



Painful
Conversations

INTRODUCING
PSYCHOLOGY SERVICES
TO YOUR PATIENTS

HEALTHY MIND PSYCHOLOGY UK

Welcome

I'm Dr Amber Johnston!

In addition to being the founder and director of Healthy Mind Psychology, I am an accomplished Clinical Psychologist, Neuropsychologist and Pain Psychologist with trauma specialty.



I am passionate about enhancing widely accepted knowledge to better understand components of psychology not often talked about and to break the stigma around individuals who seek guidance to support their mental well-being.

I know that introducing psychology services to patients following injury, trauma or chronic pain can be tricky. It's a conversation I've had myself hundreds of times before! In this guide, I'm sharing my insight on how best to approach it so that you patients feel supported and open to exploring holistic approaches to managing pain.

Amber

Resistance

Let's start with the why! Why might patients resist psychological involvement?

There are a whole host of reasons why our patients might feel less than enthusiastic about accessing psychology services as part of their journey in dealing with injury, trauma or chronic pain.

Much of this is down to misconceptions about the role psychology can play, the stigma attached to psychological involvement or unhelpful messages that they've heard in the past:

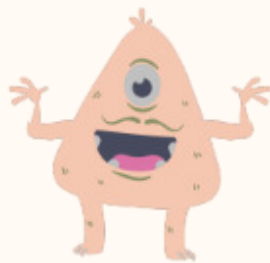
- They feel their problems aren't 'bad enough for therapy'
- They fear diagnoses and labels or being "blamed"
- Stigma attached to societal and cultural views, especially within certain populations
- Lack of awareness about how it can help or perceived ineffectiveness of therapy
- Denial of difficulties, self-reliance or independence
- Fears around opening up, lack of readiness for change
- Mistrust of professionals -previous negative experience
- Perceived logistical barriers

Unhelpful Messages

Pain patients rarely actually hear a medical professional say, "It's all in your head." But they will hear other messages from them that feel similar...



"Good news is... there's nothing wrong!"



"It must be stress."



"Hmm... are there other things going on for you?"



"Really, that treatment should have worked..."



"You may have to learn to live with this."



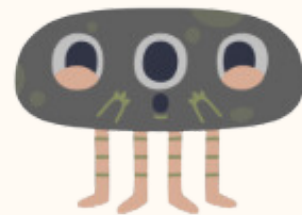
"I'm going to refer you to a psychologist."



"Just try not worrying about it."



"You shouldn't be experiencing that..."



"There's nothing more we can do."

Why psychology?

Why does psychology need to get involved at all when it comes to chronic pain management?

From a really early age, we are taught that pain *must* mean we've hurt or damaged something. As kids, we fall over, or get a cut, or a scrape, and it hurts ... and then it gets better.

That's what we've learnt about pain and that's likely what your patients' expectations will have been around recovery. When you're supporting a patient through an acute pain issue, this makes a lot of sense and it is often the case that we *can* expect a clear trajectory of getting better.

But, when it comes to chronic pain, this might not always be the case, and this is where the definition of 'pain' - and your patient's understanding of what it means - is so important.

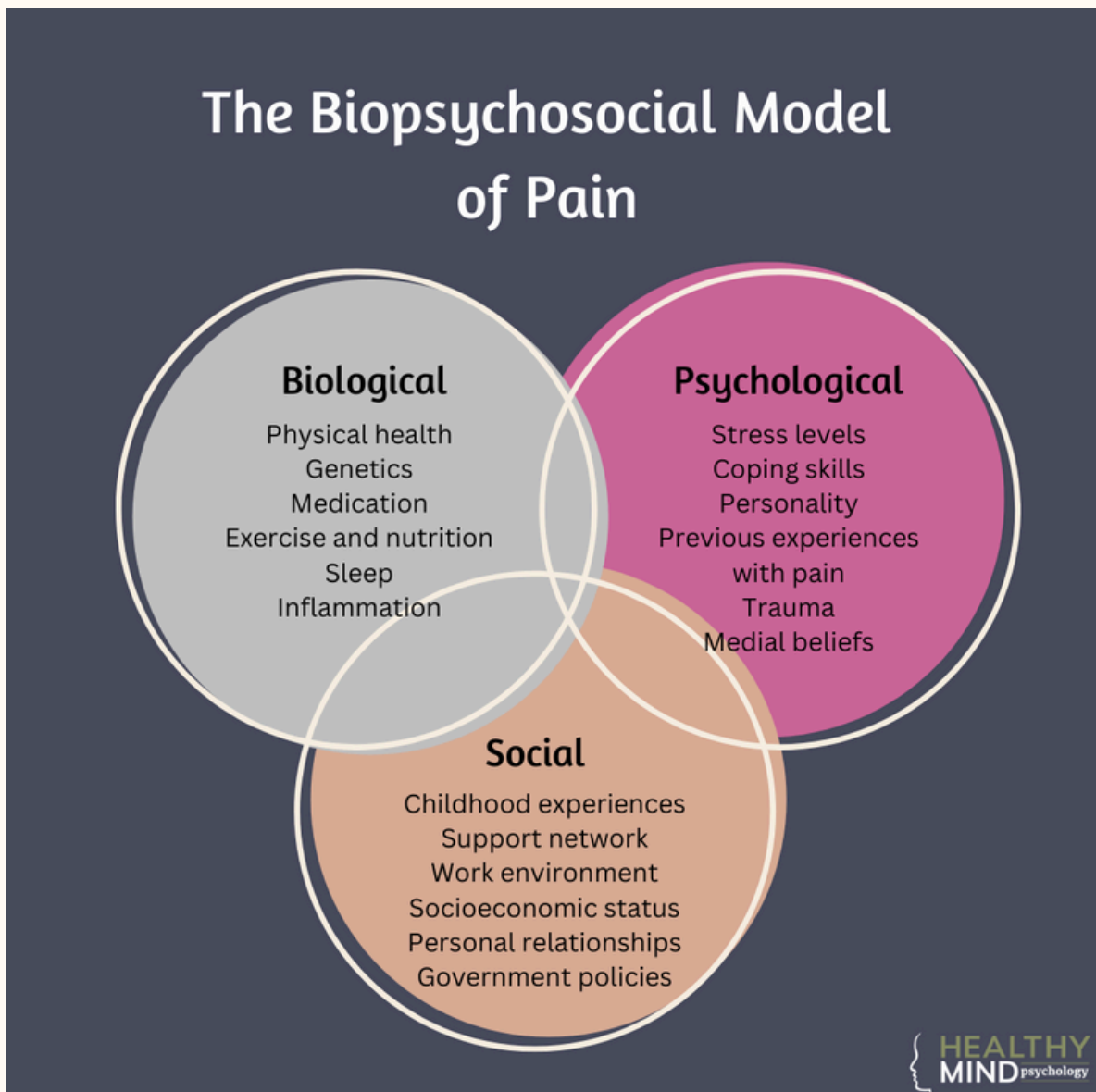


Defining Pain

Real or perceived damage or injury can make a big difference in us understanding what's going on inside of our body. The idea that we don't have to have a mechanical issue, tissue damage, or break of the skin or the bone in order to actually feel pain challenges us to think about, and define, pain in a very different way. When our patients find themselves caught in the misconception that pain equals physical damage, they can find themselves chasing something else in explaining their pain experience.

Biopsychosocial Model

The biopsychosocial model of pain takes into account things across your patients' life systems that could be exacerbating or influencing those pain signals, exploring the complex interactions between biological, psychological and social factors.



Emotions and Pain

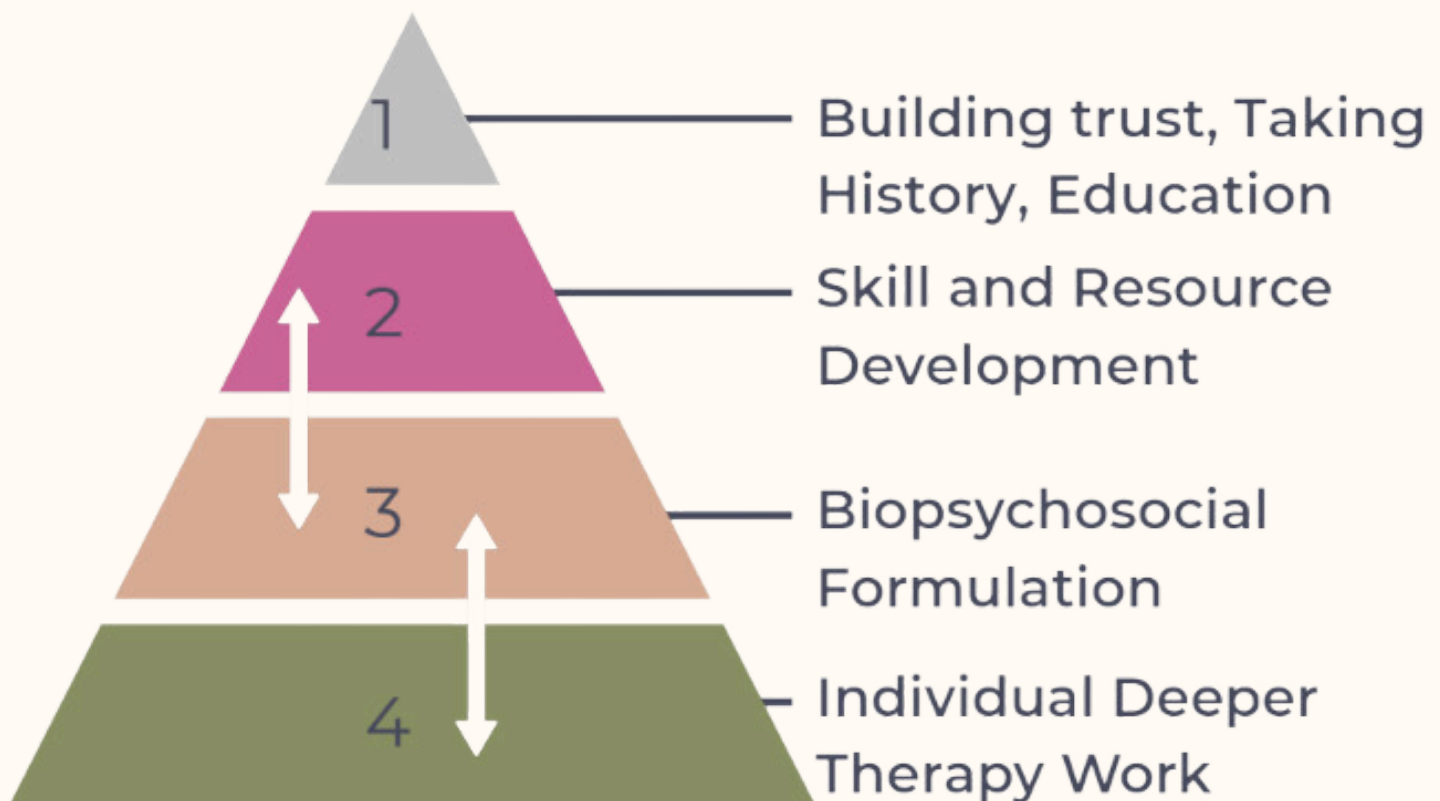
There is a clear relationship between distressing emotions and increased sensitivity to pain signals. Emotions are a communication tool: the body's way of letting the brain know that something isn't right. If your patient is experiencing negative emotions and feeling stressed, their body might be hyper 'in tune' to what's going on inside and so the pain signals they're receiving are amplified. They might find themselves in a feedback cycle, as the emotional response to pain signals makes everything feel worse:



How Psychologists Help

What Psychologists DO for pain management?

There are four layers of treatment included in the therapy triangle:





What to say

Introducing psychology services to our clients following injury, trauma, and chronic pain can be difficult. I know - because I've had this same conversation myself hundreds of times with patients who are referred to me for psychological services. I'm well versed in explaining the role that psychology plays in dealing with chronic pain, as well as offering patients reassurance and support (and VALIDATION!) on their unique journeys. Here's my advice on how to approach those conversations...

Painful Conversations

- Address concerns, misconceptions, and provide education about psychology, explain your faith in the benefit of this work including some info about what happens.
- Use your relationship with the patient to influence, and normalise getting help in this process
- Lead with validation and compassion
- Find relationships with dependable, flexible clinicians who communicate well - be collaborative and show the client this strong working relationship
- Plant seeds and allow time for processing. You may encounter many cases where someone is not motivated to participate - when this happens, it's not advisable to push but instead normalise.
- Stick to the values of choice, respect and autonomy
- Offer options. This may mean a client needs to trial a few options to find a clinician with a natural rapport
- Different treatment types may be appropriate at different points in the journey e.g. some stay with a clinician longer term, others go to different types of clinicians for different presenting problems that gain significance as the journey goes on

Reassure

Here are some key takeaways to reassure your patients:

- We know that your experience of pain is very real and may be the result of real damage. This journey is about finding holistic solutions - not about quick fixes.
- We know that you're doing so much already, whilst experiencing exhaustion and pain. We're here to support you, not to add so much more to your plate.
- This is not an overhaul of your life. We'll start small, making little adaptations to change one thing at a time.
- We'll find solutions that are most relevant or important to your life - that's where we'll begin.
- This is about empowerment and individuality ... let's find some new ways to begin a treatment plan that's special and specific to you.

Our patients need to feel heard, believed and supported to find the right solutions for dealing with chronic pain. Solutions need to feel holistic, adaptable, individualised and relevant.



— Help and Support —

If you work with patients who are living with chronic pain or other chronic stress conditions, [Healthy Mind Psychology](#) offers guidance and strategies to empower individuals to manage their response to pain or other symptoms, whether that's the signal itself or all the implications these symptoms have on one's overall quality of life - please reach out for more support and advice in managing these difficult conversations to give your patients the very best care.



Open up the
conversation!

www.healthymindpsychology.co.uk