

# Delivering and participating in a psycho- educational intervention in palliative home care

The perspectives of health professionals and family caregivers

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# Aim of the study

- To explore the experiences of delivering and participating in a psycho-educational group intervention during ongoing palliative care from the perspectives of health professionals and family caregivers.

# A psycho-educational group intervention for family caregivers: development

- Psycho-educational design: supportive and educative
- Delivered by health professionals (physician, registered nurse and social worker/priest)
- Intervention manual
- Evidence based knowledge and research
- The theoretical framework of Andershed & Ternestedt
  - Knowing
  - Being
  - Doing



# Structure for the intervention

	Session 1 Group leader (registered nurse) + physician	Session 2 Group leader (registered nurse)	Session 3 Group leader (registered nurse) + social worker, or priest
Main topic for the meeting	Palliative care and symptom management.	Daily life and practical nursing care	Emotional reactions and grief
Examples of content	<ul style="list-style-type: none"> <li>• Palliative care philosophy</li> <li>• Common symptoms and their management</li> <li>• The very last phase of life</li> </ul>	<ul style="list-style-type: none"> <li>• The family caregiver role</li> <li>• Nutritional problems</li> <li>• Helping someone with personal and intimate care</li> </ul>	<ul style="list-style-type: none"> <li>• Individual grief reactions</li> <li>• Coping, hope and resilience</li> <li>• Perspectives on death and dying</li> <li>• Societal support systems</li> </ul>
The participants arrive	The group leader welcomes and participants are offered coffee/tea and snacks.		
Topic for the day (60-90 min)	A professional presents the topic of the day. Participants are invited to engage in a dialogue.		
Reflection (20-30 min)	Participants are invited to reflect upon the topic of the day		
Conclusion and relaxing practice (10 min)	Conclusion and a short relaxation practice guided by the group leader.		

# Setting for the intervention

- Delivered by health professionals at 10 different specialized palliative home care agencies.
- Between 70-200 patients enrolled
- Different diagnoses represented
- Intervention delivery between 2013-2014
- Inclusion criteria



# Design and Methods

- Interpretive descriptive design
- Focus group discussions with 25 health professionals on two occasions.
- Individual and telephone interviews with 13 family caregivers
- Transcription of data
- Framework analysis

# Results – Delivering and participating in the intervention

- An instrument to make family caregivers better prepared
- The intervention manual as a support for health professionals
- A framework for interesting discussions
- Feeling acknowledged as a family caregiver
- Provoking new insights
- Closer relations



# Results – delivering and participating in the intervention

- Preparing for the intervention - time and effort for health professionals.
- Difficulties in identifying family caregivers
- Fear of causing vulnerable family caregivers pain
- The number of sessions

# Conclusions and implications

- Positive experiences of the intervention from both groups
- A suitable theoretical framework
- The need for time and resources
- The intervention potential





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**Thank you for your attention!**

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