

39

Psychosocial Care**TEACHING PLAN**

To use this lesson for self-study, the learner should read the material, do the activity and take the test. For group study, the leader may give each learner a copy of the learning guide and follow this teaching plan to conduct the lesson. Certificates may be copied for everyone who completes the lesson.

**LEARNING OBJECTIVES**

A participant in this lesson will be able to:

- Define psychosocial care and recognize opportunities to provide it.
- Practice good communication skills with patients.
- Assist patients in fulfilling psychosocial needs.

**LESSON ACTIVITY**

Ask your participants to make a list of all the important people in their lives, such as family members, friends and coworkers. Now ask them to look at the list and try to imagine what their lives would be like if they couldn't see some or all of those people anymore. Remind them that many of the patients we care for are lonely or have limited numbers of social interactions. Often, caregivers are the only people they interact with on a regular basis, so we are very important people in their lives.

Divide your participants into small groups of two or three. Assign each group one of the sections in the learning guide: self-esteem, adjustment to age or disability, coping mechanisms, communication, social relationships, intellectual stimulation and sexuality. Give each group more than one topic if necessary, or make your groups larger to accommodate the number of participants. Ask each group to read the material on their topic in the learning guide and prepare to explain it to the rest of the participants.

After allowing enough time for the group work, bring everyone together and ask each group to present their material. Allow time for discussion and questions.

Discuss things the participants can do to meet the psychosocial needs of their patients. Ask each of the participants to look for opportunities to do these things. Plan to review their progress at some future date. Reward those who excel at good communication or other psychosocial care.

PSYCHOSOCIAL CARE



THE LESSON

Review the material in the lesson with participants. Allow for discussion.



CONCLUSION

Have participants take the test. Review the answers together. Award certificates to those who answer at least seven (70%) of the test questions correctly.



TEST ANSWERS

1. False
2. True
3. d
4. True
5. False
6. b
7. False
8. True
9. False
10. True

PSYCHOSOCIAL CARE

Psychosocial care is care that enhances the mental, social, spiritual and emotional well-being of patients, families, and caregivers.

What does psychosocial care involve?

- Issues of self-esteem
- Adjustment to illness or disability
- Intellectual stimulation
- Social functioning and relationships
- Communication
- Sexuality

Issues of Self-Esteem

Anyone having contact with patients and their families provides psychosocial care. You can do your job in a way that helps your patients feel good about themselves, enhancing their self-esteem.

It is important to meet every patient's basic needs for acceptance, social opportunities, food, clothing, rest, activity, comfort and safety. The way routine care is carried out affects a patient's mood, self-esteem, dignity, self-respect and feelings of independence.

Encourage and praise patients whenever possible. And remember that all physical care is an opportunity to provide good psychosocial care.

Physical care includes helping with daily activities. Paying attention to patients' appearance, such as by shaving or fixing their hair, is a practical way to enhance self-esteem. Look for small ways to make a difference.

Patients who are confined to bed or dealing with illness often experience tremendous emotional upset brought on by inactivity and dependence. Help them express their feelings. High levels of emotional distress can make illness worse and slow recovery.

Everyone should be encouraged to do as much of his or her personal care as possible. This gives many patients a real sense of dignity and accomplishment. Of course, always follow the plan of care.

Stress Management and Relaxation Techniques

Help patients use the following techniques when they are feeling anxious or depressed. As simple as they are, they can be very calming and cheering.

Imaging

- Get comfortable.
- Imagine a favorite scene (beach, mountain, etc.).
- Feel the body relax; enjoy the warmth of the sun, the smells of the beach or the gentle breeze and cool crisp air in the mountains.
- Continue until the body feels totally relaxed.

Abdominal breathing

- Relax (either sitting or lying).
- Place right hand on chest and left hand on abdomen.
- Breathe in slowly through the nose.
- Hold breath and slowly count to five.
- Purse lips and exhale slowly.
- Relax.
- Repeat.

Change of scenery

Everyone needs a change of scenery from time to time. Patients that are able should be assisted to go on outings with friends and family. Those who cannot go out need visits from friends and family or from staff and volunteers if others don't come. Room decorations can be changed, plants or flowers added, pictures hung or new curtains put in place. Sometimes a simple rearrangement of the furniture, if safe and possible, can improve a person's emotional outlook.

Communication

Good communication between workers, patients and families is essential. Workers should be able to recognize the difference between a patient who just needs a listening ear and a patient who should be referred for formal counseling. Communication takes place on two levels — verbal and nonverbal. Verbal is what is said. Nonverbal is expressed through body movements, gestures, facial expressions, posture, tone of voice or touch.

PSYCHOSOCIAL CARE

Communication includes both speaking and listening. Ask yourself how a patient is thinking and feeling. Listen to both the verbal and the nonverbal messages. Pay attention to your verbal and nonverbal messages.

Listening means to both understand and accept what people say about their situation and feelings. Empathy means understanding what they say so well that you can identify with them. When you show you care, patients feel safe and will share concerns with you. This is therapeutic communication.

Active listening tells patients that you respect them. When you look into the eyes of a person who is speaking, you show that person by your facial expressions that you are following what's being said. This encourages the person to continue with his or her train of thought. A person can tell if you are distracted and not listening.

Ask questions to clarify what the patient is saying. This will encourage the patient to talk more. Avoid questions that require only a "yes" or "no" answer. Use open-ended questions like, "Can you tell me about the problems you are having?" Don't ask questions that might steer the conversation in another direction.

Don't brush off a patient's concerns by saying "Don't worry about it; it will be okay." This makes the patient's concerns seem trivial.

Try not to either agree or disagree with a patient's statements. You should not judge the things the patient says. You must leave room for the patient to change his or her mind. Don't give advice. If the patient asks for advice, reply, "What do you think you should do?"

While listening

- Don't plan your reply.
- Don't daydream or think about your next task.
- Don't change the subject.
- Don't laugh if the patient is serious.
- Don't interrupt.

Say back to the patient what you hear him or her say. Don't use the patient's exact words, but briefly rephrase or paraphrase his or her statements. This gives the patient a chance to restate what was meant or to clarify his or her thoughts. It is important to make comments that indicate you understand what has been said. If you don't comment for a few minutes, the patient may think you have lost interest, you don't understand, or you disapprove. Short silences are good, however, to give the patient time to think.

Sometimes a good listener may understand what the patient is feeling before the patient has recognized or expressed his or her own emotion. If you ask the patient whether he or she might be feeling a certain way,

the patient might recognize an underlying emotion. A listener might say, “I wonder if ...” or “Could it be that” Try not to appear to interpret the feelings or the situation too quickly.

Social Functioning and Relationships

Social contact is a basic human need. People who are isolated from others have a higher risk of depression, anxiety, low self-esteem, mental disorders and physical illnesses. Giving patients opportunities to maintain existing social relationships and develop new ones may be the most important thing we can do to meet psychosocial needs. It is our responsibility to provide social activities and to encourage patients to participate.

The following are some suggestions for encouraging social relationships:

- Find out if patients have a hobby or activity they enjoy or used to enjoy. If so, help them obtain whatever is needed to be involved in that hobby or interest. Assistive devices or special accommodations may be necessary. Work with an occupational therapist to find ways a patient can do this activity.
- Help patients get to know others who like the same activities.
- Provide ample time and opportunity for social visits with family and friends. Don't let your routines or schedules interfere with social interactions.
- Find ways for patients to communicate with others. Make sure they have easy access to a telephone that is equipped for their use. They may need a volume booster on the phone so they can hear, or they might want help dialing. If possible, program numbers into a phone so they can speed-dial friends and family. Another good form of communication is email. If the patient cannot type, he or she could use a voice recognition program that listens to spoken words and converts them into text without typing.
- If the patient builds, makes, cooks or otherwise creates something, be sure to praise the effort and admire the product. Provide the patient with books or videos that might be of interest on the subject. Encourage additional projects.
- Involving patients with younger people can make the patients feel valued, useful and important. Give patients an opportunity to share knowledge and skills with others with similar interests or with students and young people.
- People like to feel successful. Everyone enjoys being recognized by others. Make every effort to recognize and validate patients. Encourage families to display pictures, awards and diplomas. Be generous with praise and verbal rewards.

Intellectual Stimulation

People also enjoy solitary pursuits that engage their minds. Audio books, books with large print, videos, television programs, movies, music and the internet are all good sources of intellectual stimulation. Talk

to patients about setting new learning goals for themselves and working to achieve them. People who are always learning new things strengthen their mental abilities, which may slow or halt cognitive decline.

Sexuality

The fact that a patient is ill, disabled or elderly does not necessarily mean he or she no longer has a need for sexual expression. Adults have the right to determine their sexual activities within the limits of polite behavior. Adults of any age or physical condition that choose to be in a consensual sexual relationship must be given appropriate privacy, protection and support to fulfill this need.

Meeting Psychosocial Needs of Patients and Families

Education

Group education and discussion, social interaction, activity programs, support groups and training classes for both family members and patients can improve patient/family relationships and attitudes. These programs enhance quality of life for both patients and families. Accurate information about the aging process, illnesses, disabilities and the specific problems of the patient can help caregivers understand their own reactions and feelings. They can be taught how to take better care of themselves and their loved ones.

Activities

Regular physical activity and social interactions must be encouraged. Programs should promote well-being and enjoyment and must be tailored to the abilities of the participants.

Use of pets

Having animals around for companionship has proven to improve people's quality of life. Encourage patients to have pets only if someone is capable of caring for the animal.

Social worker

Social workers help patients deal with illness, loss and end-of-life issues. They may work with patients and/or families to help them cope with the psychosocial effects of these events.

Education of health care workers

Health care workers must be educated in order to provide the necessary care and services to attain or maintain the highest possible physical, mental, and psychosocial well-being of patients. Everyone should be aware of cultural diversity and be committed to anti-discriminatory practices.

PSYCHOSOCIAL CARE

TEST**Psychosocial Care**

Name _____ Date _____ Score _____

Directions: Circle the correct answer. Seven correct answers are required.

1. **Assisting someone with personal care or giving physical care is not the time to worry about giving psychosocial care.**
True or False
2. **High levels of emotional distress can make illness worse and slow recovery.**
True or False
3. **Many times, dysfunctional behavior increases at the end of the day.**
 - a. Decrease in daily functioning.
 - b. Increased risk of accidents.
 - c. Behavior problems.
 - d. All of the above.
4. **Some medications can induce anxiety or depression.**
True or False
5. **An unconscious patient cannot hear, so you may talk about him or her freely with others in the room.**
True or False
6. **Which of these statements gives a good example of active listening?**
 - a. The worker stands in the doorway with one foot out the door while the patient talks.
 - b. The worker sits down and looks at the patient while he or she talks.
 - c. The worker tells the patient not to worry about it and that everything will be okay.
 - d. The worker listens and then says, "Now here's what you should do ..."
7. **Animals should not be kept around elderly, sick, or disabled people.**
True or False

TEST

Psychosocial Care (cont.)

8. **Persons with a strong personal faith and many social contacts are better able to cope with health problems and more motivated to recover.**

True or False

9. **Elderly, disabled or sick people should not be allowed to have sexual relationships.**

True or False

10. **Social contact is a basic human need.**

True or False

