Comfort Theory In Practice

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Abstract

While many nursing students may understand the concept of comfort, the application of comfort to their practice can be difficult. Comfort care is an art that must be modeled and practiced to be proficient. Katherine Kolcaba developed her mid-range nursing theory of comfort as it can be applicable to a wide range of practice settings. The goal of the accompanying interactive case study and power point presentation is to familiarize the nursing student with the process of comfort as well as the product of providing comfort.
Comfort Theory in Practice

Since the beginning of nursing, the attainment of comfort for patients has been a major goal of care. As Alligood (2006) states “Comfort is central to nursing”. Katherine Kolcaba first began to develop her comfort theory while working on a dementia unit. Comfort, defined by the Merriam-Webster Dictionary (1997), is a noun and a verb. As a noun, it is something that gives freedom from pain, anxiety, or trouble; and as a verb, it is to give strength and hope. While the concept of comfort is cognitively understandable, its definition and execution is less defined. Comfort is an idea that all practitioners can understand and agree upon; however, the assessment and interventions associated with comfort are a skill set that can be learned.

Comfort Theory Definition

Kolcaba’s Comfort Theory is a mid-range theory. Mid-range theories, by definition, are more easily understood, and can be applicable to a wide range of settings, and are less complex (Kolcaba, 2001).

Attainment of comfort requires that both the nurse and the patient are actively involved. As Malinowski (2002) points out, “…it is imperative that nurses realize the value and relevance that the act of comfort brings to the nursing profession in general, and to nursing practice in particular.”

Humans actively attempt to try to achieve comfort. (Alligood) The definition of comfort is unique to each individual and family, and can be an evolving thing.
Concepts of Comfort

Kolcaba identified four key concepts in her comfort theory. Health care needs are defined as any needs that occur in health care situations not met by the patients’ support system. They can be internal or external. Nursing interventions are any intentional actions undertaken to meet the needs of patients. Intervening variables are elements that each patient carries with them to the health care setting and are not under the control of the caregivers. As Alligood explains, these variables impact how the patient views comfort.

Types of Comfort

There are three types of comfort identified. Relief: The state of a patient who has had a specific need met; Ease: The state of calm or contentment; and Transcendence: The state in which one rises above one’s problems or pain (Kolcaba, 2002).

Contexts of Comfort

Comfort is met by having needs met in the four contexts of human experience (physical, psychospiritual, environmental, and social (Kolcaba, 2001). Physical needs relate to physiologic problems, and bodily sensation. These are based on the medical diagnoses that the patient may carry. Psychospiritual needs are individual and internal (self esteem and awareness, sexuality). Environmental needs encompass the external surroundings. Social needs relate to those interpersonal relationships, family, and roles in society.

Comfort of Nurses

Kolcaba’s comfort theory also includes and supports the comfort of nurses. Drouin, et al (2006) points out that “As hospitals seek Magnet Status, many are looking at Kolcaba’s Comfort
Theory as the model in which they can shape their practice on. It increases patient satisfaction and therefore can help an institution’s position in the competitive healthcare market.”

Comfortable nurses leads to improved retention and increased job satisfaction. The four contexts as explained above also apply to nurses. Physical comfort: a clean safe work environment; psychospiritual comfort: feelings of control over independent practice, performance feedback, respect, and recognition; environmental comfort: adequate workloads and staffing, social: shared communication, interdisciplinary collaboration, educational opportunities.

Summary

Kolcaba’s Comfort Theory is a mid-range nursing theory that is easily adaptable to any area of nursing practice. Comfort is unique to the art of nursing, and shows as well the science of nursing. It is our responsibility to ensure that the education of how to assess and intervene to attain comfort. This education must be directed at those new to our profession and to our peers when knowledge deficits exist.
References


   http://www.thecomfortline.com/taxonomicstructure.html


