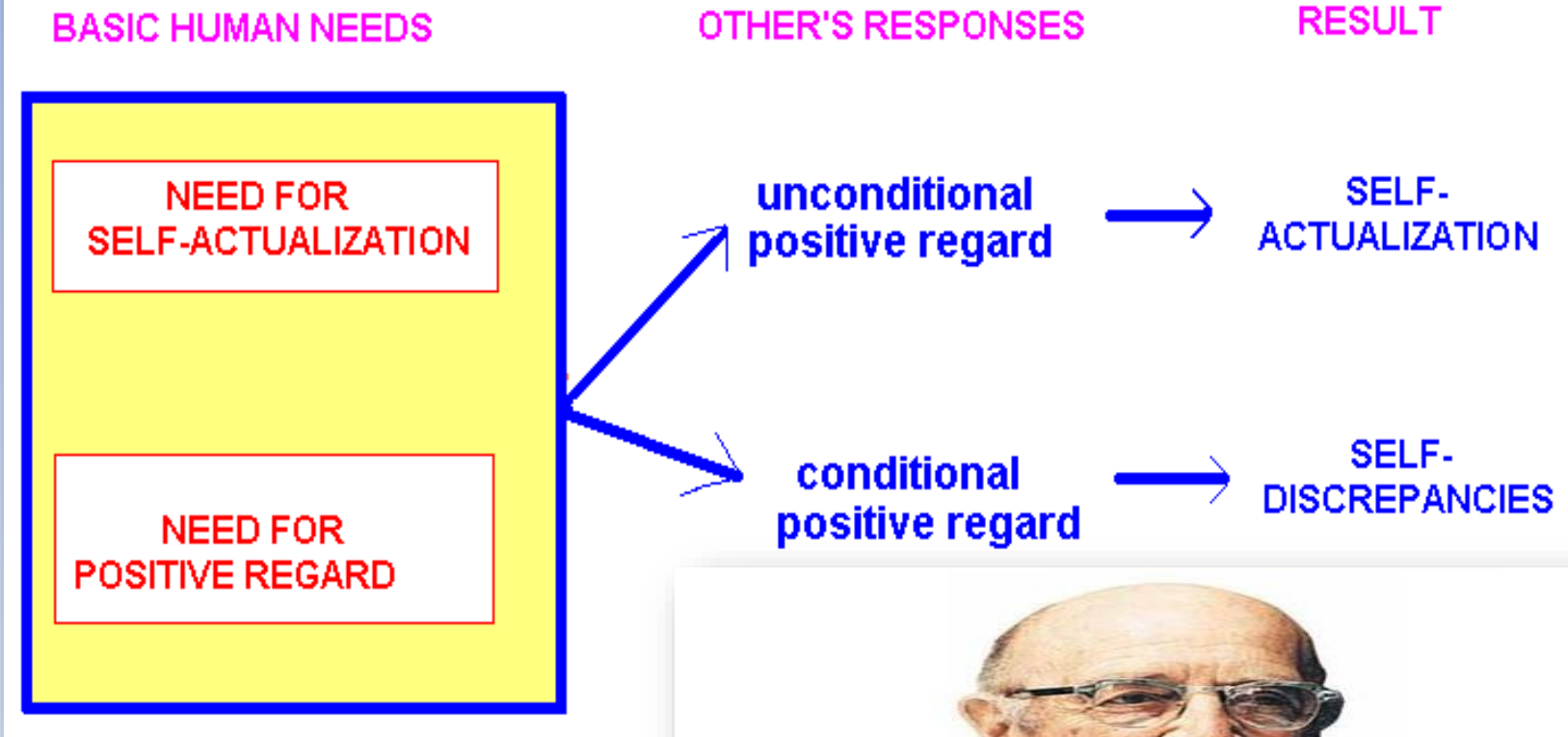


**Abraham Harold Maslow** (April 1, 1908 - June 8, 1970) was a psychologist who studied positive human qualities and the lives of exemplary people. In 1954, Maslow created the Hierarchy of Human Needs and expressed his theories in his book, *Motivation and Personality*.

**Self-Actualization** - A person's motivation to reach his or her full potential. As shown in Maslow's Hierarchy of Needs, a person's basic needs must be met before self-actualization can be achieved.



# Personality Theory of Carl Rogers



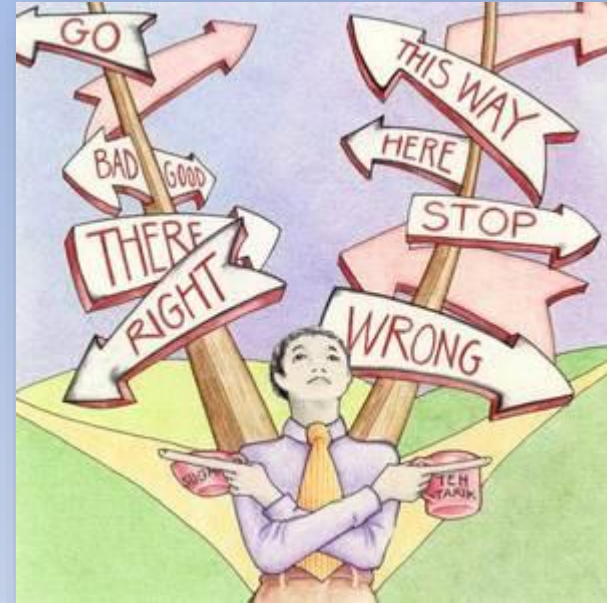
The curious paradox is that when I accept myself just as I am, then I can change.  
*Carl Rogers*



# 7) Existentialist Philosophy

Existentialist philosophy recognizes the existence of the individual as the real purpose of human life. The recognition is basically atheistic and it encourages the individual to free himself from the impositions of custom, governmental authority, economic pressures, and cultural inhibitions.

Goparaju Ramachandra Rao




QuoteAddict

QuoteAddict

# 8) Peplau's interpersonal relations model

mother of psychiatric nursing



✓ **Person**

A man who is an organism that lives in an unstable balance of a given system.


✓ **Nursing**

Significant, therapeutic interpersonal process. It functions cooperatively with human processes that present health as a possible goal for individuals.



✓ **Health**

Symbolizes movement of the personality and other ongoing human processes that directs the person towards creative, constructive, productive and community living.

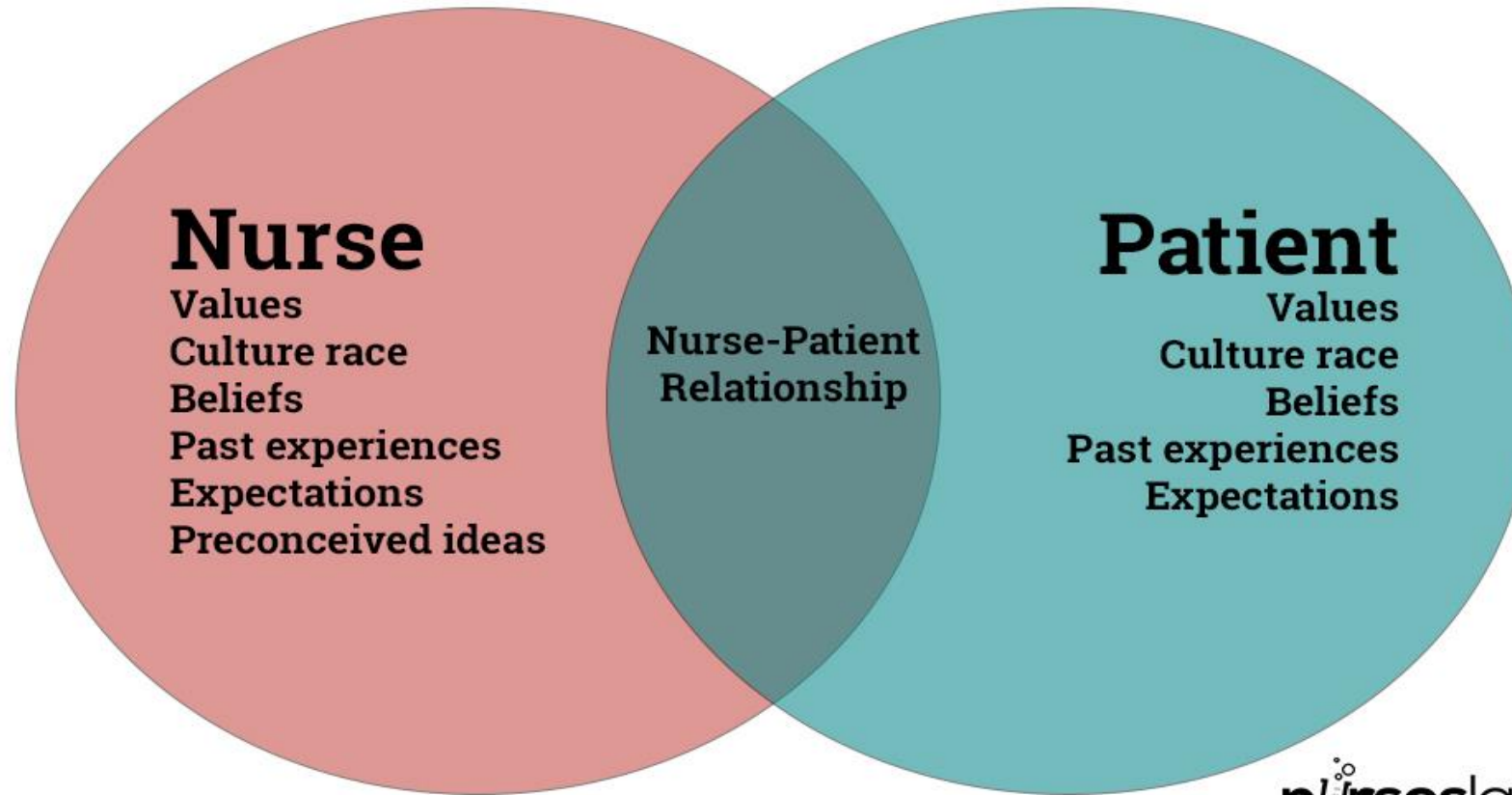


✓ **Environment**

Forces outside the organism and in the context of the socially-approved way of living, from which vital human social processes are derived such as norms, customs and beliefs.

# Peplau's Theory of Interpersonal Relationships

## Factors influencing orientation phase



[nurseslabs.com](http://nurseslabs.com)

### Therapeutic nurse-client relationship

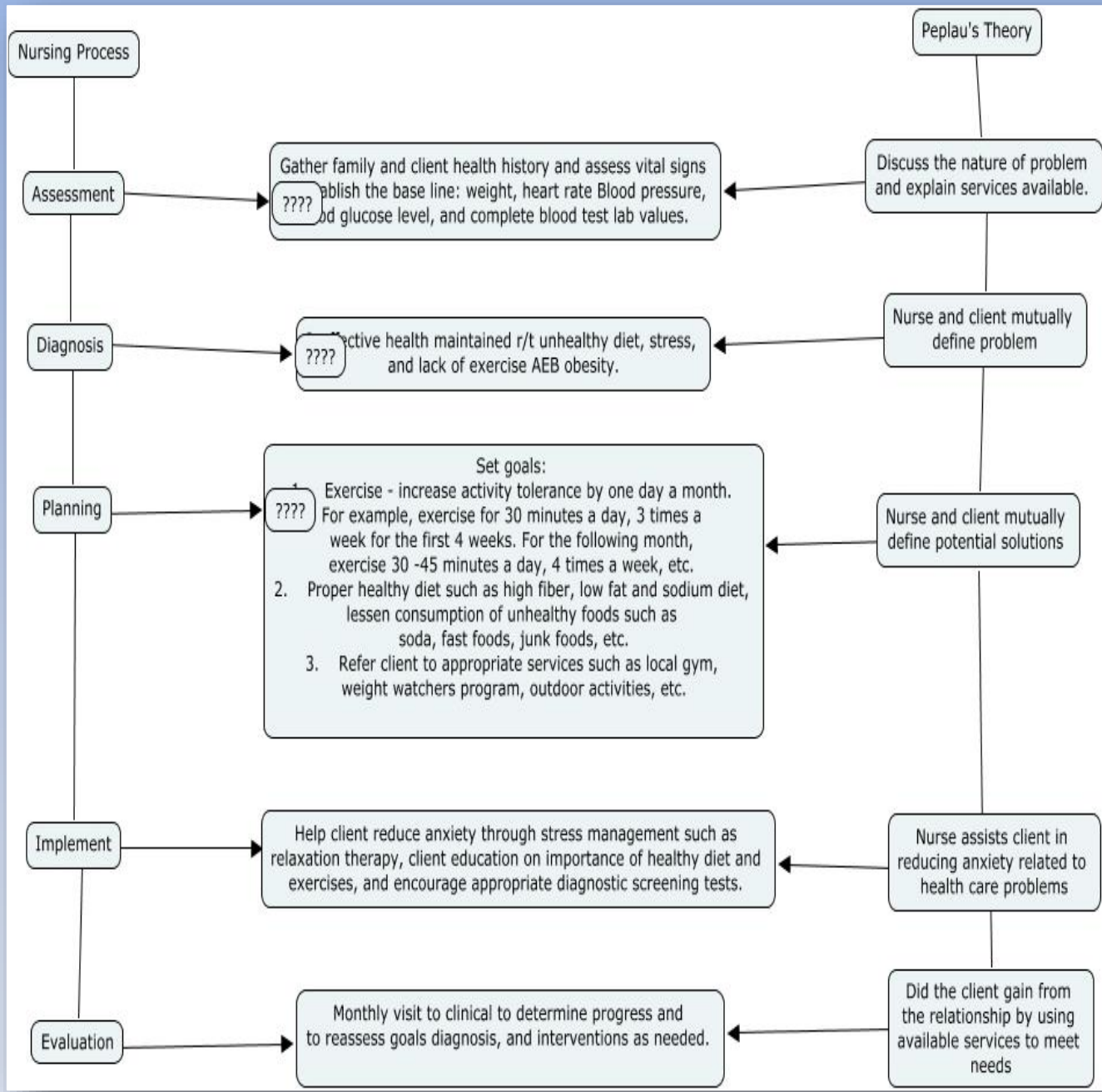
- 1) Orientation Phase
- 2) Identification Phase
- 3) Exploitation Phase
- 4) Resolution Phase



# Interpersonal Theory and Nursing Process

<p style="text-align: center;"><b>Assessment</b></p> <ul style="list-style-type: none"> <li>✓ Continuous data collection and analysis</li> <li>✓ May not be a felt need</li> </ul>	<p style="text-align: center;"><b>Orientation</b></p> <ul style="list-style-type: none"> <li>✓ Non-continuous data collection</li> <li>✓ Felt need</li> <li>✓ Definite needs</li> </ul>
<p style="text-align: center;"><b>Nursing Diagnosis &amp; Planning</b></p> <ul style="list-style-type: none"> <li>✓ Mutually set goals</li> </ul>	<p style="text-align: center;"><b>Identification</b></p> <ul style="list-style-type: none"> <li>✓ Interdependent goal setting</li> </ul>
<p style="text-align: center;"><b>Implementation</b></p> <ul style="list-style-type: none"> <li>✓ Plans initiated towards achievement of mutually set goals</li> <li>✓ May be accomplished by patient, nurse, or significant other.</li> </ul>	<p style="text-align: center;"><b>Exploitation</b></p> <ul style="list-style-type: none"> <li>✓ Patient actively seeking and drawing help</li> <li>✓ Patient initiated</li> </ul>
<p style="text-align: center;"><b>Evaluation</b></p> <ul style="list-style-type: none"> <li>✓ Based on mutually expected behaviors</li> <li>✓ May led to termination and initiation of new plans</li> </ul>	<p style="text-align: center;"><b>Resolution</b></p> <ul style="list-style-type: none"> <li>✓ Occurs after other phases are completed successfully</li> <li>✓ Leads to termination</li> </ul>





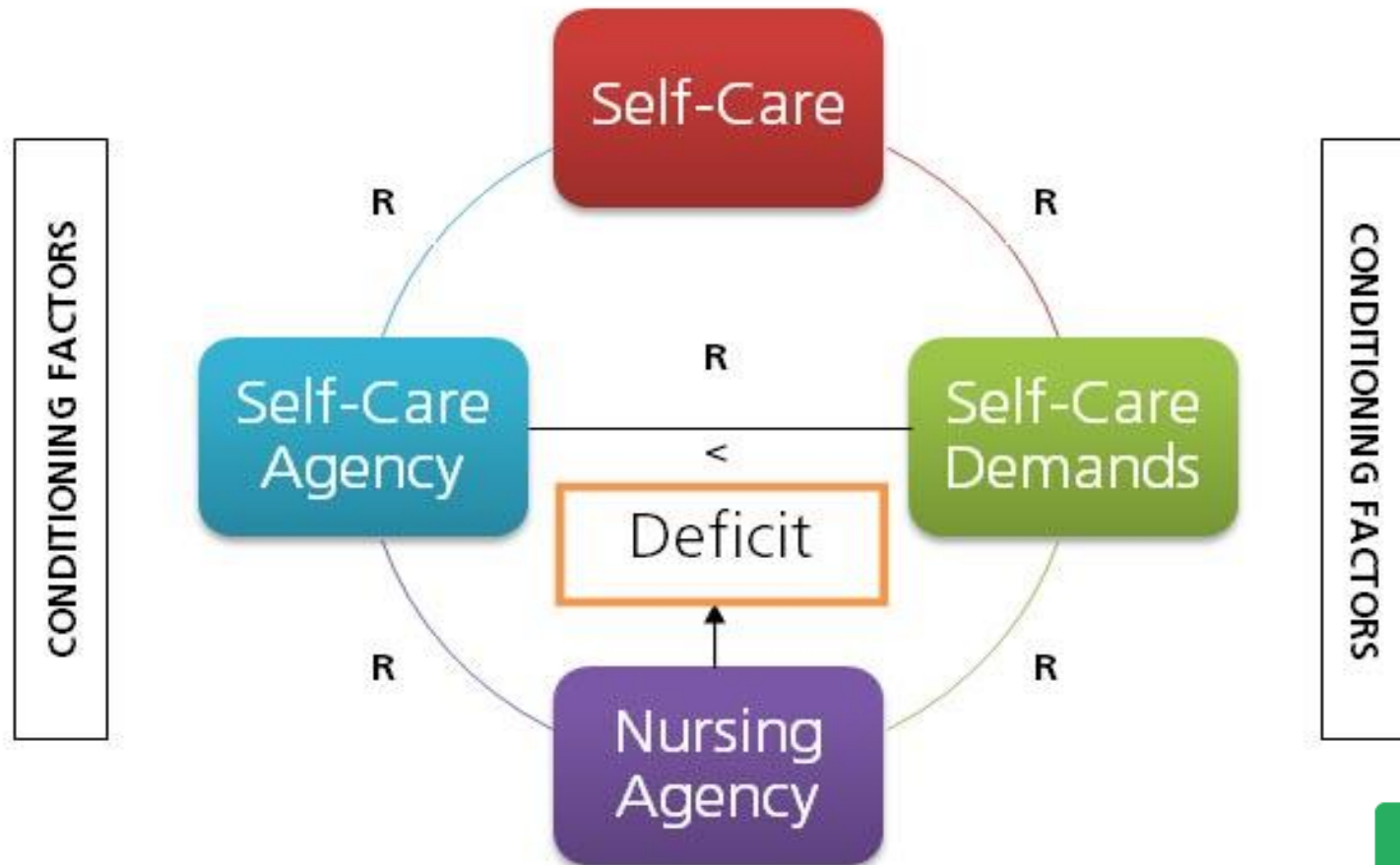
- ### PEPLAU'S SEVEN NURSING ROLES
- **Stranger**
  - **Resource role**
  - **Teaching role**
  - **Counselling role**
  - **Surrogate role**
  - **Leadership role**
  - **Technical Expert**



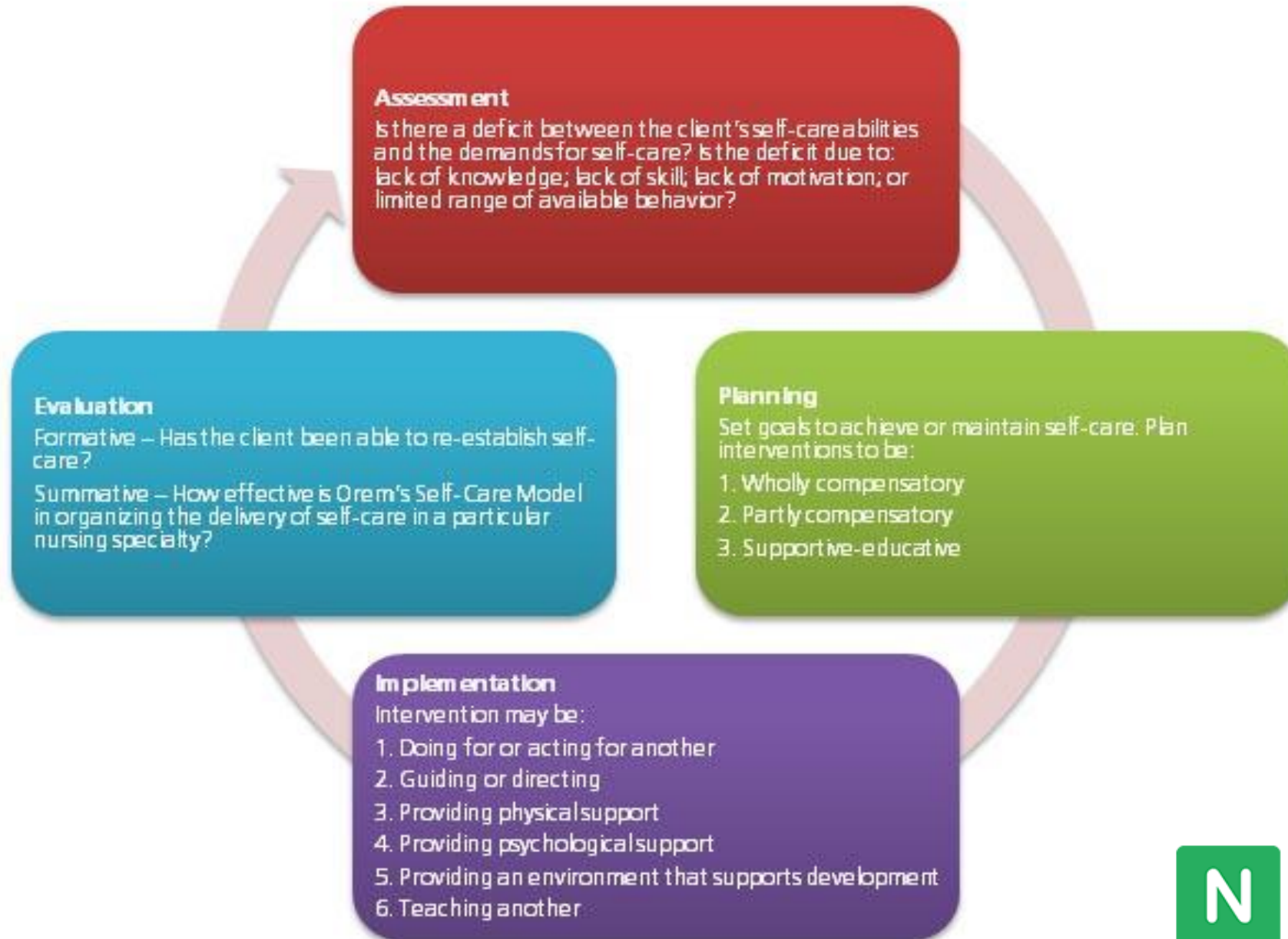


# 9) Orem's self care system theory

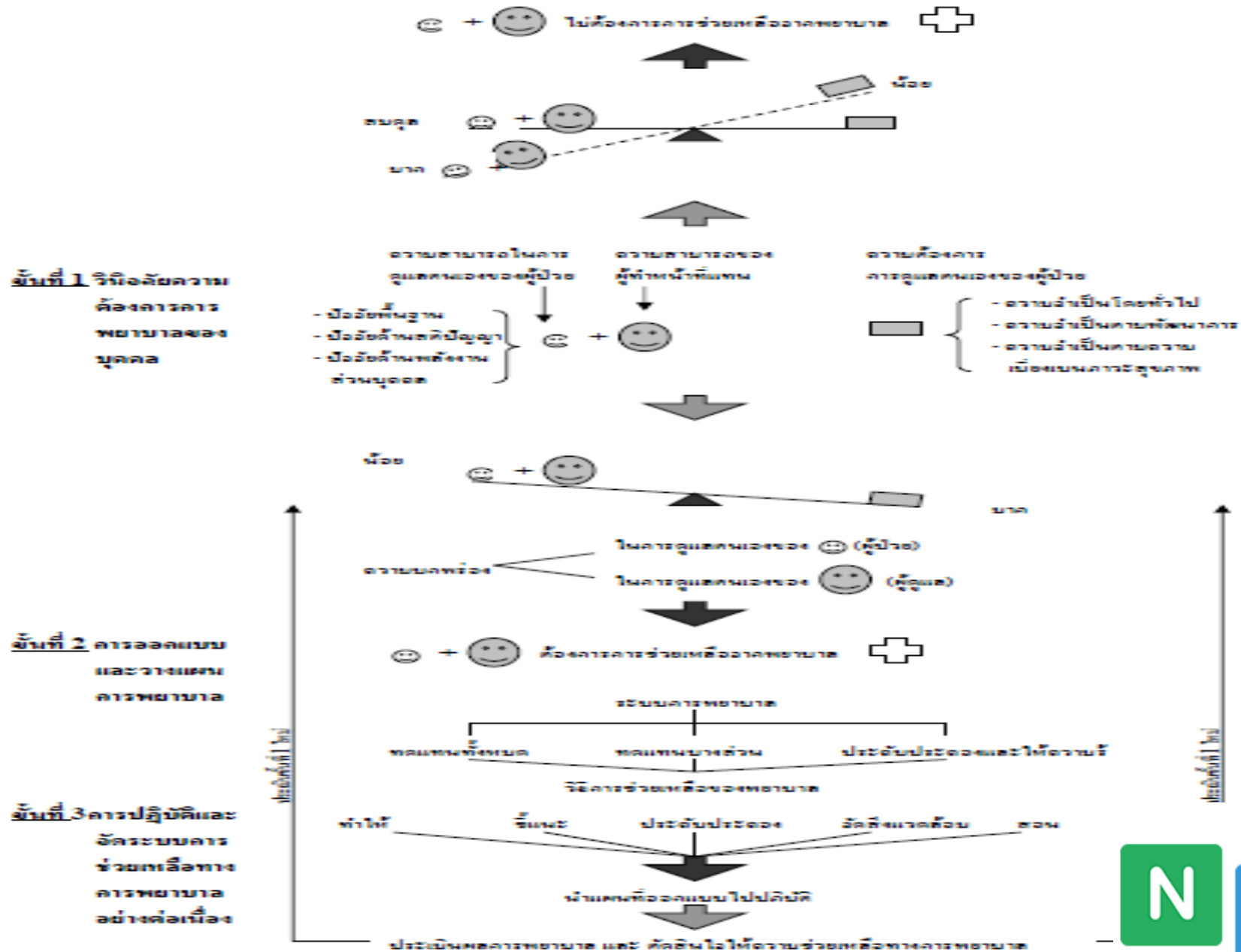
Conceptual framework of Orem's theory



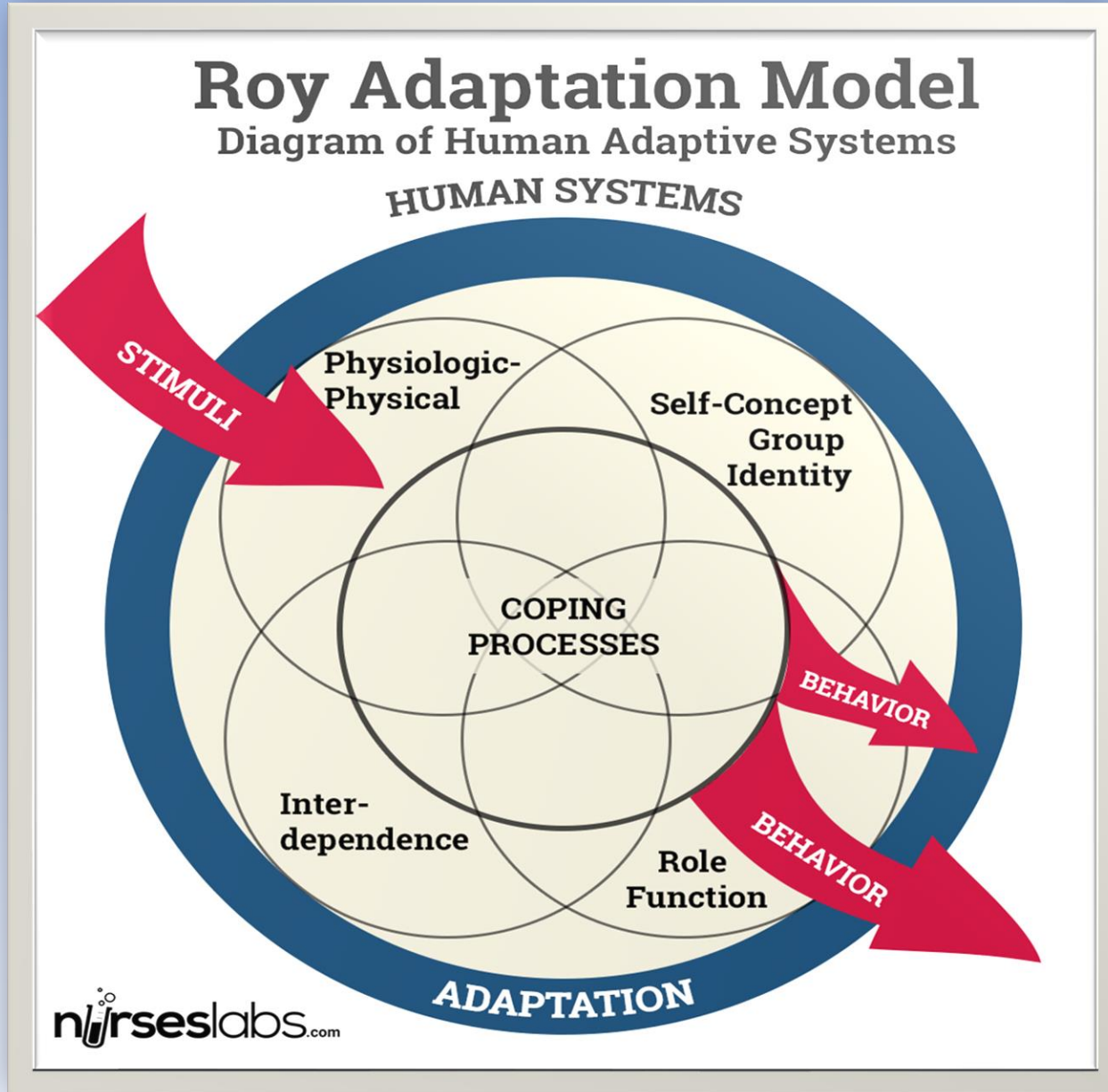
## Orem's model and the nursing process



แนวทางในการพยาบาลผู้ป่วยที่มีภาวะสมองเสื่อมและผู้ดูแล โดยใช้กระบวนการพยาบาลคณตฤษฎีของโอเรัม



# 10) Roy's adaptation model



## Six-Step Nursing Process

- 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.

## Levels of Adaptation

- Integrated Process
- Compensation
- Compromis



- จง ส่งตัวแทน จับสลาก จาก **8** สถานการณ์
- จง ระดมสมองเพื่อ วิเคราะห์สถานการณ์ ที่ได้รับว่า
- **1** . จะอธิบาย สาเหตุการเจ็บ ด้วยทฤษฎีใด
- **2** เพราะเหตุใดตามหลักการของทฤษฎีนี้ นั้น ๆ
- **3** จะใช้ ทฤษฎี ทางการพยาบาลในข้อใดเพื่อ วางแผนในการให้การพยาบาล



มหาวิทยาลัยราชภัฏนครปฐม