

# Application of erikson's psychosocial development theory in patient care plan



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In clinical we use Erik Erikson's theory of psychosocial development to assist in developing a comprehensive and holistic plan of care for the patients we see. Erik Erikson's various stages are simple to understand and easily applied to all age groups. A prime example is in the number of teenagers we see during clinical. The stage identity versus role confusion relates to them perfectly as it is obvious they are struggling to find where they fit in with family, peers and society. Those that have adequate support and encouragement become independent and develop a strong sense of who they are while those teenagers that do not will become insecure and confused about their future. We see many teenage girls come in dressed as males, who actually identify as male, that have yet to find happiness. They are the ones that lack a sense of identity and are unable to develop genuine relationships with their peers. This inability to form relationships will cause further complications in the next stage intimacy versus isolation.

As part of the class requirements, we are to present a project. I have chosen to research the effect of probiotics on mental illness. As the field of psychiatry is beginning to learn more each day about the gut-brain axis use of probiotics to improve mental disorders is being closely examined. For instance, a study by Raygan, Ostadmohammadi, and Asemi (2018) demonstrated that the addition of probiotics and selenium to the diets of subjects with diabetes and coronary heart disease improved indicators of metabolic profiles and mental health when compared to placebos. The idea of being able to use natural supplementations to improve mental disorders, especially for those resistant to taking psychiatric medications, is fascinating

to me and while I do not believe that we will be able to replace psychiatric medications I do think this subject has opportunities for advancement.

Throughout the master's program, it is emphasized that nurse practitioners have the ability to save the consumer money. It is well-known that there is a physician shortage in many rural areas and this is especially true for the field of mental health. In clinical we have patients that drive 1-2 hours to see us as they do not have access to a mental health provider closer to them. Unfortunately, those that do not have access to transportation will not receive the care they need to stay well leading to illness and the high costs related to this.

Nowhere is family involvement more important than in mental health. We meet with children and parents to discuss our plan of care to learn whether it is working. We have family meetings with adults and their families as well. The goal is for them to gain an understanding of the illness their loved one is suffering from and how to help them manage it. If those with mental illness do not have an adequate support system they will often fail in maintaining actions that keep them well..

Providing culturally competent care is a difficult but essential goal as a nurse practitioner. My clinical site this semester has not offered much diversity but we do round at the local hospital and will often see people of different cultures there. The inability to communicate with these patients is frustrating and I often wonder if they understand their plan of care. Clinicians must be aware that incorporating someone's cultural beliefs in their treatment plan increases the likelihood of success.

Another important aspect of patient care is following legal and ethical principles. Psychiatric nurse practitioners have to be very careful with the information they get from clients as there are many laws that have been enacted to protect the privacy of people suffering from mental disorders. The psychiatric nurse practitioner may take away a person's freedom to a certain extent in special situations, therefore, when they choose to involuntarily admit someone they are legally and ethically obligated to do all they can to protect that patient's rights.

Establishing a therapeutic relationship is one of the most important components of therapy. Building trust may be difficult as many clients are suspicious and distrustful of those they perceive "in power." At times the client may refuse to work on building a relationship with the therapist as they are not ready for help. We often see patients that have been involuntarily admitted who feel anger and betrayal. We have to remember clients that have been involuntary admitted are able to develop positive relationships during an obviously upsetting time when they experience feelings of connectedness, are given treatment information, feel as though they are viewed as a person and not a diagnosis and feel a sense of partnership with their therapy team. For those unable to develop a trusting relationship there is no perception of benefit from therapy (Wyder, Bland, Blythe, Matarasso, & Crompton, 2015).

Throughout my time in school, I have worked on developing an ethical framework that would guide me in my practice. I have a foundation but I believe that this will be a work in progress and will change somewhat when I actually enter into practice and begin seeing patients every day. My goal is <https://assignbuster.com/application-of-eriksons-psychosocial-development-theory-in-patient-care-plan/>

to treat all patients with mental illness that I see with respect and compassion which seems to be something that is often sorely lacking for them.

## References

- Raygan, F., Ostadmohammadi, V., & Asemi, Z. (2018). The effects of probiotic and selenium co-supplementation on mental health parameters and metabolic profiles in type 2 diabetic patients with coronary heart disease: A randomized, double-blind, placebo-controlled trial. *Clinical Nutrition*. <https://doi.org/10.1016/j.clnu.2018.07.017>
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