

Therapy Skills for Healthcare

Book review

In a new book introducing healthcare professionals to “brief psychological techniques”, the author, Caroline Forrest, writes that for people with long-term conditions including diabetes, it is necessary to look at the whole person rather than treating the clinical picture alone. She therefore adopts a psychological approach to physical health.

It is not always possible to access a mental health team when required and it has become necessary for health and social care staff to gain knowledge and skills in this area to address “low-level” mental illness. However, Forrest emphasises that specialist psychological input is sometimes necessary and it is important to be aware when referral to these services is the preferred option.

Forrest qualified as a nurse in 1997 and has worked in a variety of fields. At present she is working in general practice, with an interest in diabetes and this, along with 4 years as a specialist renal nurse will, no doubt, have contributed to her interest in diabetes.

This book is not meant to be a training tool for healthcare professionals, but more of a taster of the techniques that can be used as an early intervention in people with mental health issues. Those of us who work with people with diabetes are very aware that anxiety and depression go hand in hand with the condition. Woolston (2011) states that up to 30% of people with diabetes suffer from depression. Forrest writes that psychological factors in chronic conditions influence adherence to medication and lifestyle and uptake of the services available. They can also predict adverse outcomes. This highlights the importance of healthcare professionals having the ability to recognise such issues and



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having the knowledge and confidence to address them.

The book briefly discusses the important elements of therapy skills, starting with building a rapport and gathering information. The author writes that “emotional connection and quality of communication affects consultation outcomes more than any amount of medical knowledge”. Observation of the individual at this stage enables the recognition of physical behavioural signs, such as skin colour, muscle tension and breathing patterns during consultations, so that the

most important messages can be delivered when the individual is at their most relaxed and receptive. When gathering information, Forrest stresses the importance of eliciting the individual’s understanding of their condition. It is essential to know how they perceive the effect of the condition on their lives and the lives of those around them.

As one would expect with long-term conditions, the two longest chapters in the book are “Understanding depression” and “Managing anxiety” logically followed by “Promoting behaviour change”. The author recommends challenging harmful thinking and unrealistic expectations and reassuring the person that they are by no means on their own. She includes some very useful suggestions in the discussion on behavioural change. These seem to be the most useful chapters for people working in diabetes.

This is a useful and informative book for all those involved in working with people with long-term conditions, including diabetes. I feel that I must end with a quote from the book which rings true with all of us – the patient must have “the readiness, ability and willingness to change” and very often, so must we. ■



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Woolston C (2011) *Diabetes and depression*. Health Library, Connecticut. Available at: <http://bit.ly/pf3Czz> (accessed 01.08.11)

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