



# PSYCHOSOCIAL NEWS:

## The SSCIS Psychosocial Strategy for People with a Spinal Cord Injury Newsletter

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The role of the **psychosocial strategy** is to assist you in gaining the knowledge and skills you need to effectively support the psychosocial wellbeing of people with SCI .

You know and understand what works for you in your practice setting, so your thoughts and ideas can make a difference.

If you have any ideas on what could assist you in your practice, if you would like to be further involved in specific working groups or have any comments about the strategy, your input is welcome! Please contact your representative on the Steering Group to feedback your thoughts and ideas, or contact the Chair of the Steering Committee directly.

### Do you need something more?

For further resources on psychosocial aspects of SCI visit

<http://www.aci.health.nsw.gov.au/networks/spinal-cord-injury/resources>

where you can download the

**Emotional Wellbeing Toolkit—A Clinicians Guide to Working with Spinal Cord Injury**

**Guide for Health Professionals on the Psychosocial Care of People with SCI**

and the

**Directory of Information and Support**

### *Transition from paediatric to adult services for individuals with Spinal Cord Injury* Anne Marie Sarandrea, Clinical Psychologist, Kids Rehab, The Children's Hospital , Westmead

Adolescence is a transitional developmental phase where marked biological and psycho-social changes take place. Adolescents who experience Spinal Cord Injury (SCI) have additional challenges in the transition to adulthood as they deal with adjustment to their changed functioning at a time where the process of individuation and identity formation is occurring (Augutis, Levi, Asplund, & Berg-Kelly, 2007).

Young people with a SCI may encounter difficulties in being able to gain a sense of autonomy and self-sufficiency due to the immense physical reliance on others – frequently parents – for personal care, completing ADLs, and for participation (Hallum, 1995; Rogers, Lee, & Yang, 2007; Zebracki, Anderson, Chlan, & Vogel, 2010).

An eventual goal for young people with SCI is the transition to adult-focussed from child-focussed services and this requires preparation to occur as early as possible during adolescence (ACI, 2014; Viner, 2001). In paediatric services, the management of a health condition such as SCI is often shared. Decision-making is guided by the best interests of the child but often collaboratively made by parents or guardians together with health professionals with the young person gradually having an increased role.

Encouraging adolescents with SCI to be involved in independent decision-making, within their capacity at developmentally appropriate stages, can help to facilitate the development of self-management skills (ACI 2014; Augutis et al, 2007). There are also challenges for the family as a whole. It can be difficult for families to strike the balance between medical and care needs and the emotional and social developmental needs of the young person with SCI (Augutis et al, 2007; McDaniel & Pisani, 2012; Zebracki et al, 2010). The young person and family will require support in navigating these developmental stages and may require additional psychological support and strategies

around both personal and family adjustment. Specialist transition services such as Trapeze, can be engaged for the planned and coordinated move for young people with chronic conditions from paediatric care to the adult health system and can facilitate additional services as required. Refer to resources below. It is important to note that peer relationships play an important role in the identify formation of adolescents as well as promoting the transition into adulthood. Unfortunately, adolescents with SCI may have difficulties keeping previous friendships and making new ones. Peers lack of knowledge of spinal cord injury has been identified as a key barrier (Augutis et al, 2007). It is therefore crucial to provide friends and peers with education about SCI, to encourage visits during hospital stays, and to enable outings and social media connectedness particularly in the early stages of rehabilitation. Increasing opportunities for new friendships to develop may occur by linking into adapted sporting and recreation associations (Rogers et al, 2007).

### Some useful resources

For more information on Trapeze, [www.trapeze.org.au](http://www.trapeze.org.au)

Information on transition: Raising Children Network

[http://raisingchildren.net.au/articles/teenagers\\_chronic\\_health\\_conditions\\_adult\\_care.html](http://raisingchildren.net.au/articles/teenagers_chronic_health_conditions_adult_care.html)

Medical information about SCI suitable for children and adolescents:

[www.medikidz.com/gb-en/medikidz-and-medikit-on-a-new-adventure-to-explain-spinal-cord-injuries/](http://www.medikidz.com/gb-en/medikidz-and-medikit-on-a-new-adventure-to-explain-spinal-cord-injuries/)

### Selected References

Agency for Clinical Innovation (ACI) and Trapeze. (2014). *Key principles for transition of young people from paediatric to adult health care. The Sydney Children's Hospital Network.*

Augutis, M., Levi, R., Asplund, K., Berg-Kelly, K. (2007). Psychosocial Aspects of Traumatic Spinal Cord Injury With Onset During Adolescence: A Qualitative Study, *Journal of Spinal Cord Medicine*, 30 (Suppl 1): S55–S64.

McDaniel, S. H., & Pisani, A. R. (2012). The family dynamics of disability and caregiving for people with disabilities. (pp. 11-28). In R. C. Talley, J. E. Crews (eds.), *Multiple Dimensions of Caregiving and Disability*, 11 Caregiving: Research, Practice, Policy. Springer: NY.

For further information on the work of the Psychosocial Strategy Steering Committee please contact

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## Things you should know about

**THE SCI Pain Course Macquarie University**  
A free Internet– Delivered Program for Chronic Pain and Emotional Wellbeing in adults with a SCI to manage chronic pain and symptoms of anxiety and depression.  
[www.ecentreclinic.org](http://www.ecentreclinic.org)  
Email: [contact@ecentreclinic.org](mailto:contact@ecentreclinic.org)

**The SCI Pain Course at Greenwich Hospital**  
[www.greenwichhospital.com.au/services/pain-management/program](http://www.greenwichhospital.com.au/services/pain-management/program)

## The SSCIS Psychosocial Steering Committee

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- ◆ Catherine Ephraums, Clinical Psychologist, Spinal Injury Unit, Royal Rehab
- ◆ Dallas Pirronello, Occupational Therapist, Spinal Outreach Service, Royal Rehab
- ◆ Beverley Berelowitz, Social Worker, SIU, Prince of Wales Hospital.
- ◆ Neil McKinnon, Manager, iCare, NSW.
- ◆ Garry Kent, Vocational Projects, iCare, NSW.
- ◆ Helen Tonkin, Social Worker, RNSH
- ◆ Sky Fosbrooke, Physio, Rehabilitation Paediatric Services Children's Hospital, Randwick
- ◆ Anne Marie Sarandrea, Clinical Psychologist, Kids Rehab at The Children's Hospital at Westmead
- ◆ Mathew Smith, Social Worker, Paraquad
- ◆ Chris Nicholls, General Manager, Head of Operations, SCIA
- ◆ Rob Wynn, Peer Support Officer, SCIA

Associate: Ralf Ilchef, Consultation Liaison Psychiatrist, RNSH

Welcome Jaime Barlin, Social Worker, Hunter NE Spinal Cord Injury Service

## The Emotional Wellbeing Toolkit A Clinicians Guide to Working with Spinal Cord Injury

**The Toolkit** is available as a pdf on the ACI website: [www.aci.health.nsw.gov.au/\\_\\_data/assets/pdf\\_file/0005/326435/spinal-emotional-wellbeing-toolkit.pdf](http://www.aci.health.nsw.gov.au/__data/assets/pdf_file/0005/326435/spinal-emotional-wellbeing-toolkit.pdf)

**The Brief Psychosocial Clinical Assessment Tool:**

an assessment sheet to be used in conjunction with the Toolkit and is available at [www.aci.health.nsw.gov.au/\\_\\_data/assets/pdf\\_file/0012/327999/Brief-Psychosocial-Clinical-Assessment-Tool.pdf](http://www.aci.health.nsw.gov.au/__data/assets/pdf_file/0012/327999/Brief-Psychosocial-Clinical-Assessment-Tool.pdf)

## iCare Grant for workshops

iCare (formerly LTCSA) has provided the Psychosocial Steering Committee with a grant to conduct several workshops in metro and rural centres to introduce the Emotional Wellbeing Toolkit to Case Managers and Coordinators and to enhance psychosocial skills.

## REMEMBERING ALEX OMMANNEY

Alexander Ommanney, Social Worker with the NSW Spinal Outreach Service (SOS), Royal Rehab suddenly passed away in January aged 42.

Alex was a passionate and committed social worker, working for over a decade in the NSW State Spinal Cord Injury services; initially at Prince of Wales Hospital SIU then joining SOS 4 years ago. He was a quiet and humble man, but a very skilled and well respected clinician.

Alex is missed dearly by his colleagues and friends, and we hold his family in our thoughts at this tragic time. His contribution to Social Work, to the State Spinal Cord Injury Services and to Royal Rehab will be remembered with gratitude.