

In Class Writing Portfolio

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Introduction

The following portfolio is a collection of reflections discussing the topics we covered in our Nursing 422 Care of Adults with Chronic Conditions class. Each assignment explores a different topic and gives insight into the patients living with that chronic illness. The portfolio begins with a short essay on my perspective of what it means to be a nurse. The next page investigates what it would be like to write while living with osteoarthritis. Various other topics are discussed, such as obesity, empathy, and sexuality. The portfolio concludes with a quick write on the role of caregiver and patient's living with dementia. Enjoy the following collection.

Nursing for Dummies

Jennifer Javiet

Quick Write #1

Being a nurse is being someone who wants to help people. Above all things, they are compassionate and want to advocate for others. A nurse is strong, empowered, knowledgeable, and guide thinking. The decisions we make and actions we do will greatly impact our patients' lives. A nurse doesn't do her job for recognition or for money, but rather for that "feel-good" feeling of helping others. She is there to comfort families going through hard times and support patients when they are most vulnerable. A nurse is the backbone of the healthcare system. They are the ones carrying out all the orders and they are the ones spending the most time with patients. They develop impactful relationships with the people they care for and truly change lives.

The Diary of Dwayne the Rock Johnson: Sticky Hands

This is a really hard exercise. Today I want to cook dinner and see my son. We also want to decorate the house with Halloween decorations.

This is challenging and it hurts my hand to write like this.

I'm switching up the way I am writing now. I want to make a goal to try writing in cursive. It is easier. It's more elegant. I feel like my handwriting is the same as my 8 year old son.

Armor of Twinkies

Quick Write

Rachel has experienced pain and trauma in her life. She was involved in sexual abuse and has now put on weight, defined as "defensive weight". This phenomenon helps survivors of sexual trauma feel unattractive, and ultimately safer. To approach Rachel I would ask her if she is currently happy at her current weight. If being larger/ weighing more brings her security, then I wouldn't want to just assume she hates her weight. If she expresses a desire to change I would assist her with resources.

It is best to fully understand the culture and mindset of your patient before making assumptions. It would be important to discuss with Rachel the benefits of weight loss and different safety measures she could use to cope w/ psychological trauma. Helping Rachel get to the root of her issues would be the most beneficial.

• What does your weight mean to you? (it's my armor).

Taco Tuesday

While working with Elsa, an 80-year-old woman who comes from a Hispanic background, I would need to consider cultural implications. She consumes 8 flour tortillas a day, which is contributing to uncontrolled blood sugar due to her diabetes. I would start off by talking with her and asking about her relationship with food. How does food make her feel? What does she love to eat? This is how I can develop an understanding of how she values food. Then I would ask her to estimate how many carbohydrates she eats in a day. After that, I would tell her how many carbohydrates she is eating; upwards of 90g alone just on tortillas. I want Elsa to realize that eating this many carbohydrates is bad for her body and that she will need to reduce the amount she eats. I feel like I can empathize with her because I am constantly struggling to control my carbohydrates to lose weight. It isn't an easy task, and mistakes are going to be made. It is important to make progress, not perfection. I would help her find a balance of food she can enjoy and highlight the foods she likes that have low calories. There are lots of alternatives to flour tortillas that yield lower carbohydrates. If she is unwilling to compromise, I need to instruct her on moderation. I would let her know that she can still enjoy eating and it can still be a social activity. She just needs to be more conscious of what she is putting into her body and how that is affecting her health.

What is Normal Anyway?

I think by establishing rapport with the patient it will be easier to talk about sensitive subjects. It's important to come from a non-judgmental place when asking questions about sexuality. Never make assumptions about whom a person is attracted to or what their sexual identity/ gender is. Be compassionate with the patient and open to new ideas. I feel that I will be comfortable discussing issues about sexuality. I have a brother who is transgender, and my cousin is a sexual education counselor. Both of those people have educated me immensely on gender fluidity and awareness of different sexual identities. I know that I can always reach out if I am struggling with a concept regarding this topic. Also, doing this type of questioning on a regular basis will help me become more comfortable with it. I am very involved with the LGBTQIA+ community and consider myself an advocate for human rights. I will always be accepting of patients who identify outside of "normal" parameters and will never judge a person based on their sexuality or gender.

Ruminations: The Ballad of Connor Oberst

In the video we watched in class today, a woman was struggling with caregiving for her husband. He suffered from dementia, and she mourned the loss of her old life. She was nostalgic for times when her husband was well, and her friends and family were around. She was debating whether she should move but didn't want to move because he doesn't like the weather where the rest of her family resides. I would help Emerald by actively listening to her. It seems like she misses a dear friend who passed away due to atrial fibrillation. She misses having someone to talk to and relate to. She is under so much stress caring for her husband and can no longer leave the house without worrying about his safety. She needs psychosocial support. She also might want to go to counseling or a support group for caregivers. Another thing I would recommend for her is an antidepressant medication. She is going through a hard transition in her life and could benefit from the combination of therapy and medication. It might be beneficial for her to have more familial support. Even if the move is only temporary, she could greatly benefit from having family nearby to help relieve the workload of caring for her husband.

Conclusion

After investigating what it would be like to live with various conditions, I gained a lot of insight. I obtained an understanding and collated an empathy for future patients. Whether it be a patient who struggles using their extremities due to osteoporosis or a patient struggling with an eating disorder. It was incredibly valuable for me to put myself in their shoes and discover what their perspective looks like. As the course progressed, my thinking evolved, and I was able to better comprehend the struggle of living with a fulltime illness. Where I was able to participate in these writings and then disconnect from the illness afterwards, my future patients will not be afforded that luxury. I feel fortunate I was able to reflect on these topics to culture my future practice as a nurse. I hope you enjoyed the collection, and it has made you think about the comforts we are allowed daily when we don't have to struggle with chronic illness. From discussing caregivers to nurses, and gauging topics on sexuality and empathy, my knowledge has grown.