

IEMT Self Care Model

Based on the work of Dorothea Orem (1980)

Dorothea Orem developed the self-care deficit nursing theory which quickly became “a grand theory of nursing” that has been widely adopted in the field of health care provision and training.

It was developed between 1959 and 2001 is also referred to as “Orem's Model of Nursing”. It is most commonly implemented in rehabilitation and clinical primary care environments, where the central aim of treatment is to restore patient independence.

Central philosophy

The central aspect of Orem's model is that all patients wish to care for themselves and dependency is desired by very few. Dependent and incapacitated individuals may recover more quickly when encouraged and permitted to perform their own self-care to the best of their ability and within the limits of their capacity.

The self-care model is the very antithesis of the “total care” concept outlined and described by Irving Goffman et al.

Self-care requisites

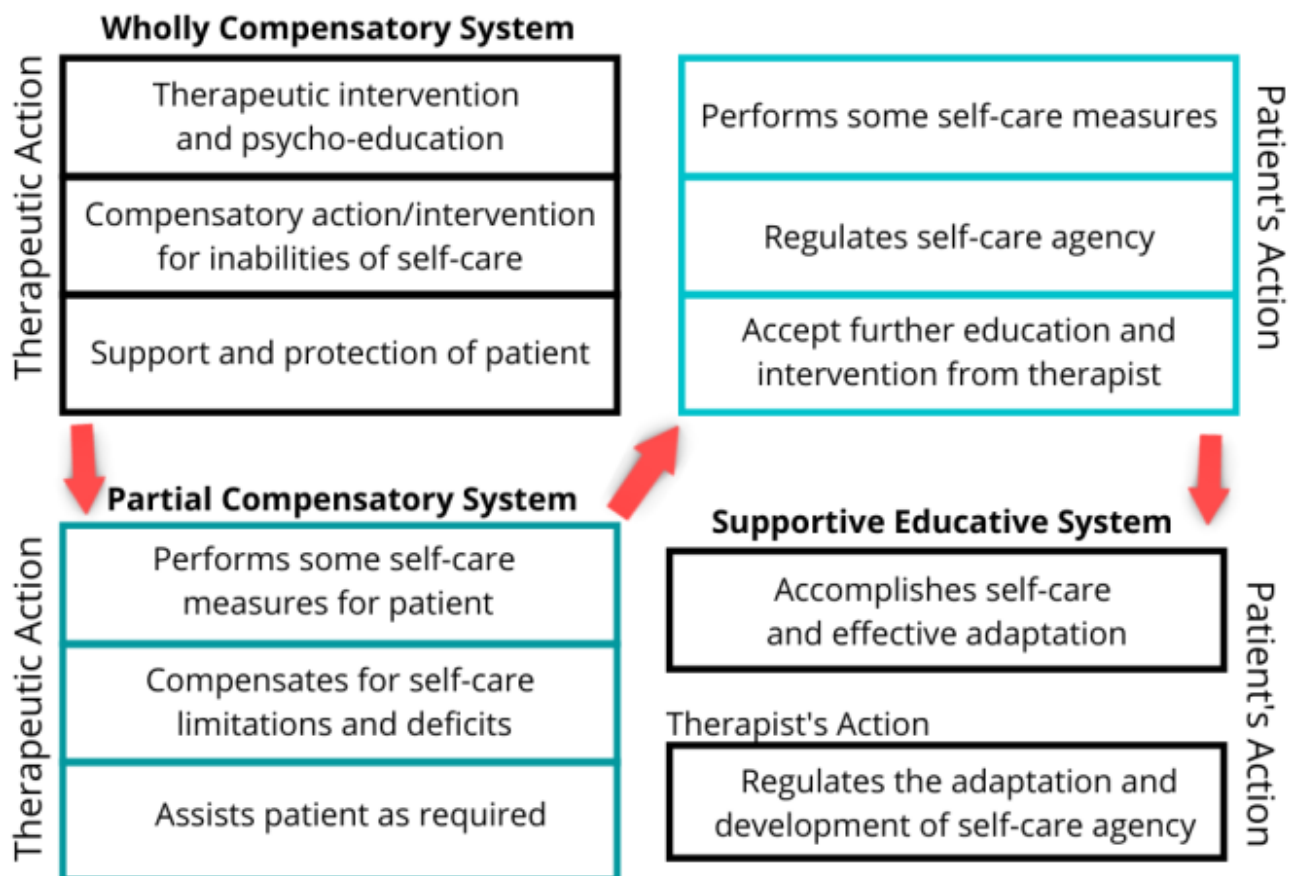
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Self-care requisites are groups of needs or requirements that Orem identified. They are classified as either:

- Universal self-care requisites (*objective*)
- Health deviation requisites (*subjective and changeable*)
- Developmental self-care requisites (*subjective*)

The developmental self-care requisites are further divided into:

1. maturational: progression toward superior levels of maturation.
2. situational: prevention of deleterious effects related to development.



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