
UNIT 2 HUMAN RELATIONS IN NURSING

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2.1 OBJECTIVES

After studying the unit you should be able to:

- discuss the concept of human relation;
- explain the various ways of helping the patient to adjust to sickness;
- develop therapeutic attitude towards the patient;
- identify the defensive techniques used by the nurse to avoid interaction with the patient; and
- develop skills in helping the patient who is considered as "Difficult".

2.2 INTRODUCTION

The most urgent concern of nursing services is the relationship of the hospital personnel and services with the patient. In the hospital and community environment one comes across many difficult situations. There are many groups of health workers in the hospital setting, but the role of nurses in particular is very significant. Though the quality of patient care is influenced substantially by the nurse's competence in giving care, yet face-to-face communication and nurse's ability in handling interpersonal relationship adds to the quality nursing care. In this unit the discussion will be on the concept of human relationship, the efforts made by the nurse in helping patient to adjust to illness as a human being, while becoming an effective member of the team and developing positive attitude towards the patient. Certain situations where a nurse may use defensive technique so that s/he does not have to answer the questions of patient are also illustrated. You will also read in this unit on how to help these patients who are considered as difficult.

2.3 CONCEPT OF HUMAN RELATION

Human relation in nursing is a very significant aspect. The nurse is dealing with the human beings who have complex needs. They have their identity, life style, status and background. When they fall sick and are dependent on others for care, they need to be considered as unique human being. Nurse and the hospital team need to use effective communication skills so that the patient feels that they are being considered as an individual and not merely another patient suffering from a particular disease.

2.4 HELPING PATIENT TO ADJUST TO ILLNESS

Illness is a stressful situation for the patient as well as family. As a nurse one needs to keep the following factors in mind while helping the patient.

2.4.1 Recognizing the Effects of Illness on the Patient and Family

The patient comes to the hospital with the effects of illness added to their usual problems, and illness becomes an additional source of stress for the patient and family. As a nurse one is familiar with the hospital set up, equipment and routine activities, but for the patient the whole place may be very frightening. As the patient is a central figure in the hospital the following efforts may be made to help her/him feel like an important human being.

a) Out Patient Department

A patient's first impression about the health workers and hospital will help her/him in forming the opinion about the hospital and its workers. If the patient is received well at the reception, guided towards the OPD and is attended by physician properly, she/he feels there will be warmth and friendliness in the ward where she/he is going to be admitted.

If the patient has come to the hospital for the first time, she may be slow to understand instructions. A nurse needs to develop an attitude of patience and understanding in explaining the questions asked by patient and relatives.

b) Reducing the Waiting Time

You must have come across some patients attending OPD. By the time patient is able to understand where she/he needs to go for laboratory investigation (the geographical location) it is the closing time. Imagine the stress the patient and the relatives have gone through in terms of money, time, physical efforts in coming to the hospital OPD and going away without investigation. If guidance is given properly to this patient the timely investigation would help her/him to start the treatment early.

For example in the ward a patient is informed that he has to undergo some investigation i.e. X-ray abdomen, if the patient is prepared on time, informed the details of investigation and the time at which he has to go for the x-rays, explanation about who will be going with the patient. All these information would make the patient feel comfortable and give him a sense of being an individual with different needs.

c) Reducing Stress of Admission

As the patient and family are undergoing immense anxiety and stress which shoots up the moment they come to know that admission is required, it is very difficult for the patient to locate his/her ward. Hence, it is important for OPD nurse to send the patient with a hospital escort and handover the patient to the ward incharge. The clear, effective communication and direction given by the nurse in the patient's language will definitely reduce the anxiety and stress of the patient and family.

d) Helping Patient to Adjust to the Ward

A leaflet may be provided to the patient about ward routine. Time for meals, doctor's round or any important information i.e. whom to contact in the ward during any problem. The patient may have several questions but if answered patiently she/he feels happier that someone is there to tell her/him that where is the lavatory? Where she/he could fill up hot water, and the meal timings in the ward?

For example one of the patient mentioned to another patient, "that so many people wearing uniform visit the ward, I am bewildered by the number of people who appeared at my bedside who are not ready to disclose their names. However one of the smart young woman in white overall would ask everyone how are you? Patient wondered whether she is a Doctor, radiographer, laboratory assistant, a physiotherapist, a senior nurse? Who is she? Eventually she turned out to be 1st year nursing student".

The above example shows that it is very significant for the health team to interact with the patient to make them feel nice human being.

Check Your Progress 1

Give four examples of how you would help the patient to adjust to the hospital.

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2.5 THERAPEUTIC ATTITUDE TOWARDS THE PATIENT

Attitude includes mixture of feelings, belief and behaviour. People have different attitudes towards other people, surroundings or objects. You have read in BNS-105 that attitudes are learned early in life through imitation of adults. Many attitudes are formed unconsciously on the basis of experience. A young nurse who has seen fights between parents because of father's alcoholism may have a non-helping attitude towards a patient who is alcoholic.

a) Rising Above Your Problem

As described in this section, it is necessary that the problem which you as a nurse have faced due to an alcoholic father will be seen in other families also. The coping mechanism of each family is very different. Similarly sometimes you may face personal problems. These personal problems should not interfere with the patient care. As a nurse you have to develop habit of putting the personal matters aside while you are on the job.

It is understandable that nurse is also a human being and may be going through various stresses. It is better that s/he takes leave, resolves the stress factors and comes back full of energy and concentration to help the patient.

b) Nurse Needs to Adopt her/his Behaviour

A nurse needs to adapt herself according to the situations and conditions in the hospital. For example if a patient is agitated, the nurse needs to help the relatives so that they do not get worried if the patient has high fever. A few words from the nurse will reduce the anxiety. It may be a very small gesture from the nurse but patient's relatives feel that he/she is under her care.

c) Attending to Requests of Patient

It is a very important feature in demonstrating the attitude of acceptance of the patient as a human being. Even though there is a shortage of nurses in the ward, a request from the patient for a glass of water or assistance sought in getting out of the bed could be met "immediately" or with an abrupt answer such as "you will have to wait". A sympathetic answer calms the patient down.

d) Maintaining Respect and Dignity of the Patient

It is very important for a nurse to take care of the dignity of the female patient and ego of the male patient. For example a nurse may avoid saying that "all those patients who have to get insulin injection come to the duty room".

Providing privacy to the female patient and presence of nurse during physical examination of a female patient by a male doctor is a part of dignity which must be provided to the patient.

Let us read the following illustration and understand what the patients look during hospitalisation.

"A nurse on duty was often remembered in a particular ward as one who is understanding and reassuring person. Though she was new, she showed genuine interest in doing her best for the patients. Her attractive smile and kind enquires did a great deal to restore the morale of patients. She could not spare time for more than a few words, but everyone looked forward to her visits and missed her on the day when someone else took her place. This

From the above illustration it can be interpreted that the small things done for the patients helps **them** feel that as if they are being treated as human being.

2.6 DEFENSIVE TECHNIQUE USED BY THE NURSE

To overcome the various demands by the patient or to avoid the interaction with the patient, a nurse may use the defensive mechanism. Some of the most common defensive techniques used by the nurse which results in her not developing a rapport with the patient are given as follows:

i) Nurses' Attitude of Differentiating the Nurse and Patient

Nurse feels that she is a the rapist and does not have much time to spend with the patient. She thinks that patient may have various needs and become **demanding** and it is not necessary for a nurse to attend to all the needs of patient.

If the patient is helped by the nurse to become self-reliant with whatever potential he has, it will not only reduce demands on the health professional but the patient will have the satisfaction of an early recovery.

ii) Categorization/Depersonalization of a Patient

As described in section 2 (d) calling all the diabetic patients to come for insulin injection is an example of categorization. A nurse calling the patient on bed No. 6 to come for the dressing is another example of **depersonalization-categorization** Patient would feel more comfortable if he is told "Mr. Shah it is time for you to come for dressing of your wound in the dressing room".

iii) Detachment and Denial of Feelings by the Patient and Nurse

In some cases, patients demonstrate no feelings towards their sickness. For example, a person with abdominal cancer may start saying that he has no problem at all and that everything is fine or he starts consoling the relatives. This is an example of denial of sickness.

On the other extreme, the **patient** starts thinking that **he/she** is very sick so it is the end of the world. She may not eat food, does not communicate and socialise with the family members. This is an example of detachment. The nurse feels that if patient does not have any hope left she cannot do anything about it.

Denial may be from the **nurse's** side also. For example, nurse may think that this patient does not have fever, **he/she** is eating properly and slept well at night, so there is no need for her to go and talk to **him/her**.

iv) Avoiding Decision Making due to Routine Activities

One of the other common defense mechanisms used by the nurse is when a patient asks "Sister do you think I can go to the bathroom and have bath even when I have fever" and the nurse replies "as you wish" and gets busy in her work. Instead a nurse could say, let me check your fever, if it is too high then you can sponge your body sitting on the bed, otherwise you **can** go to the bathroom. She checks the temperature of patient and gives instructions accordingly. Sometimes a nurse may show that she is very busy, walking briskly, going from one unit to other, attending to routine activities. Finding the nurse so busy the patient does not ask the question.

The *nature of responsibility* will also affect on the extent of relationship a nurse is able to establish with **the** patient. For example if a nurse has to give injections to all 50 patients in the ward at 10 o'clock in the morning **s/he** may be **under** stress to complete the task. But while giving injection nurse may talk to the patient about how he is feeling. How the wound is healing or the backache is depending on the complaint the patient was admitted with.

v) Underestimation of Personal Developmental Competencies

Many a times a nurse may use defense mechanisms to avoid the patient because she has to go if the patient calls but she feels that it is not necessary to attend all his calls. Nurse may

may also think that she may not be able to answer all the questions of the patient. A nurse must keep updating her knowledge and skills so that **s/he** is able to handle various situations in the hospital.

vi) **Dependency on the Superior**

Any difficult task or decision making opportunity is passed on by staff **nurse** to the supervisor. For example the patient says that "some of the patient; **are** not getting breakfast on time". The staff nurse instead of handling the problems says that she would inform to the ward incharge. This is a **situation** where nurse is trying to escape from responsibilities.

vii) **Avoiding Change**

The nurse who had been working in a particular nursing care unit avoids going to other units. As change may put **her/him** in a situation where efforts are needed to develop skills. So when the change of unit is suggested she might say "**no**" because she is happy in the same place.

The defensive technique used by the nurse as described in this section leads to the various issues in nursing.

A nurse **may** be using *task-centered approach rather than patient centered approach*. There may be *staff dissatisfaction* due to less **number** of nurses, lack of equipment and supplies. It may even lead to *rapid turnover of nurses*, within **the departments** of a hospital or to other hospitals. There may be *high wastage and high sickness rates* amongst the nursing personnel.

The role of nurse **administrator** is very significant in helping nurses overcome the stress and facilitate them to develop effective human relationships.

2.7 WAYS OF HELPING THE PATIENT WHO IS CONSIDERED "DIFFICULT"

There is nothing called as difficult patient. A patient may sound difficult when **s/he** is not able to understand what the nurse is trying to explain. It could be due to language barrier, **educational** background, culture variation, general awareness and life style of the patient. Due to **these** reasons the patient may ask **several** questions from the nurse i.e. "Sister should I take this **medicine** with hot **water/cold** water." "Should I take the medicine after breakfast or before breakfast." These questions may sound very simple to the nurse, but have a lot of meaning for the patient. Some patient in the hospital may become very hostile due to change of environment or the pain and discomfort they are going through.

In some situations a nurse **comes** and discusses with the ward administrator about the difficulties **s/he** is encountering and how **s/he** can overcome these problems. Following are some of the **ways** a nurse administrator may explain so that the nurse can help the patient:

- Kindness offered by the nurse to the patient will make **him/her** cool down and listen
- Communication in simple and clear language will reduce anxiety of the patient
- Sometimes patient may look as if she is making a fuss and is not eating food. In fact **s/he** may be having real **distress/discomfort** due to which **s/he** is not able to eat properly.
- In the hospital patient becomes dependent and gets worried that what if she gets discharged, she loses support. In such a case a nurse needs to explain to the patient how he can gradually become more independent and care for himself rather than making him feel guilty "**that** now you are alright still you don't want to do your own work."
- Sometimes patient is regarded as difficult because **s/he** has failed to live up to the high standards and rigid routine of the hospital.
- Nurse must also understand that if the patient is expected to tolerate the staff with **her/** his individual characteristics. in return the nursing personnel also try to regard the patients behaviour with tolerance, specially when **s/he** is sick.

- Sometimes by changing the routine activities of a patient may make him/her feel as a unique human being and patient actually will be able to adjust. For example
 - Divide the nursing personnel in small teams
 - Reducing of saying "it is not my job" someone else will come and tell you.
Keeping the individual patient's need in mind
 - Spending more time with patient and for patient rather than on consultants rounds
 - Providing of bell and modified bed rest
- Nurse can also use the ways and means by which slhe allows the patient to be as comfortable as the patient wishes to be. For example accepting change in the routine
- The best thing for the patient is that the nurse avoids disturbing the patient when slhe is resting
- On discharge allow the patient to ask questions if slhe has doubts. Nurse may spend more time with the patient when they are being discharged
- Avoid giving vague answers. For example take adequate rest. Adequate may be qualified by saying one hour or two hours in a day etc.
- Explain the relatives about the appliances being used for the patient in the hospital and its use
- Explain the relatives about the needs of the patient when s/he is discharged
- Discuss with the relatives about how to carryout instructions. as relatives always carryout the instructions very faithfully if explained properly.
- Discuss with the relatives about the community resources and welfare facilities for the patient
- Encourage them to ask questions and clarify doubts

Check Your Progress 2

List examples of patients who are considered difficult,

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2.8 LET US-SUM UP

Now that you have read this unit you must have understood that the emphasis is placed on the importance of human relation in nursing practice and nursing administration. As you have read that patients give importance to small things. the way the nurse is interacting and how patient wants the nurse to interact. In this unit the concept of human relation is discussed with regards to patient as a unique human being having complex needs. The other important concern of nurses is to help the patient to adjust to his/her illness by recognizing the effects of illness. Specifically by attending the patient in outpatient department, reducing the waiting time. reducing stress of admission and helping patient to adjust to the ward. You have also read in the unit that the patient is to be considered as a unique human being. While working in the ward the nurse needs to rise above her/his own problems, and adopt the behaviour according to situations and conditions of the patient, maintaining respect and dignity of the female patient and ego of male patient. Try using some of the ways of helping patients to be a unique human being and you will find that you would be one of those nurses to whom the patient will look forward to interact to whenever they have any problem.

2.9 ANSWERS TO CHECK YOUR PROGRESS

Check Your Progress 1

- i) Helping at Outpatient Department
- ii) Reducing the Waiting Time

- iii) Reducing Stress of Admission
- iv) Helping Patient to Adjust to Ward

Check Your Progress 2

- i) Language barrier
- ii) Educational background
- iii) Culture variation
- iv) General awareness
- v) Life style of the patient

2.10 FURTHER READINGS

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