Objective
To describe the use of Barrett’s Theory of Power as Knowing Participation in Change (PKPC) in supporting a client’s transition from power as control to power as freedom.

Background: Desire’s Story
Sexually abused as a child, Desire was addicted to crack-cocaine and infected with HIV at age 16. Desire enjoyed the power she experienced from sex work and did not use condoms although she told her partners about her status. Desire thought she was giving her partners an informed choice. Desire took ARVs intermittently for 15 years. She acquired a criminal record for prostitution and possession of drugs. To avoid incarceration, Desire agreed to enroll in a drug rehabilitation program for PLWH where she decided to change her life and improve her health. The ANP assisted Desire using Barrett’s Power Theory.

Health History
T-Cell count of 132
Viral load > 50,000
Resistant to NNRTI Class
PID, HPV, HSV, Obesity (BMI>40)

Barrett’s Power Theory
There are 2 types of Power:
• Power-as-control
• Power-as-freedom

Power as Knowing Participation In Change:
• Power is the capacity to knowingly participate in change manifested by awareness, choice, freedom to act intentionally, and involvement in creating change
• Power Enhancement is openness to possibilities using the energy of will to change through the principle of reversing.

Nursing Diagnosis:
Readiness for Enhanced Power

Rejected Nursing Diagnoses
• Ineffective self-health management
• Readiness for enhanced knowledge
• Imbalanced nutrition: greater than body requirement

Why did the NP reject these diagnoses?
Let's Talk

Nursing Interventions
1. Presence: A state of being that fosters a safe environment to explore change
2. Active Listening: An intentional act that signals acceptance without judgment
3. Mutual Goal Setting: 4 guide questions:
   • What are you aware of?
   • What choices are you making?
   • How are you following through on your choices?
   • What actions are you taking?

Outcomes: Desire’s story
1. Awareness: Condoms now viewed as self-care strategy; Realized she no longer needed sex work to feel powerful.
2. Choice: Decided to use education to achieve her goals; assisted nurse at health classes to learn about HIV self-care.
3. Acting intentionally: Obtained GED, College Prep, now in Community College,
4. Creating change: Adherent to regimen, undetectable, increased fruits and vegetables; decreased sugary drinks, and started walking.

Mutual Patterning: The NP's story
1. People have power! People do not need to be empowered, nor are they powerless
2. The Nursing Process supports a person’s use of power to achieve health goals that have personal meaning!

Let's Talk