Coping Effectiveness Training

By: Lena Bradshaw, Zhatavia Davis, Hannah Koontz, Daphanie Florence
Pt. is a 44 yo HM who was admitted with a spinal cord injury as a result of a MVA and is now a T5 complete paraplegic. Pt. is a traveling salesman for a medical supply company and was traveling to a client’s office when he lost control of his car and hit a bridge. There were no other passengers in the car at the time, and the highway patrol charged Pt. with exceeding a safe speed. The car was a total loss. Pt. recalls little about the accident. Pt. is expected to be in the hospital for 3-4 wks. After his time home in Mayberry, Pt. is married and has two children (10 yo and 7 yo sons). His wife has recently quit her teaching job because she is 8 months pregnant and after the birth of the third child was planning on staying at home with the children. Pt. lives a significant distance from the hospital. Pt.’s Leisure Interest: “Tennis, yard work, reading, competitive swimmer in high school, and coaching his son’s soccer team.” Pt. was teary throughout the interview and stated, “What difference does it make about what I used to enjoy?” In a telephone interview with Pt.’s wife she states she is “scared about what changes will have to be made, but if anyone can adapt to the change, it’s our family.” She states that her husband has “been a wonderful role model for the kids on the soccer team.” She admits she is at a loss about how to tell the children that their dad is “paralyzed, and is going to be in a wheelchair for the rest of his life.”
What is the Problem?

- Depression
Goal and Objective

Goal
- Reduce depression that is derived from SCI

Objective
- With minimal assistance from CTRS, pt. will reduce depression by demonstrating coping skills in a non-distractive environment for 1 hr, twice a week for 4 weeks
Explanation of Intervention

- Coping Effectiveness Training is an intervention to help improve coping skills with stress, depression, and anxiety.
  - Each session will be different
- Purpose: Learning how to cope with new injury as well as reducing depression and anxiety. Learning how to be comfortable with new spinal cord.
- Target Population: Patients with new Spinal Cord Injury
Coping Effectiveness Training

Staff Requirements
- Staff to Client Ratio: 1:3
- How Many: 3 Staff and 9 Staff patients
- Requirements: CTRS

Entrance/Exit Requirements
- Entrance: Clients are placed based off their initial assessment showing signs of depression in regards to their injury. Also, patients have to be mental stable.
- Exit: Patients showing signs of effectively coping with depression will be released from program. If patient does not show improvement they will be referred to an outpatient program to further improve coping skills for depression.
Coping Effectiveness Training

- Duration:
  - Patient will receive CET for 60 minutes for twice a week

- Safety Considerations:
  - Mentally patients may become unstable due to group sharing

- Facility and Equipment
  - Intervention will take place in a hospital in activities area
Selecting activity based on goal

- Cl. Needs
- Cl. Outcomes
- Activity content and process
- Cl. Characteristics
- Resource factors
Skills needed to learn and plan group activities

- Therapist/cl. Situation and nature of group
Communication Skills

- Eye contact
- Non Verbal Body Language
- Active Listening
- Facial Expression
- Cognitive Content
Instructional Techniques

- Blooms Cognitive Taxonomy
  - Knowledge
  - Comprehension
  - Application
  - Analysis
  - Synthesis
  - Evaluation
Counseling Techniques

- Motivational Interviewing
- Trans-theoretical Model
- Person-Centered
- Behavioral Psychology
- Positive Psychology
Behavior Change Strategies

- Theory of Reasoned action
- Theory of planned behavior
During the pt. 4 wks in the hospital, CET was implemented for 1 hour twice a week. RT transported pt.’s to the reserved program room in order to facilitate CET.
Reflection
References

