



The Roy Adaptation Model

History

The Roy Adaptation Model for Nursing had its beginning when Sr. Callista Roy entered the masters program in pediatric nursing at University of California Los Angeles in 1964. Her advisor and seminar faculty was Dorothy E. Johnson who was writing and speaking on the need to define the goal of nursing as a way of focusing the development of knowledge for practice. Dr. Roy had read a little about the concept of adaptation and was impressed with the resiliency of children she had cared for in pediatrics. At the first seminar in pediatric nursing, she proposed that the goal of nursing was promoting patient adaptation. Throughout her course work in the master's program Dorothy Johnson encouraged her to develop her concept of adaptation as a framework for nursing. The use of systems theory as defined by von Bertalanffy was an important early concept of the model, as was the work of Helson. Helson defined adaptation as a process of responding positively to environmental changes and described three types of stimuli, focal, contextual and residual. Dr. Roy made appropriate derivations of these concepts for use in describing situations of people in health and illness. Other authors that influenced the early development of the central concepts of the model included Dohrenwend, Lazarus, Mechanic, and Selye. The view of the person as an adaptive system took shape from this early work with the cognator and regulator being added as the major internal processes of the adapting person.

The second phase of the development of the model was the 17 years of work with faculty at Mount St. Mary's College in Los Angeles. The model became the framework for a nursing-based integrated curriculum in March 1970, the same month that the first article on

the model was published in *Nursing Outlook*. The four adaptive modes were added as the ways in which adaptation is manifested and thus as the basis for nursing assessment. Specifically a content analysis was done on 500 samples of patient behavior from all clinical areas, collected by the nursing students and major categories named as physiologic, self concept, role function and interdependence. Contributors to the theoretical development of the adaptive modes included: Marie Driever for self concept; Brooke Randell for role function, and Joyce Van Landingham and Mary Tedrow for interdependence. Marsha Sato helped identify both common and primary stimuli affecting the adaptive modes and Joan Cho developed clinical tools for assessment. Many other faculty from Mount St. Mary's College were involved in writing the first three textbooks on the model in 1976, 1984 and 1991.

Through curriculum consultation throughout the USA and eventually worldwide, Dr. Roy received input on the use of the model in education and practice. By 1987 at least 100,000 nurses had been educated in programs using the Roy Adaptation Model. As the discipline of nursing grew in articulating its scientific and philosophical assumptions, Dr. Roy also articulated her assumptions. Early descriptions included systems theory and adaptation-level theory, as well as humanist values. Later Dr. Roy developed the philosophical assumption of veritativity as a way of addressing the limitations she saw in the relativistic philosophical basis of other conceptual approaches to nursing and a limited view of secular humanism and published a major paper on her philosophical assumptions in 1988.

By the late 1990s Dr. Roy felt on urgency to re-define adaptation for the 21st Century. She drew upon expanded insights in relating spirituality and science to present a new definition of adaptation and related scientific and philosophical assumptions. Her philosophical stance articulates that nurses see persons as co-extensive with their physical and social environments. Further, nurse scholars take a value-based stance and rooted in beliefs and hopes about the human person, they develop a discipline that participates in

enhancing the well-being of persons and of the earth. Dr. Roy has used the term cosmic unity to describe that persons and the earth have common patterns and mutuality of relations and meaning and that persons through thinking and feeling capacities, rooted in consciousness and meaning, are accountable for deriving, sustaining, and transforming the universe. These ideas were explained in a 1997 publication and included in the 1999 revision of the theorist's textbook on the model.

Other major developments of the model in the 1999 textbook, written with Dr. Heather Andrews, include: 1) expanding the adaptive modes to include relational persons as well as individual persons and 2) describing adaptation on three levels of integrated life processes, compensatory processes, and compromised processes. Dr. Roy has also outlined a structure for nursing knowledge development based on the Roy Adaptation Model and provided examples of research within this structure. Dr. Roy remains committed to developing knowledge for nursing practice and continually updating the Roy Model as a basis for this knowledge development.