INTRODUCTION

Many years after a war, some aging veterans find themselves fighting a new battle as they strive to cope with delayed onset post-traumatic stress disorder (DOPTSD). Frueh, Grubaugh, & Magruder (2009) concluded that according to the DSM-IV symptoms that are exhibited more than six months after the index trauma meet criteria for DOPTSD. The newer edition (DSM-V) that is used for this project pays more attention to the behavioral symptoms that accompany PTSD and proposes four distinct diagnostic described as re-experiencing, avoidance, negative cognitions and mood, and arousal (American Psychiatric Association, 2013). For aging military veterans who have post-traumatic stress disorder, activities of daily living, particularly bathing, can be an improbable, exasperating, and stressful task. This translational project is an evidence-based bathing care standard created for caregivers who have been experiencing the challenges to achieve “bathing without a battle.” Agitated and aggressive behaviors tend to manifest more often during bathing than at any other time (Cohen, 2007). This project translated the body of nursing science known as “bathing without a battle” for veterans who have dementia to those elderly male military veterans who have DOPTSD. Maladaptive behaviors such as kicking, hitting, hitting, scratching, throwing objects, spitting, and cursing were measured (See table 1). The routine and environment were changed implementing patient-centered care interventions.

PURPOSE

The purpose of this translational project was to use nursing research in the implementation of a best practice bathing care standard specifically designed for the vulnerable population of male veterans who have lived in long-term care facilities and residential settings. The body of research evidence guiding this project is the Bathing Without a Battle (BWOB) learning tool for long-term care nursing personnel and families who have been affected by Alzheimer’s disease and related dementias.

“...bathing without a battle” for veterans who have dementia to those elderly male military veterans who have DOPTSD. This care standard was developed to assist caregivers of veterans who have DOPTSD and their caregivers’ focus on the needs and skills of veterans who have lived in long-term care facilities and residential settings.

METHOD

This project used a descriptive design to focus on the needs and skills of veterans who have DOPTSD and their caregivers’ abilities to give and receive care, love, and compassion. A care standard was developed to assist caregivers of veterans who have DOPTSD. This care standard drew upon the BWOB literature defining the connection between PTSD and dementia. The concepts of DOPTSD and implications with bathing issues, factors that put specific veteran populations at risk, and evidence-based practice improvement interventions were discussed. Program attendees caring for veterans in a Hospice Program were asked to implement learned techniques of person-centered care (PCC) approaches for managing bathing challenges of their elderly male military veteran clients who have DOPTSD (See figure 1).

RESULTS

Of the 12 hospice CNAs recruited, 10 (83 %) were excluded from the final analysis because they did not complete the whole program. At the completion of the project, 2 (17%) CNAs completed 17 showers of veterans. This project measured the behaviors of 17 elderly male military veterans meeting the criteria of delayed onset post-traumatic stress disorder (DOPTSD) during bathing. Results reflected an effective means to improve the bathing experiences of veterans who have DOPTSD and who live in long-term care and residential settings.

CONCLUSIONS

This evidence-based translation project will provide a basis for future study in improving the experience of bathing for veterans and their caregivers, developing de-escalation skills for caregivers, and recognizing environmental stimuli that can elicit maladaptive behaviors. By changing the bathing routine and environment and developing trusting relationships with caregivers, these veterans may be better able to adapt to bathing so that it will no longer be a battle.

REFERENCES