

Therapeutic Relationship of Nurses in Mental Health-A Review

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ABSTRACT

The therapeutic nurse-client relationship is the base, of all psychiatric nursing treatment approaches despite the precise aim. The first thing is to build a good association between the between nurse and client. The relationship of nurse and client assured to be safe, confidential, reliable, and in step with applicable and clear boundaries. It's true that disorders that have tough organic chemistry and genetic components like schizophrenia and major emotional disorders can't be cured through therapeutic. However, several of the attendant emotional issues like poor self-image and low self-esteem is considerably improved through a therapeutic nurse-client alliance or relationship. Establishing a therapeutic alliance or relationship with a client takes time. Skills during this area bit by bit improve with steering from those with additional ability and skill.

INTRODUCTION

The nurse and client therapeutic relationship differs from social and intimate relationship in which the nurse can able to maximize his or her communication skills, personal strengths and understanding of human behaviours. The main focus of the relationship will be on the client's experiences, ideas and feelings. During the client's interview nurses should focus on the personal issues discussed by them. Both nurse and client should identify areas that need to be focused and evaluate the degree of change in the client periodically. Although the nurse may play a variety of roles as teacher, counselor and as socializing agent, the relationship should be focused on the problem and needs of client [1-5].

Some societies around the world are being engaged themselves in providing their services to the world. One of them is Association of Psychology and Psychiatry for Adults & Children. The Association of Psychology and Psychiatry for Adults & Children was founded in 1986 and it is one of the certified scientific associations in Greece. This is a member of the Medical Association of Athens (IEA) and it involves a wide range of communication among psychiatrists, social workers psychologists and special therapists across the country.

Another society named The Pondicherry Psychology Association is a private voluntary organization which was formed by the psychologists from Pondicherry as well as other places. The association was started on 1st January, 2000 with the motto of advancement of psychology, science and for human welfare promotion. The panel of association includes Psychologists, Clinicians, Researchers, Educationists, Psychology students, Faculty [6-10].

In countries like India also there are societies contributing themselves to the welfare of the psychiatric community. Indian School Psychology Association primary aim of the association is to develop and promote School Psychology, Human Values-based education and training to meet the needs of society and particularly to elevate the poor from poverty through school education [10-15].

There are some conferences related to the field of mental health nursing which creates impact among the people by their professional lectures and their presentations. One of them includes Psychiatric-13th International Conference on Mental Health Nursing conducted on October 03-04, 2016 at London, UK. This is an extraordinary event designed for researchers to facilitate the dissemination and application of research findings on Health Care. The theme of the conference is based on "Achieving mental wellness by understanding human mind through Psychiatric approaches".

Another conference entitled 18th International Conference on Nursing & Healthcare conducted on December 05-07, 2016

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at Dallas, Texas, USA discussed as Psychiatric and Mental Health Nursing is a psychiatric assessment which gathers information around a man within a psychiatric accommodation. The assessment is expectedly the first period of a treatment process. Nursing thought is depicted by feelings of mindfulness and fear, where there is an anxiety over future events and anxiety to current events ^[15-30].

Researchers presented Exploring pedometer use in adults with schizophrenia at 18th International Conference on Nursing & Healthcare. The purpose of this study was to explore pedometer-determined physical activity in adults with schizophrenia. Louise Tourigny is one of the eminent editorial members of Journal of Nursing and Patient Care. She presented her outstanding services as editor for many articles ^[30-40].

Scientific community can utilize the services of the upcoming conferences which are to be held in the aspect of mental health nursing and can explore their knowledge. 46th Global Nursing and Healthcare Conference on December 06-07, 2017 at Sao Paulo, Brazil and 19th Global Nursing Education Conference on April 27-28, 2017 at Las Vegas, Nevada, USA.

The following are the basic criteria that the nurses should require in handling a mental health people.

KNOWLEDGE REQUIRED FOR ESTABLISHING THERAPEUTIC RELATIONSHIPS

Nurses should have knowledge in the following specific areas for establishing better therapeutic relationship with the patients.

Background Knowledge

Before meeting the patient the knowledge which he/she have is known as the background knowledge. This includes the education, the readings he/she has engaged in, and one's life experiences.

Knowledge of Interpersonal and Development Theory

Theoretical knowledge, which give indulgent of the event of the sense of self (tendency to know ourselves), and in what way this self-influences our way of being in the world with others. These measure totally different theoretical approaches such as: Interpersonal, Object relation theory, Developmental and Gender/developmental ^[40-50].

Knowledge of Diversity Influences and Determinant

Knowledge regarding the link of social justice to social, cultural and racial diversity is very crucial. The nurse has to be familiar with the issue of "differences" and the way these influence Therapeutic relationship.

Knowledge of Person

Knowledge of person is crucial and sometimes neglected, because of workplace pressures. The nurse should be supported to achieve knowledge/understanding of the patient in the therapeutic relationship. This data refers to the actual narrative of the patient that includes Understanding of the client's specific world; Determining and confirming what bother to the client is; and Hearing the client's life history ^[50-57].

Knowledge of Health/Illness

The nurse needs to know about the specific information of the client's present issue in order that he/she will engage effectively in a therapeutic relationship ^[56-60]. As an example, if a young man bestowed with the investigation of schizophrenia, the nurse would need to realise about Instructive models like multi-determinants of health/illness which would be biological, psychological and/or socio-contextual; Symptoms; normal interventions and problems with rehabilitation; Pharmacology-in order to administer, monitor and instruct; and information of best practices.

Knowledge of the Broad Influences on Health Care and Health Care Policy

The nurse should have information of the forces that can influence the context of the client's care in aspects of Social and political forces; The client's expectations of the health care system; Functions of the health care professionals and Changes in the health care system like accessibility, resources, etc. ^[60-64].

Knowledge of Systems

The nurse should have knowledge about the system and the way it works so he/she can give instrumental help to the patient. Through the therapeutic relationship, the nurse will help the consumer to navigate the system and acquire access to services.

CAPACITIES REQUIRED FOR ESTABLISHING THERAPEUTIC RELATIONSHIPS

Self-Awareness

This is the power to know one's subjective thoughts, feelings and actions. Thus, the nurse might understand she is transfer attitude perspective that would impede the therapeutic process and tries to counteract any potential negative effects on the client ^[65-72].

Self-Knowledge

With the addition of self-knowledge, the nurse should understand that her own expertise is maintained by the position, race, culture, health, socio-economic conditions, gender, education, time of life expertise and development moreover as current relationships, accomplishments, beliefs, problems and issues. By gaining self-knowledge, the nurse is in a position to differentiate between his/her own expertise and values, and people of the client. During this method, he/she is in a position to understand the distinctive perspective of the client, that help to avoid burdening the client with his/her problems, and might stop superimposing his/her own beliefs and most well-liked solutions upon the client.

Empathy

Empathy is that the ability of the nurse to enter into the client's relative world, to see and feel the planet because the client sees and feels it and to explore the meaning it makes for the client. Empathy involves the nurse having the ability to attend to the subjective knowledge of the client and validate that his/her understanding is associate reflection of the client's expertise.

Note: The nurse doesn't need to have a regular expertise to grasp the emotions and thoughts of the client, nor does he/she have to be compelled to be in agreement with the client's behaviour to grasp the emotions and yearnings that lie below the behavior ^[73-81].

Awareness of Boundaries and Limits of the Professional Role

In professional role certain boundaries has to be maintained. A nurse is obligated to place the client's needs before his/her own needs. Client's best interest is better known to the nurse by self-awareness. Boundary violations are sometimes hard to recognise due to our own conscious and unconscious wishes. With some special clients boundaries may have been crossed include having special interest on some clients, spending extra time with some clients, maintaining secrets with clients, doing activities with clients that you do not share with colleagues. Strengths and limitations of the nurses are to seek while confronting client dynamics.

PHASES INVOLVED IN THERAPEUTIC RELATIONSHIP

Pre-Orientation Phase

At beginning of health care professionals new to the psychiatric profession usually have some concerns and experiences anxiety on the first day. One of the common concerns is fear of violence or physical harm. There are some unit protocols for communicating with clients who have poor impulse control. To help them to attain self-control, the staff and unit safe guards should be there in their constant places. Although such disturbances are not are not common, the concern is reasonable. The unit staff should be trained in this aspect and hospital security is readily available for support the staff ^[82-85].

Beginning Phase/Orientation

In the beginning of the relationship every person is stranger to the other person; same thing applies here in nurse-client relationship. Nurse should make the client comfortable by introducing themselves and with some discussions and clarifications.

The nurse has to introduce themselves by name and designation. They have to explain their role and discuss about the services they can offer. They should reduce the client anxiety or tension by encouraging the client to talk or ask some questions. Being a good listener will help in identifying the problems of the client.

Middle or Working Phase

Based upon the information got in the beginning phase the nurses have to frame the plans and should put into action. The nurses should make the client recognize their feelings like grief, sadness, mistrust, anger and thoughts like views of self, others, environment, problem solving and behaviours like hyperactivity, promiscuity, withdrawal, aggression ^[86-92].

Ending or Resolution Phase

This is the ending step in the relationship of nurse and client. Before it got terminated nurses should clarify the problems and issues. The ending of the relationship should be a celebration of goals that have been met and with mutual understanding.

Many journals dedicated towards the publishing of peer reviewed articles which helps the scientific community to gain knowledge regarding the recent research undergoing in the specific topics. Journal of Nursing & Patient Care is a peer-reviewed scholarly journal that aims to publish the most complete and reliable source of information on recent discoveries and current developments in the form of original articles, review articles, short communications, case reports, etc. in all areas of Nursing and health care. It focusses on Gerontological nursing, Midwifery Nursing Care, Adult Nursing, Public Health Nursing, Clinical Nursing ^[93-100].

Journal of Addictive Behaviors, Therapy & Rehabilitation is a peer-reviewed scholarly journal which aims to publish current developments in the mode of research articles, review articles, case reports, short communications, etc. in all areas of addiction science. It is welcoming research related to Cognitive Behavior Therapy, Drug rehabilitation, Drug Abuse, Criminal justice and Counseling, Chronic and acute intoxication, Opioid Toxicity and Overdosage, Alcoholism, Smoking, Cognitive therapies of addiction

recovery, Internet Addiction, Work addiction, Mobile addiction, Food addiction, Gambling, Shopping addiction, Sex addiction.

CONCLUSION

It is not possible for every nurse and client to follow the below criteria to maintain good relationship. Some of the nurse-client relationships starts in the orientation phase and ends up with frustration and withdrawal. There should be mutual understanding between the nurse and client. Nurses should be careful focused in some aspects like Consistency, Pacing, Listening, Initial impressions, Comfort and control for successful therapeutic relationship with the client.

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