Emotional Well-being Conversation Guide

developed and tested by specialist Clinical Psychologists

For some patients the prospect of intermittent catheterization (IC) can be overwhelming and they view IC as a life-limiting change which emphasizes their sense of disability. This is associated with poorer emotional well-being and reduced adherence, impacting prognosis.

Research shows that when a patient is accepting and confident in their understanding and use of IC, it becomes a positive step towards independence and control, leading to less distress, better adherence, and higher self-efficacy.1

The journey of successful adjustment can differ, but these key elements are important.^{2,3}



Accepts the need to catheterize



Accurately understands the process



Views IC as a positive step towards independence & control



Successful adjustment, less distress, good illness management, & high self-efficacy

Gauging the patient's current stage in their IC journey

It's important that both you and your patient gauge their relationship with IC, including ambivalence.



Assess acceptance levels of the need to IC.

Assess their level of understanding and confidence in the process of IC.



VALIDATE

Summarize your understanding about their current experience.

Reinforce any positives the patient has expressed.

Address any practical barriers.

EMPOWER

If the patient is ambivalent about IC, signpost to Convatec me+ Continence Care Emotional Well-being.

For practical barriers, signpost to Convatec me+ Personalized Video Guide.

For example

"On a scale of 0 -10, how on-board are you with catheterizing?" 0 (not at all) - 10 (completely)

"On a scale of 0 -10, how confident are you in your ability to catheterize?" 0 (not at all) - 10 (very)

For example

0-1: "It's hard to start IC; there are lots of things that can make it difficult. I'm going to share some things to move you up the scale - is that ok?"

2-5: "Many patients start off feeling this way. I'm curious, what makes it 2/3/4/5 and not a 0?"

6-8: "That's great. What do you think could help you move up the scale?"

9-10: "That's great. It sounds like you are feeling good about IC."

For example

"It might help to hear from some people who have been in similar situations. This website has stories from a variety of people who IC."

"All the difficulties in catheterizing & things that affect confidence are addressed in this resource."





Guiding the way to confident living with intermittent catheterization

Moving towards adjustment

You can nudge your patients towards adjustment to IC by validating their experience, normalizing their concerns, and helping them see that the situation is changeable.

Empathize and summarize what you've heard without judgement. You don't need to fix it, you've already "intervened" positively by asking. Just acknowledging their experience, makes **patients feel heard and appreciated.**

By acknowledging that this is something worth asking about as a healthcare professional, you are doing an important thing; giving them permission to recognize the emotional impact. This facilitates "approach" versus avoidance coping, which is **better for health outcomes and overall emotional well-being.**¹



ASK

Ask your patient a

question to grant

permission in difficulties

they may be experiencing

emotionally.

They may not yet be aware

of them or accepting of

them.

Make patients feel heard by acknowledging, empathizing &

Crying and expressing emotions can be really healthy.

summarizing.

Normalize that many people have experienced similar difficulties. If appropriate, share successes from other patients.

Highlight that change is possible.



EMPOWER

Only after validating and acknowledging, provide a window of hope through words and signposting.

Signpost to Convatec me+ Continence Care Emotional Well-being.

For example

"Catheterizing can have a big impact on life and how people feel about themselves

- how are you doing?"

"This can have a big emotional toll, too; how are you feeling about it all?"

For example

"I hear you."

"I'm sorry, that's really hard."

"Oh [name], you're not alone in this - but I know it can feel isolating."

"It's ok to be upset."

For example

"I hear how hard it is now, it can get better. Here's something that I think might help."

"No one talks about the difficulties you're going through, so it can be really hard to figure it out. I think this might be something you find useful to navigate it all."



Convatec me+ Continence Care Emotional Wellbeing

Empower your patients to live confidently with IC through 10 specially created modules designed to support your patients on their emotional journey.

REFERENCES: 1. Smith KA, Bishop FL, Dambha-Miller H, et al. Improving Empathy in Healthcare Consultations-a Secondary Analysis of Interventions. J Gen Intern Med. 2020;35(10):3007-3014. doi:10.1007/s11606-020-05994-w. 2. Shaw C, Logan K. Psychological coping with intermittent self-catheterisation (ISC) in people with spinal injury: a qualitative study. Int J Nurs Stud. 2013;50(10):1341-1350. doi:10.1016/j.ijnurstu.2013.01.009. 3. Adams J, Watts R, Yearwood M, et al. Strategies to promote intermittent self-catheterisation in adults with neurogenic bladders: A comprehensive systematic review. JBI Libr Syst Rev. 2011;9(34):1392-1446. doi:10.11124/01938924-201109340-00.





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