



# Person-Centered Care: Selfhood & Strengths

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Person-centered care is a cornerstone of the <u>Dementia Care Practice Recommendations</u> developed by the Alzheimer's Association. And there is a growing awareness among dementia care practitioners that person-centered care empowers caregivers to focus on a resident's strengths, rather than thinking of dementia in terms of "disability".

As outlined in the blog, <u>Understanding Person-Centered Dementia Care</u>, key principles include knowing the person who is living with dementia and accepting that person's reality. Meaningful engagement and authentic, caring relationships are key as well—all within the context of a supportive community.

#### Focus on selfhood

At its core, person-centered care honors selfhood. Understand that "some of the most disabling effects of brain disease are to be found not in functional impairment but in the threats to one's self and personhood," as explained by <u>Fazio et al.</u>

"Selfhood is much more than memory," they point out. It comprises values, beliefs, interests, social framework, and other elements that define personal identity. In daily activities, caregivers can give respect and space to the things that matter to the person living with dementia, whether that be gardening, nature, music, painting, or any other interest.

"It is essential to understand what quality of life means to that particular individual and what's most important to the individual at the time," explains geropsychologist Latrice Vinson, who directs the Aging Portfolio for the <u>American Psychological Association</u>.

Vinson outlines the role that <u>geropsychologists</u> can play in identifying what matters and enhancing quality of life for people living with dementia.

### Reduce "disability"

Design of the environment, opportunities for social interaction, and even drug regimens can have an impact on an individual's functionality. Mast and colleagues contend that personcentered care is the only way to address "social, environmental, psychological, or pharmacological factors that increase disability and dependency in a person with dementia."

The Reducing Disabilities in Alzheimer's Disease (RDAD) program is one of the models practitioners have been using to support and maximize functionality for people living with dementia in the community setting. It combines tailored exercise with what are termed "pleasant events" to help individuals engage in activities that have meaning to them based on their personal interests.



## Person-Centered Care: Selfhood & Strengths continued

#### **Recognize strengths**

Hand in hand with steering clear of a "disability" model is the concept of recognizing a person's strengths. DiGasbarro and colleagues favor applying principles of positive psychology to dementia care. They explain the idea as "balancing the negative, symptom-based view of people with dementia with better understanding of strengths and positive behaviors exhibited by people with dementia."

Explains Elisabeth Lindley, a nurse practitioner at Memory and Brain Wellness Center, University of Washington, "I've seen amazing strengths emerge in people who have memory loss. Some people with dementia have a higher awareness of the emotions of those around them and can respond in very caring and thoughtful ways." Recognizing strengths honors the multi-dimensional aspect of selfhood and opens opportunities to thrive.

### **Understanding triggers**

Individual triggers for specific emotions and behaviors can stem from personal identity, explain <u>Kim and Park</u>. "The person-centered approach may provide the best interpretation for why such symptoms appear," they add. Through knowing the individual, LTC staff can be equipped for challenging behavioral situations.

It boils down to "relationship-based care," which they explain is "particularly important for individuals with dementia who are institutionalized for a long term." Nurturing the relationship keeps channels open for understanding what is causing stress to an individual and seeing how to provide reassurance, redirection, and comfort. While getting to know and honor each person requires investment from staff, this approach increases social engagement, with a positive impact on residents and staff alike.

The investment is not exclusively about time or staffing ratios. Going back to <u>Kitwood</u>, whose work forms the foundation of person-centered care, two simple ideas that can help staff are:

- Keep the focus on the person who is receiving care.
- Focus less on what is done and more on how it is done.
- Benefits of person-centered care



## Person-Centered Care: Selfhood & Strengths continued

Fazio and colleagues summarize the benefits of person-centered care:

- Improved quality of life
- Decreased agitation
- Improved sleep patterns
- Reduced depression (which in turn may slow deterioration)
- · Maintenance of self-esteem
- Improved working conditions for staff

Bringing the concept alive is not always easy. It requires aligning values and priorities across the organization, developing guidelines and assessment plans, and providing sustained staff training and support. It involves removing barriers to thriving, which include inappropriate use of antipsychotics. A holistic approach used by the multidisciplinary GuideStar team promotes the dignity and functionality of each person living with dementia. How can we help you advance person-centered care? Feel free to reach out.

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