

The Story Theory is a Key Element of Many Holistic Nursing Procedures

Andrzej Brodziak^{1,2*}, Agnieszka Wolinska² and Alicja Rozyk-Myrta²

1. Institute of Occupational Medicine and Environmental Health, Sosnowiec, Poland

2 Institute of Nursing, University of Applied Sciences, Nysa, Poland

*Corresponding author: Andrzej Brodziak, Institute of Occupational Medicine and Environmental Health, Sosnowiec, Poland, E-mail: andrzejbrodziak@wp.pl

ABSTRACT:

He meaning of the "Story theory" is universal. Patricia Lier writes that: "He Story theory is composed of three interrelated concepts: intentional dialogue, connecting with self-in-relation, and creating ease. According to the theory, the story is a narrative happening of connecting with self-in-relation through intentional dialogue to create ease. Ease emerges in the midst of accepting the whole story as one's own in a process of attentive embracing".

He LISTEN procedure consists, in practice, on performing a 5-session intervention that is delivered in a small group setting (3-5 people). Each of these sessions is similar to dialogues conducted in the course of cognitive behavioral therapy and aims to heal psychological misperceptions. The content of these sessions is focused on particular important elements of the problem which should be overcome. Herefore the first session is focused on perceived belonging as the notion important for the perception of loneliness. The second session focuses on relationships because it is important for the patients to identify more meaningful and less meaningful relationships. It guides participants towards enhanced awareness about past and current relationships. This session facilitates a thoughtful reflection of self in relation to others and the community. The third session explores the patterns of getting out or staying in. Loneliness may be partly due to a physical handicap which hinders interpersonal relationships. During this session, the participant discusses how other lonely people get out of the house or cope with loneliness while stay in. Session four helps to identify the realities of coping with loneliness based on one's own experience and the experience of others. Participants are encouraged to identify the positive, negative and turning points in their experience of loneliness. The fifth session is about life lessons on loneliness, the experiences of loneliness and what might work to decrease loneliness. It encourages the

participants to formulate the possible means to solve the problem. The degree of perception of loneliness and its changes can be assessed using the known UCLA Loneliness scale. The authors draw most of their attention to the effective procedure performed by nursing staff aimed to counteract the adverse consequences of loneliness, the essence of which is due to the so-called "Story Theory". They recall that this "Story Theory" is one of the so-called "Middle Range Theories for Nursing", proposed by Mary Jane Smith and Patrycja Lier, which is a useful tool in formulating various psychotherapeutic interventions. The authors cite two of their own previous works, related to so-called "life review therapy," in which they also proposed practical therapeutic procedures in line with the essence of the "Story Theory". The cited papers describe the rules of conversation, enabling patients to obtain a "balanced, memorized assessment of one's own life". The authors remark that the present proposal of the Story Theory coincides with the current and increasingly more explicit awareness in the field of sociology and political science of the importance of the so-called narrative, or just constructing new stories, supporting the promotion of new, social ideas.

Keywords: Story theory; Loneliness; Holistic nursing; Befriending; Cognitive behavioral therapy; Life review psychotherapy