



## PSYCHOSOCIAL CARE: HOW NURSING PERSONNEL CAN PROVIDE CARE TO ONCOLOGY CLIENTS.

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### ABSTRACT

Cases of cancer are increasing rapidly worldwide. Psychosocial care is a very important aspect in improving the quality of life that can decrease the overall load of cost to the health care system. This is clearly an important goal in healthcare management. Nursing professionals are the key members of the health care team. Oncology nurses interact with oncology patients across throughout the continuum of care through treatment and symptom management. They play a multifaceted role as a direct caregiver, educator, consultant, administrator, researcher and in administering complex chemotherapies. Nursing personnel involved in chemotherapy, biotherapy, radiation therapy, cancer genetic counselling, palliative care, in bone marrow transplant. Cancer patients deal with prolonged distress and a lot of suffering from the disease as well as from treatment. As the nursing staff, we are 24 hours available to the patient as well as with their caregiver. As an important member of the healthcare team, we can provide a good psychosocial care which can be beneficial in improving the quality of life of cancer patients. Nursing care can be provided to the patients for early cancer prevention to the detection of signs and symptoms.

**Key Words:** Cancer, Psychosocial care, Oncology Nurses.

**Objective:** This paper explores how nurses can provide care to oncology clients and their caregivers and benefits of providing effective psychosocial care in order to improve good quality of life of oncology clients.

**Introduction:** Worldwide problem of cancer is increasing rapidly. Psychosocial care is the very important aspect of improving the quality of life that can decrease the overall load of cost to the health care system. This is clearly an important aspect in management of healthcare.

### ***What is psychosocial care?***

Psychosocial support involves the ethnically responsive provision of psychological, social and spiritual care (Hodgkinson 2008)<sup>8</sup>. Nurses play an extraordinary role in opinionated patients; by constructing an exchange of ideas with patients nurses can begin to understand how patients view themselves as persons, what is significant to them, and how their association with others may affect their choices and how their ability of choice can help them (Ellis et al 2006)<sup>4</sup>.

Good communication and assessment skills are essential to building a trusting and a good relationship with patients and can help the nurse to develop a good interpersonal relationship with the patient and their family members.

The study, led by Dr Prabhat Jha, the Director of the Centre for Global Health Research found out that there is an urgent need of a good quality psychosocial care for the cancer patients in developed as well as in developing countries which can decrease the overall burden of cancer.

The word distress is chosen by NCCN to reduce the stigma attached to the terms (Emotional, Psychiatric, psychological). According to NCCN guidelines distress in cancer patients is defined as an unfriendly experience of social, psychological or spiritual problems which hampers in coping with the illness and its associated treatment.

Psychosocial distress refers to problems faced by cancer patients throughout their cancer journey for example continuous anxiety and depression on account of their illness. It is well known that psychosocial distress is common in cancer patients. Many studies revealed that high distress level is present and a low Quality of Life (QL) in cancer patients.

### ***How can we provide psychosocial care?***

Providing psychosocial care includes good communication skills. Communication in the setting of cancer care demands good interpersonal skills to express empathy and psychological support. A relationship of healthcare givers with patients is based on trust,

being open, honest, understanding, respect, setting common goals and providing social support (Ritchie 2001)<sup>13</sup>.

The quality of life comprises various issues in cancer care viz. Social, Physical, cognitive, spiritual, and emotional problems Religiousness also needs to be taken care more proactively in health care settings. Religiousness is an experience which is especially stimulated at the end of life.

A palliative care centre review conducted by Mishra et al (2010)<sup>12</sup> found 98% of patients interviewed with advanced cancer were spiritually grounded to their belief and believed that God would help them. Another benefit of patient's belief was it helped to decrease their anxiety.

A review conducted by Mazanec et al (2010)<sup>11</sup> found that religiousness was the strongest forecaster of social well-being and a significant forecaster of emotional and functional well-being in the quality of life of patients and families with cancer.

Screening for distress related to religious is an essential factor of psychosocial care provided by oncology nurses and may be implemented by assessment tool.

Nursing Personnel plays a multidimensional role as a direct caregiver, educator, consultant, administrator, researcher and in administering complex chemotherapies and supportive care drugs.

**As a Direct caregiver:** Nursing personnel are meant to be preventing mistreatment and negligence, and improving the caregiver's awareness, guiding caregivers with early identification of patient problems, developing psychomotor skills, administration of medications, use of equipment's, improving emotional and coping skills to deal with the caregiver's irritation and frustration.

Nurses involved in the chemotherapy are to make sure that the correct dose and drug are administered. Multifarious treatments of potentially detrimental drugs are being employed in a variety of settings.

**As an Educator:** Nursing personnel provide information and counselling to decrease caregiver distress, involve in case screening, detection, and prevention in the community.

Correctly written and pictorial instruction aids could be used by other professionals or in community programs, like cancer care groups. Such education includes vast experiences to assist patients with coping with their diagnosis, long-term adjustments, information about prevention, diagnosis and care, to develop attitudes to maintain or regain health status.

This education uses a combination of methods that meet the needs, capabilities, and learning way of the patient.

**As a consultant:** The oncology nurse plays an important role in managing the complex technologies which are now commonly employed in cancer diagnosis and treatment. This incorporates direct patient care, documentation of medical record, involvement in therapy, symptoms management, organising referrals to other health care providers, both patient and caregiver education, counselling throughout diagnosis, therapies, and follow-up.

Oncology nurse should be firstly communicated by patients. Patient and caregivers should always feel free to contact the oncology nurse during the treatment program. It is very important for patient coming from far. It develops trust between nurse and patient.

**As an administrator:** Assessing the effectiveness of the health-care delivery system along the continuum of care. Facilitating and observing improvement enterprises of the health-care delivery system.

**As a Researcher:** Researcher nurses play an active role in ensuring research studies run effectively and that participant are fully informed.

**As a Palliative care:** Nurses spend more time with patients they experience pain of patients, it is important that the nurse is knowledgeable about pain assessment, in order to provide pain management as well as patient and family education.

Nurses should provide patients and their caregiver's information about to pain management, provide information about physical interventions, prevent and reduce side effects of pharmacologic therapies, and help the patient with therapy and required follow up. The Nursing personnel should explain the basis for interventions and give time for patient and family questions.

Patient education should include the names of the pharmacologic agents, dosage schedules, side effects, interventions to decrease nausea and vomiting, such as antiemetic, and interventions to lower constipation.

**As a Counsellor:** Counselling is a process which is concerned with emotions and information. It is a help and helper process. It is an enabling process which is intended to help an individual in his life to grow and achieve maturity through learning, by taking

responsibility and making decisions by himself, a warm, trusting, safe relationship will be formulated in which client will learn to discuss openly about their problems, attains the essential social skills, courage, self-confidence to implement new problem solving techniques in order to attain new desired behaviours. It offers holistic support (moral, spiritual, emotional, psychological, and intellectual).

**Specific Management Therapies:** Psychosocial support is a process of assisting pliability within individuals, families and communities.

By regarding the independence, self-respect and coping mechanisms of persons and communities, psychosocial support endorses the refurbishment of Social organisation and infrastructure”.

**Cognitive Behavioural Therapy:** This therapy is for pain control is typically carried out in small group sessions of 4 to 8 clients that are organised weekly for 8 to 10 weeks.

The groups are led by a psychologist or psychologist-nurse educator.

**The aim of CBT:**

- Education to the client
- Creating a personal understanding of difficulties from a biological, social, psychosocial, perspectives
- Coping strategy enhancement
- Challenging beliefs
- Relapse prevention
- Cognitive behavioural therapy helps the patient gaining a sense of motivation, acceptance, and improved self-esteem.

Recreation Training exercises can be useful in assisting the patient in promoting muscle relaxation, improving blood flow to a painful part and to decrease anxiety.

**Individual Psychotherapy:** A method of bringing about changes in a person by discovering his/her feelings, attitudes, thinking patterns, and behaviour.

In this therapy, the therapist encourages the client to ventilate their ideas, feelings, painful /traumatic experiences. During the interaction, the therapist explores the situation and gives valuable suggestions whenever necessary. The therapeutic procedures and ways of handling the problems are modified according to the client needs. The frequency of sessions is decided upon client needs.

**Group Therapy:** It is a therapeutic procedure where the therapist carefully selects the homogenous group (8-10) who are having emotional problems and suffering with the same type of problem. The therapists fix the sessions required and formulate group activities which are guided by skilled persons.

The group members assist each other under the guidance of therapist to bring expected behavioural changes. It is carried out for clients once in a week for 45 minutes to one hour. The therapist is able to observe immediate feedback from the group of patients at the time; the therapist can observe psychological, emotional, and behavioural responses among group members.

Studies indicate the efficacy of therapeutic touch and touch-energy therapies in relieving physical and psychological symptoms in patients suffering with cancer. Pain management often is restricted to prescribing drugs and forsaking the psychosocial features of nursing care.

**Conclusion:** Cancer is traumatic for patients and they are persistently dealing with the distress and pain from disease and treatment. Nurses can provide effective high quality cancer care, they can manage cancer patients life effectively, provide information to their needs, contribute to positive psychological outcomes for the clients. Nurses can help the client as well as their caregivers to deal with anxiety due to cancer by educating them, adopting healthy coping mechanism. Oncology nurses can give reassurance, help out to share their views about life and focus on positive part good experiences.

Psychosocial care is part of a comprehensive care and it provides both informational and emotional support to patients as well as to family members to help them manage their cancer illness.

Nursing Professionals should utilise effective psychosocial approaches in providing care to patients so as to achieve highest optimum health.

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