

Current Psychiatric Mental Health Nursing Theories and Practice Journaling Assignment

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I find myself both intrigued and anxious about the upcoming lectures and clinical experiences that we are going to encounter throughout this module. Psychiatric mental health encompasses a vast array of patient populations, and has such a large spectrum of disorders associated with it. It is honestly quite daunting, both in learning the material, and being submerged into the care of the patients. I would like to say that I will dive in without the blinders of bias on, but that would be dishonest. I know that I myself have preconceived notions and judgements toward certain mental illnesses, and those that are affected by them. I find myself uncomfortable with not being able to reconcile how some persons are afflicted with certain psychiatric disorders and the fact that I have been fortunate enough to not have ever had to experience that kind of obstacle. I think that sometimes it is easier to write it off as a choice they have made, especially with addiction, rather than see it as a mental health issue. What is the most concerning to me, is that during clinicals I am going to be face to face with human beings that are sick, but it isn't something that necessarily we can put a band-aid on, or perform a surgery to cure it, but rather for many of them, they will be fighting a life long battle of trying to manage their illness. This fact absolutely crushes my heart.

I personally have not had to deal with psychiatric illness, but I have several family members that do struggle with it. My mother was an alcoholic that struggled with depression. She would wake up drinking and wouldn't stop until she passed out. She was married 8 times, and I am the oldest of her five children. Starting when I was around 13 years old, I became her emotional support, and I also took on the role of the shield for my younger siblings. Her inability to cope with life in turn shaped our relationship into something that was not what the traditional parent-child dynamic. I feel like I had to grow up before my time. On the other hand, three of my

youngest siblings seemed to affected the opposite direction. My sister was sexually assaulted at a very young age by men that would party with my parents. She became a drug addict in high school, she was diagnosed with bipolar disorder when she was 17. She was sexually permissive, cutting herself, and had attempted suicide. At 28 years old she overdosed on heroin and almost died. Unfortunately, that was still not rock bottom for her. She was off and on meth and other drugs until she lost custody of both of her kids. She has been sober for over two years now at the age of 37. I used to get so upset with her, I didn't understand how she could choose getting high over her kids and her family that loved her. I listened to her, but never really heard what she was telling me. I was a very judgmental Christian, which is not Christ like at all. I was hurt that I couldn't have a normal sister relationship with her. I was angry because I couldn't, or wouldn't understand how we could have grown up in the same cess pool of a family and she made the choice to try and drown it out with drugs instead of living a normal life like my other sister and myself did. My younger brother went off of the deep end when our mom passed away in 2012. For almost 9 years I had constant anxiety that he was going to kill himself on purpose or accident. He would call me all hours of the night, and I would have to talk him down off the ledge from 400 miles away. My youngest brother has been in and out of juvenile detention, jail and state prison for drugs and all the things that come with it since he was 13. Mental illness is so complex and so underserved in the health care world. It not only affects those who have the disorders, but also their families and friends as well. There is so much stigma attached to it, and not enough resources in my opinion.

The expectations that I have for myself during my lecture and clinical time is that I will have a better understanding of psychiatric disorders and their causes, and that I will become

more tolerant and less scrutinizing of those afflicted with them. I especially want to go into the clinicals with an open mind so that the interactions that I have with the nursing staff and patients to help shape me into a competent nurse so that I can serve with a higher level of care. I would like to learn the different types of treatment options, and how successful they are with the different mental illnesses. I would also like to know about the different resources that are available so that I will be able to better help my future patients, and even maybe my family members with those options. The three questions that I would like answered are: 1. What are the non-pharmacologic management therapies available? 2. What age demographic is most common for mental illness to present in initially? 3. What is the best treatment protocol that leads to success in achieving and maintaining sobriety?