

# Psychiatric nursing environment

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In psychiatric nursing, the atmosphere includes surroundings, conditions, and controls that bound and influence the growth and behavior of the person. These causing aspects are classified as focal, contextual, and residual stimuli. The changing environment stimulates the person to make adaptive responses. Much of our behavior involves reactions to our environment. We may also act upon the environment: pressing buttons and pulling levers to gain access to cigarettes, fresh air, more or less sunlight. We are all tied up, inextricably, with our environment: the world we inhabit.

This rule applies equally to the psychiatric patient. Especially where the patient is severely disturbed, it is all too easy to forget that his environment may have played a part in the creation of that disturbance. It has been noted that the psychiatric patient is not wholly absolved from the rules governing normal social behavior. By implication, we can assume that abnormal social behavior may have something to do with the unnatural circumstances under which he lives. The rules and regulations of the institutions are the bells and buzzers which control his functioning, to a greater or lesser extent.

Nursing interventions should then aid patients in recognizing their dysfunctional behavior, help them describe the behavior verbally, connect the causes and the consequences of their behavior, search for more functional behavior, and transfer the improved behavior to other situations. Nursing is an educational instrument and a force for promoting progress toward constructive and productive living. The psychiatric nurse uses tools of self and of knowledge as the basis for care. The psychiatric nurse needs well-developed communication skills.

The nurse, using this set of skills and knowledge, has the ability to offer interactions to the patient that are compassionate and empathetic, that offer hope and sense of future, and that provide clients with the ability to see their current situations in a new light and to focus on their strengths and abilities. These abilities help to meet the goals of psychiatric care: control of symptoms, provision of therapeutic relationship, identification of nursing problems, and provision of nursing intervention that assist in returning the patient to the best state of health that is possible.