Psychosocial Assessment

KEY POINTS

- A holistic approach to assessment includes attending to the range of biological, psychological, social, cultural, and spiritual aspects of a person
- Assessment involves collecting information as well as identifying strengths, resources, and needs
- Assessment is an ongoing process as the needs of patients will change over the course of an illness

INITIAL ASSESSMENT

- Gather information about the context of the patient and the family, and the impact the illness is having on various areas of their lives
 - Explore how the patient defines quality of life, their strengths, goals, and barriers to achieving these goals
- Generally, it takes several sessions to gather all the relevant information
- The assessment is not diagnostic, its purpose is to join the patient and family in an empowering and ongoing collaborative process to achieve their goals

Areas to Consider in the Assessment:

- Ecological factors marital status, status of children, family, social support systems (e.g. family, co-workers, friends, and neighbours), pattern and style of communication, family structure, roles, dynamics, abuse and/or violence, and sexuality
- Psychological factors self-concept, self-esteem, coping abilities, affect, attitude, mental status, substance abuse, developmental stage, defence mechanisms, cognitive abilities, response to previous losses, and social skills
- Oultural factors beliefs, identity, practices, rituals, and values

- Social factors education, employment, housing, financial and/or legal status, leisure activities, physical environment, and healthcare experiences
- Spiritual factors meaning applied to what gives purpose and hope
- Biomedical factors diagnosis, previous or concurrent health issues, traditional and integrative health practices

STRATEGIES FOR ASSESSMENT

The following are examples of questions that may help to facilitate discussion during the initial and on-going assessment:

General Questions

What is your understanding of the illness?

- What do you want to know about your illness?
- Are there others in your family who want to know other things?
- What kind of impact has the illness had on you and your family?
 - → How have roles and responsibilities changed within your family?
- Can you share information with me about your family and community of origin?
- What is most important to you?
- S What are you most worried about?
- Who do you turn to for help?
- Who should be involved in decision making?
- What would be most helpful to you at this time?

Strengths-Focused Questions

- What is giving you strength to cope with your illness?
 - → What has helped you in the past to cope with difficult situations?
- What helps you connect with your spirituality or faith?

- How is your family supporting you? What is challenging in your family?
- What is giving you hope right now? What are you hoping for in the future?

Practical Needs Questions

What are your practical needs right now? In the future?

- → Finances, housing, transportation, food, childcare, care planning, burial, funeral, etc.
- Which other psychosocial professionals have you connected with? (e.g. social worker, counsellor, etc.)
- Do you need assistance accessing other supports?

Cultural Safety

- Culture is the common characteristics (values, norms, family styles, social roles, and behaviours) which are present in a group of people
- Culture is an important factor which influences many aspects of serious illness, including:
 - Experiences and expression of pain and other physical symptoms
 - Maintenance of hope in the face of a poor prognosis
 - End of life care decisions
 - Responses to illness, treatment, grief, and loss
- Culture extends beyond ethnicity and includes age, gender, faith, religion, sexuality and gender, lifestyle, language, and socioeconomic status
- In healthcare, we may care for people with very different explanatory models of illness, with different expectations about medical care and views on death
- When thinking about providing palliative care consider that in some cultures:

- Pain and suffering are expressed differently
- → A serious diagnosis may not always be disclosed to the dying person
- Oying may not be discussed openly
- → The family, not the patient, may make the final healthcare decisions
- Cultural safety means that healthcare providers are able to provide patients with care that is respectful and inclusive of their culture and beliefs