

Toward an understanding of stability in nursing phenomena

Beverly A. Hall, RN, PhD
Associate Professor and Chair
Mental Health and Community Nursing
University of California
San Francisco, California

IN A RECENT article I advanced the argument that nursing's focus on change as a value underlying its theoretical development has caused neglect of an aspect of the human condition that is associated with sameness and stability.¹ I have created a new concept called *persistence* by synthesizing the opposites, change and stability, so that some of the properties and the underlying assumptions of the synthesized idea can be examined. Stability is the basis of health. When it is necessary to change, this change is in the form of discovering or creating new behaviors that will become a part of the individual's future pattern.

PROBLEM OF VIEWING LIFE AS CHANGE

Several years ago, I became aware that all of the familiar theories of family analysis were addressed totally to changing the family; no one discussed the stable family, and nursing theories did not deal with

16 stable phenomena. The popular forms of change in nursing are principally those of development, adaptation, self-actualization, stress, crisis, and growth. The one exception was Johnson's model,² which stresses balance and order. Even adaptation, which appears somewhat static in comparison with the other forms, focuses solely on individual changes resulting from constant environmental change.³

Social systems and individuals are described as being in a constant state of change. In one conceptual framework for a graduate program in nursing administration, the exclusive focus was on growth and self-actualization of the system. According to the conceptual framework, students were only being trained to deal with a system when it needed to grow, not when it would benefit by stability. The common perception among my colleagues is, "Nursing must promote growth because when you stop growing, you die."

Thus, nursing is bound up in change, especially in the changes associated with growth and development, whether the unit of analysis is the individual or the system. A great deal of effort is put into turning ideas around so that they can be forced into a growth model. When I asked my colleagues, "How do you deal with stability?" they each replied, "I see it as a different form of change." This response can possibly be attributed to a lack of theoretical understanding of stable phenomena because to look at stability as a different form of change makes as much sense, heuristically, as looking at sunshine as a different form of darkness.

Stability has always been associated with inertia, tradition, and stagnation. These concepts have negative connotations in

our society because of the belief that growth is good and healthy. People keep growing and developing because not to do so is to die or stagnate. Understanding people's movements is equated with understanding them in their entirety. People in a steady state have been regarded as an unknown and unlikely fact in reality because it has been presumed that continuous motion is the normal state of life.

PROBLEMS IN SEEING STABILITY

It seems illogical to develop nursing theory based on nothing but changes; however, this is what has happened. Theories that deal only with human growth, development, and adaptation present a skewed picture. How do we know whether or not stability is an empirical fact? This is not a question that can be answered easily because we have not been taught to "see" stability. Empirically, we see what we have been taught is there, and our teachings tell us that change is ubiquitous. We see phenomena as though they are in constant change. Part of the dilemma is what we see, and the other part is how we interpret what we see. For example, it can be argued that change is constant because people are seen being born, growing, and dying. I argue that they are not growing at all; they

How do we know whether stability is an empirical fact? This is not a question that can be answered easily because we have not been taught to "see" stability.

are just becoming more like themselves until they reach the end of life.

It is not going to be proved by citing empirical evidence, how much change versus stability is a part of the natural state of affairs. The necessary approach is first by reasoned argument and second by testing the utility of our ideas. As Rousseau said, "Let us begin, then, by laying the facts aside, as they do not affect the question."

Laying the facts aside is not simple, for the metaphor of life as growth and change has had a powerful effect on our perceptions. It is important, though, not to reject ideas that are new just because they do not fit the empirical facts as we have always seen them.

ARGUMENTS AGAINST STABILITY

A theory of stability involves the assumption that stability is as natural and normal as change. Stability is the preferred state whether the unit of analysis is the social system, human behavior, or body processes.

There are two arguments against this assumption when it is applied to society.

1. Change leads to perfection. How can we achieve perfection if we do not change?
2. Society needs social change; without it, how can social parity be achieved between the classes and the sexes and for minority groups?

The first question should be left to philosophy and religion, where it properly belongs. It is motivated by preoccupation with an ideal end state as the natural process of life; it is an idea that waxes and wanes. It was very popular in the 19th

century, but Nast⁴ points out that it has declined considerably and is now going out of vogue.

The second question is motivated by a real concern on the part of humanistic people with the issue of distributive justice. It must be resolved before nursing can consider adopting a stability paradigm.

It is logical to assume that parity in human relationships can be achieved better by working to develop a stable society than by working for change. Our love of the change metaphor, with its attendant messages to the individual in society that dictate striving, competition, and growth has produced social unrest and a focus on individual recognition at the expense of the group. It is futile to fight the problems created by change by producing more change. It seems more logical to decrease discord in human relationships by ending the continual struggle against solidarity. Instead of helping people adapt to a noxious, ever-changing environment and assisting them in dealing with the unhealthy affects of people's responses to the change metaphor, it would be better for nursing to work to buffer people from change and to devise ways to decrease environmental change.

Thus, social problems such as poverty, class struggles, and equality can be seen as products of a system that puts too much emphasis on progress and growth as a way of solving problems. In a change-oriented society, one person has the right to move ahead at the expense of others in the name of progress. Getting one's fair share is more important than considering the needs of other people, and growing and striving are superior to harmonious relationships. All this would not seem to have anything

- 18 to do with nursing—a profession that purports to promote health and well-being in human beings. However, there is a relationship; change in society is basically unhealthy because it tends to encourage individual exploitation of the group.

TOWARD A CONCEPT OF STABILITY

Stability is as much a natural form of life as change, and nursing needs a new concept to guide its search for a balanced view of human beings. An understanding of stability can lead to a better understanding of health and of the role of change in human existence. Nesbit has said: "If we are going to understand change, we must understand how fixed people are."^{5(p274)}

The development of a new concept by synthesis of opposites is not a new idea. Simmel⁶ used this approach to produce new social forms. A form is an image or representation of reality that cuts across substantive fields. Simmel developed a social form that he called "the stranger" from the synthesis of the opposite concepts of nearness and distance. Thus, for Simmel, the quality of "strangeness," which is somewhat a part of every relationship, is a special blend of nearness and distance that produces objectivity. Like the stranger, the actor is not bound by commitments. The form of the stranger can be found in friendships, professional relationships, families, and organizations.

The advantage of synthesizing opposites is that it produces a new idea that more clearly represents the configuration of these concepts in reality than when each is considered separately. Such is the advantage of the conception of the change-

stability dilemma as having a special form. The synthesized concept is called persistence, because it is the idea of enduring in time that is produced from the correct blending of these two disparate qualities. The paradigm is

Thesis: Growth	} Synthesis: Persistence
Antithesis: Stability	

Inherent in this dialectic are some special characteristics that express its essence. The new idea is a true blend of change and stability, not like the kind of ever-moving steady state depicted by Alice in Wonderland, who had to eat from one side of the mushroom to grow big and the other side to get small so that she could stay the same size. This latter idea is the basic assumption underlying equilibrium—that there are balancing forces keeping the person the same. The equilibrium view of stability explains stable states by the conception of stability as a continual struggle against the forces of change.

There is no need to see motion using the concept of persistence. Instead of asking how people change or resist change in the face of opposition, we ask how they continue with their patterns. The most relevant question, then, concerns the qualities that promote continuing or enduring in the face of obstacles and by minimizing obstacles. How do I persist? I refuse to give up, I minimize up and down movements as much as possible, and I continue to be like myself, using my best qualities to be stable.

Francisco Varela, a Chilean neuroscientist, suggests that an "overview paradigm" may be arising in all disciplines that can handle the contradictions, "How is it that living things are always changing, yet

remain basically unchanged?" (*The Terrytown Letter*, November, 1981). He notes that a blue jay is a blue jay from birth to death, maintaining its unity and wholeness no matter what it eats or drinks, no matter how many feathers it loses, no matter what kinds of birds it lives with.

Nast,⁴ in his critique of the basic notions underlying theories of evolution and progress, has said that we must be able to distinguish between the immutable and the changing, the permanent and the transient, and to recognize that no matter how much humans seem to change, we are the same creatures we have always been. The basic notion behind persistence is that change and stability are a natural part of life, each accomplishing essential goals.

In his essay on "Foresight," Whitehead⁷ approaches this same idea. He depicts stability as routine, and his view of foresight as a synthesis of routine and understanding is close to my view of persistence. He says: "Now it is the beginning of wisdom to understand that social life is founded upon routine. . . . Society requires stability and stability is the product of routine."^{7(p114)}

Whitehead goes on to elaborate the differences between the outcomes of routine and its opposite, which he calls *understanding*. Routine, he says, is the "bedrock of practical efficiency," whereas understanding is required to keep society viable. Thus, it appears that people endure when they have adequate routine and understanding. Whitehead calls this condition "foresight." Having the capacity for more than routine is what marks the difference between human societies and a hill of ants, but both share a common need for routine and neither could exist if routine were

absent. Although the thrust of science has been on studying the change element of foresight, society is based on routines or patterns.

According to both Nesbit and Whitehead, leaders of change need to deal with stability as a major facet of humans and human societies. Stability is the certain, secure, and healthy condition of individuals and groups. Change is needed occasionally to avoid the disaster of extinction. This is a far cry from the view currently in vogue that promotes constant and mindless change.

Another basic assumption in the persistence framework is that people have the power to shape their own lives. Humans are not passive or adaptive recipients of ubiquitous environmental change. In the adaptation framework, the impetus for behavior is in the environment, whereas in persistence the influence can occur in either direction. In the adaptation framework, the person adapts to keep up and to comply with the message from the outer system that says "change or else." Not to adapt is to threaten survival, growth, and mastery. Persistence requires that people be buffered from change and that they seek forces in the environment that are conducive to stability.

A nursing theory of persistence deals with stability as the major force behind development of health and security for the patient. It is assumed that there are patterned regularities in human behavior that are maintained through socialization and commitment. Commitment keeps individuals stable by the acquisition of a support system that maintains a stable set of values.^{8,9} Far from being antagonistic to the individual, the environment is supportive.

A nursing theory of persistence deals with stability as the major force behind development of health and security for the patient.

Noxious elements are buffered through routine and enduring social relationships. The peer, family, friend, and colleague relationships that are acquired throughout life reinforce stable values and routines. When routine cannot solve a dilemma, it is necessary to change. I have called this change *creativity* because it is a mechanism for inventing new routines that if they work, become a part of the person's pattern of persistence.

The dilemmas of persistence involve the problem of deciding the precise amount of change and stability that are needed for health or the continuation of persistence. The healthy person achieves boundary maintenance by balancing

- resisting versus giving in,
- buffering versus intrusion,
- commitment versus situational adjustment, and
- routine versus creativity.

• • •

It is argued that the focus of nursing on change to the exclusion of stability has resulted in a distorted picture of human beings. A way to approach the study of stability was devised by a synthesis of the concepts of stability and change to produce a new construct: persistence. Persistence is based on routine and creativity, with routine being the preferred state unless life or enduring is threatened. The basic assumptions of this model have been identified as follows.

- There are patterned regularities in social and human conduct that are maintained by routines, commitments, buffering, and resistance.
- Stability is the basis of health.
- People have the power to shape their environment as much as the opposite.
- Persistence occasionally requires change.
- The environment and the person remain in harmony by the process of establishing a set of stable relationships that act as buffers and create a oneness between the person and the environment.
- The two functional prerequisites of persistence are pattern maintenance and creativity.

REFERENCES

-
1. Hall BA: The change paradigm in nursing: Growth versus persistence. *Adv Nurs Sci* 3(4):1981;1-6.
 2. Johnson DL: A philosophy of nursing. *Nurs Outlook* 1959;7:198-200.
 3. Richel JP, Roy C: *Conceptual Models for Nursing Practice*. New York, Appleton-Century-Crofts, 1974.
 4. Nast SH: Progress and evaluation: A reappraisal from the traditional perspective. *Parabola—Myth and the Quest for Meaning*, 1981;6(2):44-51.
 5. Nesbit RA: *Social Change and History*. London, Oxford University Press, 1969.
 6. Wolff K: *The Sociology of Georg Simmel*. New York, The Free Press, 1950.
 7. Whitehead AN: *Adventures and Ideas*. New York, Macmillan Publishing Co Inc, 1961.
 8. Becker HS: Notes on the concept of commitment. *Am J Sociol* 66:1960;32-40.
 9. Becker HS, Strauss AL: Careers, personality, and adult socialization. *Am J Sociol* 62:1956;253-263.