N.C. Nurse Aide I Curriculum

MODULE S
Psychological Effects of Aging
Objectives

- Describe the psychological effects of aging.
- Explain the nurse aide’s role in meeting the basic needs of the resident.
- Describe the nurse aide’s role in caring for residents with a variety of responses – depressed resident, combative resident, and the agitated resident.
- Describe the feelings and behaviors of older adults moving into a nursing home.
Psychological Effects of Aging

An exploration of feelings, emotional stress, physical, psychosocial and psychological adjustments that are part of the aging process.
Basic Human Needs

Elements necessary for survival and physical/mental well-being

- Physical Needs
- Safety & Security
- Love & Affection
- Self-Esteem
- Self-actualization
Physical Needs (Requirements for Sustaining Life)

Oxygen
Physical Needs (Requirements for Sustaining Life)

Food and Water
Physical Needs (Requirements for Sustaining Life)

Shelter and Sleep
Physical Needs (Requirements for Sustaining Life)

Elimination and Activity
Safety and Security Needs
Love and Affection Needs

Friendship
Social Acceptance
Closeness
Love and Affection Needs

Supporting the meaningful relationships of residents with others
Love and Affection Needs

Nursing staff can become family for the resident
Basic Self-esteem

Yes, I AM the diva of this place.

- Value, worth or opinion of self
- Seeing oneself as useful
- Being well thought of by others
Self-esteem Needs of the Resident – Nurse Aide’s Role

“Hello, Mrs. Divine” – call resident by proper name

“Congratulations, on being voted ‘Diva of the Nursing Home’” – praise accomplishments

“Is it a good time to discuss the Diva Banquet that we are going to have next week?” – discuss current issues

“Mrs. Divine, do you think I would look as good in pink, as you do?” – request resident’s opinion, show respect and approval
Spiritual Needs

- Respect beliefs and religious objects
- Inform residents about events
- Assist residents to attend events
- Provide privacy during visits by clergy

Residents have the right to worship and express faith freely
Sexuality

- Expressed by individuals of all ages
- A way to show feminine or masculine qualities
- May be expressed in a variety of ways
Resident Sexuality – Nurse Aide’s Role

- Assist to maintain sexual identity
- Assist with personal hygiene
- Assist to prepare for special activities
- Help to develop a positive self-image
Resident Sexuality — Nurse Aide’s Role

- Show acceptance and understanding
- Never expose the resident
- Accept the resident’s sexual relationships
- Provide protection for the non-consenting resident
- Be firm but gentle in objection of a resident’s sexual advances
Developmental Tasks of Aging – Skills

Skills that must be mastered during a stage of development
Developmental Tasks of Aging – Issues

- Amount of care
- Cost
- Nutritional needs
- Relationships
- Location of family/support system
- Medical care needs
- Changes in lifestyle
- Long-term care decisions
The Place That I Call Home
Happy Care Nursing Home
To an older adult, a home may represent......

- Independence
- A part of his/her identity
- A place to maintain autonomy & control
- The center for family gatherings
- A link to the past
- A connection to the neighborhood
- Symbol of position in the community
Relocation from the Home....

- Decrease in finances
- Decline in physical or mental state
- Lack of social support
- Increasingly unsafe neighborhood
Reaction to Relocation

- Degree of choice
- Degree of preparation
- Degree of sameness of the new location
- Degree of predictability
- Number of additional losses
Moving to a Nursing Home

Admission to a Nursing Home...
Feelings About Suddenly Being Admitted to a Nursing Home

- A great deal of **stress** and a sense of **loss, fear, isolation, confusion** & being **out of control**
- May feel **relief** over the move

Event is often viewed as the ending of one phase and the beginning of the final phase
A nursing home may be perceived as an accidental community
Life in a Nursing Home – Residents

- Wide range of ages
- May stay for a short or long time
- Variety of diagnoses
- Vary in degree of impairment or disability
- Vary in level of cognition
- 75% female
Life in a Nursing Home –
Routines and Schedules

The older adult’s life is built on
previously established social roles
and personal routines

Personal routines
and schedules
may collide with
facility schedules,
causing conflict
Life in a Nursing Home – Space

Personal space is limited and reduced

Storage space is limited
Life in a Nursing Home – Lack of Privacy

Resident may live in a shared bedroom with no choice and no control
Life in a Nursing Home –
Lack of Privacy
Life in a Nursing Home

- Cognitively impaired housed with cognitively intact
- Residents may be frightened
Adaptation to Life in a Nursing Home

The cognitively intact older adult adapts to life in a nursing home in one of three ways.............

becomes depressed or may regress

becomes uncooperative

determined to make the best of it
Adaptation to Life in a Nursing Home

Important to realize that a **NORMAL RESPONSE** to sudden placement into a nursing home is often viewed as poor adjustment.

Nursing home staff may unfairly and prematurely label the resident as difficult or a troublemaker.
Life in a Nursing Home – Nurse Aide’s Role

Individualize the Admission Process
Life in a Nursing Home – Nurse Aide’s Role
Life in a Nursing Home – Nurse Aide’s Role

Providing Privacy and Respect for Personal Space
Life in a Nursing Home – Nurse Aide’s Role

Provide Emotional Support
OBRA

- OBRA requires States to have a survey and certification process in place
- Survey is unannounced and performed to review quality of care
- Variety of methods
- Findings of state inspectors
The regulation of nursing homes focuses on quality of life for residents and emphasizes their individual rights. Because of OBRA, nursing home residents are more empowered and have a greater say in their own quality of life.
Nurse Aide’s Role in Caring for Residents with Depression

- Recognize reasons
- Recognize signs and symptoms
- When the resident is depressed
- Recognize defense mechanisms
Defense Mechanisms

- Projection – blaming others
- Rationalization – false reason for situation
- Denial – pretending problem does not exist
- Compensation – making up for situation in some other way
Defense Mechanisms

- Displacement – transferring feelings about one to another
- Daydreaming – escape from reality
- Identification – idolizing and trying to copy another
- Sublimation – redirecting feelings to constructive activity
Nurse Aide’s Role in Caring for Residents with Developmental Disabilities

- Treat with respect and dignity
- Encourage
- Do not act as parent
- Provide privacy
- Build self-esteem
Nurse Aide’s Role in Caring for Residents Who are Stressed

- Listen to concerns
- Observe and report
- Treat with dignity and respect
- Attempt to understand behavior
- Be honest and trustworthy
- Never argue
- Attempt to locate source
- Support efforts to deal with stress
Nurse Aide’s Role in Caring for Residents Who are Demanding

- Attempt to discover factors
- Care
- Listen
- Give consistent care
- Spend time
- Agree to return at a specific time and keep promise
Nurse Aide’s Role in Caring for Residents Who are Agitated

- Encourage to talk
- Remind resident of past ability
- Encourage to ask questions
- Promote self-esteem
- Observe for safety
- Assign small tasks
- Use reality orientation
Nurse Aide’s Role in Caring for Residents Who are Paranoid

- Reassure
- Realize behavior is based on fear
- Avoid agreeing or disagreeing
- Provide calm environment
- Involve in reality activities
Nurse Aide’s Role in Caring for Residents Who are Combative

- Display calm
- Avoid touch
- Provide privacy
- Secure help if necessary
- Do not ignore threats
- Protect self
- Listen without argument
The End