

Nurse client relationship

[Health & Medicine](#), [Nursing](#)



Maladaptive behavior therapy affiliation Introduction W. S is a 20-year-old suffering from maladaptive behavior following the loss of her grandmother and significant other. Since then she has been involved in excessive intake of marijuana, which has led to drug-induced psychosis. Freud explains the psych determinism which is determined by the preceding events in a person's life. The two levels of consciousness that include knowledge and precociousness which means if one was thinking of something, it is easy for one to move back to a previous. Second is a John Watson's theory on behavior perspective and genetics. Psychodynamic perspective theories explain that one's behavior is determined by what they think of most of the time and thus not until they get on the issue, they are likely to be stagnated at the same point in time. Lastly, antisocial disorder theory explains that some people inherit the traits of failure to conform to society norms, being manipulative and deceitful aggressive or irritability. Thus, this is an inherited disorder that may lead to maladaptive behavior. Sigmund Freud's theory explains the reason as to why W. S is so much involved in her substance abuse. Probably the memory of her grandmother and significant other is still fresh in her conscious mind, hence making it hard for her to go on with life (Townsend, 2014).

The client is using marijuana to reduce anxiety. Due to the loss of her significant others, most of the time she is subjected to anxiety and that grieving and bereavement, hence leaving her with delusional thoughts and hallucinations. Thus, by using marijuana, she is psyched up leaving less anxious than before. Secondly, it is definite that W. S is dealing with self-esteem issues, love and affection. It is like she is lonely after losing her

grandmother and a significant other. Thus, by receiving more affection and love, she is likely to recover from the loss she had. At the same time, she needs canceling on her self-esteem to enable her move on.

History of the patient and the reason why she is admitted

The patient is admitted for psychotic disorder where she has presented for the last two weeks a very bizarre behavior which is as a result of excessive smoking of marijuana. Social history of the patient is that she is very addicted to smoking marijuana but neither does she drink alcohol nor smoke cigarettes. She is not yet married and does not work anywhere at this point in time. She endorses learning with disability and she is a high school graduate with a special ED. The patient has had a history of smoking bhang on his daily life which she could do several times in the day. This addiction has made her to become psychotic with some signs of dissolution in her thinking. The patient lost her boyfriend of whom they have been together for six years on June 2014 from a gunshot and it did not take long for her grandmother to also die as this happened in the same year but on July of 2014. Following all the stressors, she has had a lot of stress over time making her to feel hopeless, worthless and even lose her regular sleep

Teaching plan about the medication

The patient reports knowledge of having suffered from the started hydrochlorothiazide which has resulted into hypertension and even high blood pressure. The patient require constant observation where the nurses continuously carry out evaluation and psychosocial assessment in her behavior so that they can obtain collateral information that will be used for relapse prevention planning (Vickers, 2007). They should continue to monitor

her effectively so that they can see if they can identify the psychotic symptoms. After which they should consider psychotic medication trial after thorough discussion of medication benefits and risks not forgetting the potential side effects.

Approaches to patient care

First, there is the need for counseling so as to ensure that one creates an insight to the client on the loss. At the same time, counseling is very important in restoring the client's self-esteem and confidence. Secondly psychotherapy is essential in enabling the client get into the past and get to terms with what had happened then. By so doing, one will be able to move on so as to allow the healing process (Deisseroth, 2014). In addition, group therapy is important since it brings together people with the same issues. Hence they need to be far much better so as to promote the understanding of the client's situation. To meet the physical need of the client, I managed to talk to her, and we decided that she would take care of self and agreed to continue with therapies.

The effects of the ward/unit atmosphere and the group interactions upon W. S client

The psychiatric ward unit limits the extent to which clients and the nurses work towards creating that therapeutic relationship. In the first place it the place is a prison like hence does not bring about a conducive environment necessary to allow the clients interact freely with others. In fact, in a study Boden et al., (2012) found out that nurses mostly do not engage in the client relationship while in the wards set up. Instead, they engage more in other fewer important activities so as to pass the time (Townsend, 2014). Some

nurses would tend to work more on documentation than talking to the client or take more time talking to the more stable clients. In addition, the rooms are structured in a way that does not allow free interaction, there are doors and assess that separate clients and the nurses room thus keeping them off. This does not create a therapeutic relationship but rather disintegrate since it shows the differences and tends to brand the clients as irrational or dangerous to the nurses (Matson, 2009). Thus to bring about this negative impact of the ward environment, as a nurse one has to ensure that the clients do not feel neglected. This can be achieved by having more time with them and letting them feel loved by the nurses. Furthermore, a nurse should ensure that there is a well-facilitated group giving it autonomy and allowing clients to contribute freely. By so doing, the members are likely to know each other more and hence increase the working relationship. At the end of the day, client learns a lot from group participation. Apart from gaining insight of the issues surrounding here after listening to others with similar issues. W. S was able to realize her issues that made it possible for her to move along and improve during the period (Hogg, & Langa, 2007).

Evaluation of nursing goals and approaches

The major goals of the client at the end of the therapy were to ensure that she was out of danger to others and self. This is because due to the increased intake of marijuana, the client was likely to get involved in a number of issues that are likely to affect the client's behavior and get violent. Thus, she has to guide though so as she does not get to that level. Secondly, by the end of the therapy, the client is supposed to understand that there is the relationship between her substance abuse and the problems she is going

though. In addition, she has to accept responsibility for her behavior. Thirdly at the end of the therapy, the client should be able to have got over hallucinations that occurs over time and differentiate the difference between reality and delusional thinking. For W. S, the approaches used in here management worked perfectly well since all the goals were achieved by the end of her therapy. The violence and selective muteness observed at the time of admission, is longer observed in her. In fact, she wants to leave hospital set up, and since she has realized her problems, she is willing to be attending therapies two to three times in a week. This is a clear indication that she is recovering from the substance abuse and at the same time releasing on what has taken place as she accepts the fact that she already lost her grandmother and significant other.

Conclusion

Before the start of the relationship, the client was mute selectively with minimal interaction with others. She did not realize that what she was doing was illegal and substance abuse. Instead, she thought that it was therapeutic in getting her go through her loss. Thus, she was into taking of marijuana on a daily basis which at the end of the day affected her psychosis. At the end of the relationship, the client was aware of the problems that she was going through and ready to change. For instance, she was willing to get out of the hospital and keep attending therapeutic sessions since she found them useful to her health.

Writing this paper has been helpful in enabling me realize the different explanations of the client maladaptive behavior. At the same time, it gives men an opportunity of learning more about approaches that are used to

attend to clients irrespective of their environment. For instance most of the time, the therapeutic sessions take place in the wards before clients are discharged, the paper gave me an opportunity to learn how this environment affects client staff relationship hence I was able to realize other methods of making the place better and beneficial both the clients and staff.

References

- Boden, M. T., John, O. P., Goldin, P. R., Werner, K., Heimberg, R. G., & Gross, J. J. (2012). The role of maladaptive beliefs in cognitive-behavioral therapy: Evidence from social anxiety disorder. *Behaviour Research and Therapy*, 50, 287–291. doi: 10.1016/j.brat.2012.02.007
- Deisseroth, K. (2014). Circuit dynamics of adaptive and maladaptive behaviour. *Nature*, 505, 309–17. doi: 10.1038/nature12982
- Hogg, J., & Langa, A. (2007). *Assessing Adults With Intellectual Disabilities: A Service Providers Guide*. Oxford: John Wiley & Sons
- Matson, J. L. (2009). *Social behavior and skills in children*. New York: Springer.
- Townsend, M. (2014). *Psychiatric Mental Health Nursing: Concepts of Care in Evidence-Based Practice*. Philadelphia: F. A. Davis Company.
- Vickers, J. P. (2007). The subjective work experiences of hospital patient attendants (Order No. MQ44882). Available from ABI/INFORM Complete. (304377591). Retrieved from <http://search.proquest.com/docview/304377591?accountid=45049>