

Linda M. Gorman  
Donna F. Sultan

Arnel Banaga Salgado, PsyD, EdD, RN  
Assistant Professor  
RAK College of Nursing

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## Psychosocial Skills

# PSYCHOSOCIAL NURSING

FOR GENERAL PATIENT CARE

3rd EDITION



# Learning Objectives

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*After the classroom discussion, the students will be able to:*

- 1. Describe the key components of a psychosocial assessment.**
- 2. Describe how and when to use a mental status examination.**
- 3. List the forms of therapeutic communication.**
- 4. Describe the impact of the psychosocial skills of role modeling, role playing, and acceptance.**



# Introduction

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*Providing psychosocial care requires a combination of astute psychosocial assessment skills, experience in performing mental status examinations, and using therapeutic communication*



# Psychosocial Nursing Assessment

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1. The presence of psychosocial problems in a patient has an influence on the diagnosis arrived at and on the course of treatment chosen.
2. With a thorough assessment, the nurse can determine the patient's needs, problems, and potential problems, and identify patients who are at a higher risk for developing more serious problems.
3. Information to be gathered in a psychosocial assessment includes the patient's sociocultural background, emotional and biologic aspects of current problems, history, spiritual and philosophical beliefs, and family issues.



# Key Issues in Response to Illness

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## 1. Lifestyle information

*Determine whom the patient lives with as well as the patient's significant relationships, available support people, marital status, occupation, religion, and other important components of the patient's lifestyle.*



# Key Issues in Response to Illness

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## 2. Normal coping patterns

*Identify which coping mechanisms the patient uses when under stress and which he or she used during past illnesses or hospitalizations. Questions that can be asked include the following: **What happened the last time the patient was under severe stress? How is the patient currently coping? What helps in stressful situations?***



# Key Issues in Response to Illness

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## 3. Understanding of current illness

*Ask the patient about his or her understanding of the diagnosis or reason for seeking medical attention. Determine how the patient views the illness affecting his or her life.*



# Key Issues in Response to Illness

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## 4. Personality style

*After interacting with the patient, identify any important personality traits that may affect his or her care or compliance, such as a tendency to be dependent, hostile, dramatic, or critical.*





# Key Issues in Response to Illness

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## 5. History of psychiatric disorder

*If the patient is currently taking medications for psychiatric problems, be sure to ask why he or she is taking them. Consider asking if the patient has experienced any psychiatric symptoms, such as depression.*



# Key Issues in Response to Illness

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## 6. Recent life changes or stressors

*Determine if there have been any major changes or traumatic events recently (especially in the last year). Keep in mind that these changes may be both positive and negative, such as moving to a new house or area, a death in the family, a job or role change, or recent birth of a child.*



# Key Issues in Response to Illness

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## 7. Spirituality

*Determine the role of spirituality and religion. Use of the HOPE assessment includes questions as follows:*

*H—sources of hope, strength, comfort;*

*O—Role of organized religion for patient's*

*P—personal spirituality practices; and*

*E—effects on medical care and end of life decision.*



# Key Issues in Response to Illness

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## 8. Major issues raised by current illness

*Determine how this illness has affected the patient's lifestyle or sense of self, including areas such as self-esteem, body image, loss of intimacy, role changes, and change in family dynamics.*



# Key Issues in Response to Illness

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## 9. Mental status examination

*Perform the mental status examination to help identify dysfunction in emotional, cognitive, or behavioral spheres.*



# Psychosocial Nursing Assessment

## Creating an Appropriate Interview Environment

- Create a quiet, private space.
- Minimize interruptions if possible.
- Maintain appropriate eye contact.
- Sit at eye level with the patient.
- Ask open-ended questions to encourage the patient to talk.
- Avoid writing a lot of notes during the interview.
- Demonstrate an interest in the patient's concerns.
- Ask the patient's permission to be interviewed.
- Indicate acceptance of the patient by avoiding criticism, frowning, or demonstrating shock.
- Avoid asking more personal questions than are actually needed.
- Determine whether the family can provide information if the patient is unable to communicate.
- Maintain confidentiality.
- Be aware of your own biases and discomforts that could influence the assessment.
- Keep the focus on the patient.



# The Mental Status Examination

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1. The mental status examination is used to determine whether or not there are abnormalities in the patient's thinking and reasoning ability, feelings, or behavior.
2. The mental status examination includes observations and questions in the following categories: *appearance, behavior, and speech; thoughts; mood and affect; ability to perform abstract reasoning; memory; intelligence; concentration; orientation; judgment; and insight*



# Therapeutic Communication

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1. Therapeutic communication, the essence of the helping relationship, occurs when the nurse communicates with the patient in a manner that facilitates acquiring information about and understanding of the patient's concerns and problems
2. It is the art of reaching a person by means of verbal and nonverbal messages. *Acceptance, respect, honesty, trust, concern, protection, and support must all be present for communication to be therapeutic.*
3. Therapeutic communication allows the patient to share feelings, feel accepted, and look at problems from a new perspective.





# Other Psychosocial Skills

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In addition to therapeutic communication, nurses use a variety of other skills to help patients find new ways of coping with illness and the problems it causes. Many of these skills are used without the nurse's even being aware of using them.

## 1. Acceptance

*Demonstrating an interest in a patient's behavior and feelings communicates to the patient that he or she is valued. You can demonstrate acceptance of the patient by listening to him or her even if you disagree with the ideas being communicated. It is important not to criticize or judge the patient. Acceptance reinforces self-esteem.*



# Other Psychosocial Skills

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## 2. Reassurance

*Providing support by giving your attention to matters that are important to the patient reinforces emotional security and helps reduce the patient's anxiety. With less anxiety to deal with, the patient can spend more time on effective problem solving and healing.*



# Key Issues in Response to Illness

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## 3. Enhancing self-esteem

*Increased self-esteem gives the patient a sense of control and hope. This will help reduce anxiety and give the patient more time for problem solving and healing. Techniques to reinforce positive self-esteem include focusing on patient's positive traits and accomplishments, providing opportunities for the patient to demonstrate skills and abilities successfully, and providing emotional support and reassurance*



# Key Issues in Response to Illness

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## 4. Expression of feelings

*Providing an environment in which a patient can feel safe and comfortable to express emotions, including sorrow or anger, and to verbalize disagreement, fear, and disappointment is essential for both enhancing a therapeutic relationship and allowing the patient to solve problems.*



# Key Issues in Response to Illness

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## 5. Role modeling

*The nurse can exhibit more socially acceptable ways of performing a certain role or demonstrating a certain behavior. When the patient sees how effective these behaviors are, he or she can more easily understand how to use them and emulate the behaviors.*



# Key Issues in Response to Illness

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## 6. Role playing

*Role playing is acting out other methods of response to a situation. It can be done to increase one's own or another's understanding of the other's point of view or to practice appropriate responses, such as assertiveness. This is done with a supportive person playing the part of someone you want to communicate with in a new way.*



# Key Issues in Response to Illness

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## 7. Stress management

*Accepting stress as a fact of life and managing it using specific, tested techniques can reduce feelings of anxiety. The techniques are meant to promote a feeling of calm and a sense of control over the situation. Common stress management techniques include physical interventions such as **taking deep breaths, exercising, and avoiding caffeine** and psychological interventions such as **counting to 10, avoiding additional stressors, maintaining a positive attitude, and seeking out emotional support.***



# Key Issues in Response to Illness

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## 8. Assertiveness

*Assertiveness is the use of behavioral techniques that allow the individual to stand up for his or her rights without infringing on the rights of others.*





# Key Issues in Response to Illness

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## 9. Limit setting

*Limit setting is a form of behavior modification rather than a punishment and is used for times when acceptance of the patient's behavior is no longer appropriate.*



# Key Issues in Response to Illness

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## 9. De-escalation

*De-escalation techniques are also used to reduce anxiety and slow down the emotional response to it, such as aggressive behavior. Useful techniques include removing the patient from volatile situations and using appropriate medication and physical restraints.*

## 10. Confrontation

*At times it is necessary to make direct statements that challenge the patient's behavior or beliefs. Confrontation is a verbal message designed to help the other person recognize inconsistencies or inappropriate behavior.*



# Key Issues in Response to Illness

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## 11. Empathy

*Communicating an understanding of how the client feels indicates that the nurse shares the feelings. Empathy differs from sympathy in that empathy does not indicate sharing of personal feelings.*

## 12. Silence

*Sometimes saying nothing for a few moments can communicate more than words. This can convey support, acceptance, and concern and give the patient time to compose himself or herself.*



# Key Issues in Response to Illness

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## 13. Relaxation techniques

*The nurse can use a variety of techniques, including deep breathing, imagery, and muscle relaxation.*



# Assessing Use of Complementary and Alternative Therapies

1. Complementary approaches are defined as those used in addition to conventional treatment.
2. Alternative ones are used in place of conventional therapies.
3. Many of these are used to treat emotional problems such as anxiety and depression.



# Assessing Use of Complementary and Alternative Therapies

## Complementary and Alternative Approaches

*Acupressure*—Using massage on traditional acupuncture points.

*Acupuncture*—Using thin needles at designated points along meridians to balance the flow of energy. Used to treat uncomfortable symptoms and some conditions.

*Alternative nutrition*—Use of food to heal and maintain optimal health (e.g., macrobiotic diet).



# Assessing Use of Complementary and Alternative Therapies

*Aromatherapy*—Therapeutic use of odors from plant oils to treat illness and promote relaxation.

*Biofeedback*—Using electrical devices to record changes in body function to achieve relaxation and/or muscle control.

*Chelation therapy*—Investigational therapy using the man-made amino acid, EDTA, to treat some conditions like heart disease

*Chiropractic*—Form of healthcare that focuses on the relationship between body structure—primarily the spine—and function

*Energy medicine*—Use of energy fields such as magnetic fields or biofields (energy fields that some believe surround and penetrate the human body).

*Folk remedies*—Alternative health practices and therapies based on health beliefs and practices within cultural groups.

*Guided imagery*—Using the conscious mind to create images to evoke physiological changes and promote healing and relaxation.

*Healing touch*—Healing method based on concept of human energy fields.



# Assessing Use of Complementary and Alternative Therapies

*Herbal medicine*—Use of plants for healing purposes.

*Homeopathy*—Therapy based on concept of “like cures like.” Uses minute amounts of drug that normally would produce the same symptoms as the illness being treated.

*Hypnotherapy*—Creating a state of heightened awareness in which suggestions to improve health are made and are likely to be followed.

*Light therapy*—Use of alternative light (e.g., colored light, ultraviolet light) to treat various disorders.

*Magnet therapy*—Using electromagnetic frequencies emitting from the body to treat illness.

*Massage*—Manipulation of tissues and muscles to promote relaxation and healing.

*Megavitamin therapy*—Using higher doses of vitamins than usually recommended to prevent or cure illness.





# Assessing Use of Complementary and Alternative Therapies

*Meditation*—Ancient art of focusing one's attention on a single sound or image to promote relaxation and health.

*Naturopathy*—A system of healing that views disease as a manifestation of alternation in processes that interfere with the body's healing

*Reiki*—A form of energy medicine where practitioner through his/her hands transmits life force energy (Ki) for healing

*Yoga*—A philosophy and exercise system that combines movement and positions to promote health.

*Source:* National Center for Complementary and Alternative Medicine. Available at [nccam.nih.gov](http://nccam.nih.gov)



# Conclusion

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1. Health-care professionals need to incorporate assessment of complementary and alternative therapies in their care. or negative effects.
2. The increased use of these herbal products reflects the public's wish for more control, incorporation of cultural values, and hope in their care.
3. Nurses, as patient advocates, need to be sensitive to these approaches and incorporate them in the plan of care when possible.
4. Routine questions about use of herbs and supplements should be part of the routine nursing assessment.



# End of Chapter 3

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