Psychosocial care

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 participant a copy of the learning guide and follow this teaching plan to conduct the session. Certificates may be copied for everyone who completes the lesson.

Objectives

Persons completing this lesson will be able to

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

The lesson

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 clients 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 clients. Ask each of the participants to look for opportunities to do these things. Plan to review their progress at some future date, and reward those who excel at good communication or other psychosocial care. Review the Medication of the Month.

Conclusion:

Have participants take the test. Review the answers together. Give certificates to participants who score eight or more correct answers.

Test Answers: 1F 2T 3d 4T 5F 6b 7F 8T 9F 10T 11T

Psychosocial care Learning guide

Psychosocial care is care that enhances the mental, social, spiritual, and emotional well-being of clients, 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 clients and their families provides psychosocial care. You can do your job in a way that helps your clients feel good about themselves, enhancing their self-esteem.

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

Encourage and praise clients whenever possible.

All physical care is an opportunity to provide good psychosocial care.

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

Clients who are confined to bed or dealing with illness often experience tremendous emotional upset brought on by inactivity and dependence. Help the person express his or her 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 clients a real sense of dignity and accomplishment. Of course, always follow the plan of care.

ADJUSTMENT TO ILLNESS, DISABILITY, AND/OR AGE AND ITS CONSEQUENCES

Whether it happens suddenly or gradually, losing one's independence and finding it necessary to rely on others is a big adjustment that can create great emotional distress. Clients may feel the loss of friends and family as they become more dependent or isolated from their social network. In addition, family members often feel the stress of caregiving. Both clients and families may experience anxiety and/or depression.

Anxiety and depression

When a client exhibits signs of anxiety or depression or says he or she feels anxious or depressed, pay attention. Anxiety and depression can be caused by some medicines, by withdrawal from medicines, or by a mental illness. Medications may be used to treat both conditions.

Cognitive loss or dementia can cause anxiety or depression, or can be made worse by either condition. Anxiety and depression that go untreated may lead to physical problems or an increased risk of accidental injuries. Treatment can improve the person's quality of life.

Anxiety or depression may cause a decrease in daily functioning, behavior problems, or lapses in judgment.

The dying client

Supporting a client and family through death is important. Sometimes a dying person feels lonely and depressed. He or she may feel abandoned or hopeless and become resentful or withdrawn.

Many people are uncomfortable with the thought of death and prefer to withdraw and leave a dying person alone. Usually the sick and the dying need company. Sometimes there is nothing to do but hold the person's hand. If the dying person wants to talk about dying, listen and respond appropriately and honestly. If you do not know how to respond, simply assure them that you care and encourage them to talk about their feelings while you listen.

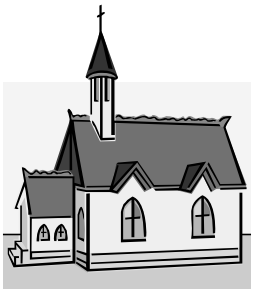
When you see that a client is in pain or is uncomfortable, tell your supervisor. If appropriate, bring fresh pillows or sheets, remove wrinkles from the bed, or help the client change position. Restlessness, tension, and discomfort may be relieved by a change in position. See if the client is thirsty or hungry, and ask if the temperature in the room is all right. Encourage the person to tell you what is causing his or her distress. Excitement, anxiety, and depression can contribute to pain—not all pain is physical.

When in a client's presence, always speak directly to him, not about him or around him. Because hearing is thought to be the last of the senses to fade, an unconscious person may hear and be hurt by careless conversations.

Coping mechanisms

Faith

There is a difference in religion and spirituality. Religion may be based on traditional activities at a place of worship. Spirituality involves personal thoughts, feelings, characteristics, and experiences of a supreme being. People may think of themselves as spiritual even when they are not involved with a place or worship.



A hopeful, positive attitude about life and illness improves physical and mental health outcomes. People who use religious coping skills (praying, reading a sacred book, etc.) are less likely to develop depression and anxiety. Persons with a strong personal faith and many social contacts are better able to cope with health problems and remain more motivated to recover and to stay well. Caregivers who maintain social contacts and faith are better able to cope with the stresses of caregiving.

Workers can enhance the coping skills of both the client and the family. Interventions include praying with clients, reading sacred books to them, and seeing that they have the religious materials they need, such as audiotapes and large-print books. Spiritual health should be included as part of the physical, mental, emotional, and social needs addressed in psychosocial care.

Stress management and relaxation techniques

Help clients use these 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 and 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. Clients 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, clients, and families is essential. Workers should be able to recognize the difference between a client who just needs a listening ear and a client 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.

Communication includes both speaking and listening. Ask yourself how the client 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 a person says about his or her situation and feelings. Empathy means understanding what he or she says so well that you can identify with him. When you show you care, clients feel safe and will share concerns with you. This is therapeutic communication.

Active listening tells the client that you respect him. When you look into the eyes of the person speaking, you show him or her by your facial expressions that you are following what he is saying. This encourages him or her to continue with the train of thought. A person can tell if you are distracted and not listening.

Ask questions to clarify what the client is saying. This will encourage him or her 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 the client's concerns by saying "Don't worry about it; it will be okay." This makes the client's concerns seem trivial.

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

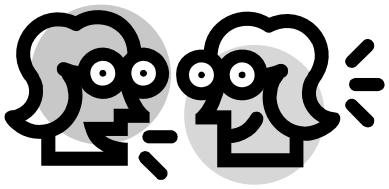
While listening:

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

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

Sometimes a good listener may understand what the client is feeling before the client has recognized or expressed his or her own emotion. If you ask the client if he or she might be feeling a certain way, he or she might recognize an underlying emotion. A listener might say, "I wonder if . . ." or "Could it be that . . ."

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 clients 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 clients to participate.

Here are some suggestions for encouraging social relationships:

- Find out if the client has a hobby or activity he or she enjoys or used to enjoy. If so, help the client obtain whatever is needed to be involved in that hobby or interest. Assistive devices or special accommodations may be necessary, so work with an occupational therapist to find ways the client can do this activity.
- Help clients get to know others who like the same activities.
- Provide ample time and opportunity for social visits with family and friends. Do not let your routines or schedules interfere with social interactions.
- Find ways for clients to communicate with others. Make sure that 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 electronic mail (e-mail). Clients will need a computer, a phone line, and an Internet service provider (ISP) to use e-mail. If the client cannot type, he or she could use a voice recognition program that listens to spoken words and produces e-mail or letters without typing.
- If the client builds, makes, cooks, or otherwise creates something, be sure to praise the effort and admire the product. Provide the client with books or videos that might be of interest on the subject. Encourage additional projects.
- Involving clients with younger people can make the clients feel valued, useful, and important. Give clients 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 clients. 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 on tape, books with large print, videotapes, television programs, movies, music, and the Internet are all good sources of intellectual stimulation. Talk to clients about setting new learning goals for themselves and working to achieve them. People who are always learning new things strengthen their mental abilities and may slow or halt cognitive decline.

SEXUALITY

The fact that a client is ill, disabled, or elderly does not necessarily mean that 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.

Methods of meeting psychosocial needs of clients and families

Education

Group education and discussion, social interaction, activity programs, support groups, and training classes for both family members and clients can improve client/family relationships and attitudes. These programs enhance quality of life for both clients and families.

Accurate information about the aging process, illnesses, disabilities, and the specific problems of the client 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 clients to have pets only if someone is capable of caring for the animal.

Social worker

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

Education of healthcare workers

Healthcare 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 clients. Everyone should be aware of cultural diversity and be committed to anti-discriminatory practices.