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Social Work with Biography The Care Concept of Böhm Presented by the Example of Haus St. Elisabeth, a Retirement Home from Caritas St. Pölten

Resumen

Workshop desarrollado durante la celebración del I International Simposium Challenges en Active Ageing, celebrado en Málaga entre el 23 y el 27 de abril de 2012.

Este congreso fue organizado por la Facultad de Estudios Sociales y del Trabajo de la Universidad de Málaga, dentro de los actos del Año Europeo del Envejecimiento Activo y la Solidaridad Internacional. La RevistaeSalud.com ha querido apoyar este evento publicando los abstracts y resúmenes de las principales conferencias y convirtiéndose en el medio oficial de este Simposium.

Abstract

The Caritas St. Pölten offers a variety of different social services in almost all fields of social work. The "HAUS ST. ELISABETH" is a retirement home and has one particularity: one compartment works with the psychobiographical nursing concept of Prof. Dr. Erwin

Böhm. This is also certified by a certificate of the ENPP = Europäisches Netzwerk für psychobiographische Pflegeforschung (European network for psychobiographic nursing research)

<http://www.enpp-boehm.com/de/startseite.html>

Prof. Erwin Böhm was born on 16th in May 1940 in

Austria. He learned car mechanics and did his nursing diploma in 1963. He worked in mental health care, mainly in gerontopsychiatric care. He created a theory of nursing with the aim to re-activate people with dementia and seniors with unusual behaviour. He was an opponent of the "warm – well feed – proper" nursing of those days. He is convinced, that to know the patients biography is the way to understand her/his needs and characteristics (Erwin Böhm 1988). Böhm developed his nursing concept/model for patients with gerontopsychiatric disorders. He is one of the researchers concentrating on psychology, psychoanalyses and different psychotherapeutic device e.g. the Logotherapie of Viktor Frankls.

The daily life and normality for the patients is one of the core issues of Böhm's nursing concept. The carer has to know the individual and collective biography and the coping strategies from all persons he/she works with. The all day life of the housing service is oriented by the habits of the service user, the daily routines and the seasons also all celebrations.

The Theory of Böhm is based on his understanding of Dementia and the specific interaction of patients with Dementia. Seniors coming in a housing place are "dis – placed" and disoriented, to cope with this situation they use there strategies. Aging is a regressive process of psyche and soul, when mental degradation starts people went back to the characterising phase of the age of 25 – 30 years. What they used that day to deal with problems and life events they learned and this is security giving for them. So it is important to create an atmosphere of those days in a senior residence – beside the personal furniture people can bring with them (in some places). The aim is to maintain independence, self-reliance, self-sufficiency and social competence as long as possible.

Reactivating care is more than activating car. It do-

esn't mean to support people to exercise some activities by there own. It means to do some "reanimation of the soul of elderly people". The interpretation of the unique thymopsychological biography controls the action of carers. (Thymos = vitality; it means the emotional part of psyche vs. noopsyche, cognitive).

Seniors should stay as long as possible self-reliant and should keep there social competence. It doesn't mean that they stay physically active but mentally and psychologically – they should think, feel and decide as long as possible for their own.

Böhm differs seven emotional accessibility levels or levels of interaction in an hierarchical order:

1 – Socialisation (Sozialisation)

The adult person. Live long learning is possible. The rules and standards of society can be adapted. It is important what the primary, secondary and tertiary socialisation was

2 – Muther wit (Mutterwitz)

Youth and adolescence is the focus behaviour and feelings, the person can be reached with activating care

3 – Psychological and social basic needs (Seelische u. soziale Grundbedürfnisse)

At the age of 6 – 12 years, many habits and skills the person had have changed and disappeared

4 – Imprints (Prägungen)

Also at the age of 3 – 6 years, rituals and never ending attitudes give security to the older person at this level

5 – Drive (Triebe)

At the age of 3 – 6 years, drive, drove wishes and daydream moves people, the question of demanding and encouraging has to be placed at this level

6 – Intuition (Intuition)

The baby and infant, emotions, fairy tail, superstition and religion are important for the people

7 – Basic communication (Urkommunikation)

the emotional access must be those of a baby, also the physical capacities are restricted

The biographic assessment is for the psychobiographic nursing concept very important and is also needed to scale the patient in preceding interaction level. The level leads the interaction from carer and patient – the work in the relationship is required. (Beziehungsarbeit)

The Stories are important, they give the information about coping strategies and personality and characteristics of the patient. Helpful questions for the Böhm concept:

"When and where is the patient born?"

"Where did she/he spent his youth?"

"What can she/he say about the Family and her quantity, dynamic and atmosphere?"

"What about her/his sib ship?"

"What profession did the patient has?"

"In which society and environment did she/he live?"

"Hobbies"

"Emotional experiences and life events +/-"

"Partnership, marriage"

"Children"

"Destiny"

The Caritas Haus St. Elisabeth is located in St. Pölten, not so far away from the inner city.

<http://www.caritas-stpoelten.at/hilfe->

einrichtungen/betreuen-und-pflegen/pensionisten-und-pflegeheim-haus-st-elisabeth/

There are different departments, one works with the care concept of Erwin Böhm. The idea of individual care and nursing is part of the whole centre.

To cross over the gap between nursing and social work I'd concentrate now at social work standards:

- the expertise for the problem and difficult situation has the service user – the social worker leads the process
- the aim is to keep self-confidence and self-regulation and to support the problem solving process
- people react with coping strategies they learned along life ...

The importance of working with biography can't be overseen! Therefore exists also in social work manuals to create the important life story – one of them is the biographic time blacen (Biographische Zeitbalken). It is a cooperative method to get an overview about the real (time conform) biography of a person in different important life sectors.

Age (Alter)
Year (Jahr)
Family (Familie)
Housing (Wohnen)
Education (Schule/Ausbildung)
Work (Arbeit)
Delinquency (Straffälligkeit)
Health (Gesundheit)
Help and Treatment (Behandlung + Hilfe)

(<http://www.pantucek.com/soziale-diagnostik/verfahren/231-biographischer-zeitbalken.html>)

The theory of Böhm and his psychobiographic model can also have an impact in social work practice and could support the understanding of service user's behaviours.

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