

Stress and coping

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



The psychosocial theory of stress and coping is of the utmost importance to patient care and recovery. It has been found that among other things, stress can affect the rate of wound healing, susceptibility to infectious diseases, and the development and progression of cancer (Walker et al, 2007). The nurse plays an integral role in the management and alleviation of patients' stress, and can provide valuable mechanisms to aid in the process of coping with the stressor.

Stress is a concept, not a fact, and is best described by using a theoretical model (Walker et al, 2007). One of these models is the Lazarus and Folkman's transactional model of stress and coping. It suggests that stress can be reduced by interventions that make the person think differently about the stressor, or that a person's perception of their ability to cope with the stressor can be changed (Glanze et al, 2008).

In the text to follow, it will demonstrate how nursing care has benefited from the application of this theoretical model, and how particular nursing care interventions can help change patients' perspective of certain stressors, and their ability to cope with the stressor. The entire family, not just the patient experiences the stresses associated with a family member being hospitalized (Lewis et al, 1989).

By involving the family in a patient's care regime it can change the person's perspective of their ability to cope, by providing a support network, and can help alleviate not only the patient's stress, but the stress of the family too. The nurse needs to understand what family means to the patient. It might not be traditional, for example related by blood, or married. Patient care

should be planned with the family in mind, and families should be made aware of what the care plan is. This way they are better equipped to support the patient (Lewis et al, 1989).