

**Vulnerable Populations APA Paper**

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N314: Introduction to Professional Nursing

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October 21, 2020

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**On each major paper students will write: "I have neither given nor receive, nor will I tolerate others' use of unauthorized aid".**

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Establishing cultural competence is very important in implementing specialized and effective nursing care. The interdisciplinary team should be a reflection of the population to create an inclusive environment in which patients can feel comfortable when receiving care from someone similar to them. Patients can confide and communicate more effectively when both the client and nurse share the same cultural background. Nonetheless, the population is becoming more diverse, and the majority of nurses are still predominately white women. Institutions should not expect minority groups to assimilate to societal norms and practices, but to adapt and acknowledge the cultural differences of the vulnerable so that specialized care can be attained.

The discrepancy between the general population and the nursing field remains prevalent, however, the development of cultural competence aids to minimize this division. Hood defined cultural competence as the “developmental process that builds continuous increase in knowledge and skill development in areas of cultural awareness, knowledge, understanding, sensitivity, interaction, and skills” (Hood, 2018, p. 281). Establishing cultural competence enables nurses to provide the best possible care for each unique patient. It’s a gradual process that develops over time. Based on *Leddy & Pepper’s Professional Nursing*, there are six steps to become culturally competent. The initial step is to examine and reflect personal values and beliefs, then to build cultural awareness and to learn specific communication strategies. The final step in establishing cultural competence is interacting with people who are from a different culture and being able to identify and remediate mistakes (Hood, 2018, pp. 281-284). It’s crucial to recognize and understand one’s preconceived judgments before

implementing care to a vulnerable population. Hidden biases and incorrect attitudes may be present and hinder the nurse from providing care that is fair and just.

If I were to become a nurse responsible for the care of a prisoner, I would not wish to know their reasons for conviction. My job, as a professional nurse, is to provide effective and personalized care to my patient. This also means that I must treat every patient with respect and dignity every time - no matter who they are or what they might have done. Being a professional means not letting my attitudes and emotions affect my work. As I reflect on my attitudes towards prisoners, I realize that I tend to automatically assume that all prisoners are heinous murderers or savage rapists. I have never encountered or interacted with anyone who was incarcerated before so most of my notions of a prisoner come from tv shows. I understand that my belief is distorted and that not every prisoner is a psychotic madman. I would be in a constant state of fear if I were to let my preconceived judgments get to me.

Prisoners in a correctional institution are considered a vulnerable population. Many prisons across the nation are severely understaffed and overcrowded. There are limited resources for each inmate which makes rehabilitation challenging. Many facilities turn to punishment rather than working to help inmates reintegrate into society. Prisoners need an environment where rehabilitation is encouraged and a place where resources and staff aren't scarce.

Elizabeth Walsh's, journal article, "The emotional labor of nurses working in her Majesty's (HM) prison service", explores the emotional baggage that comes with working in a correctional facility. Walsh examines the "intranurse" relationship and how nurses working in prisons often find themselves detaching their "emotional side" from their "professional side" as a coping mechanism (Walsh, 2009, p.146). Many nurses in this position try to detach

themselves from their attitudes and emotions because they understand that at times it can get the best of them. They acknowledge their emotions and recognize that they must separate themselves from them since it may affect the way they do their job. I would also want to keep my feelings and separate from my profession, so I chose not to know the severity of a prisoner's crime. Take, for example, I am given a patient who had brutally murdered their wife and kids, I would automatically feel fear and resentment to this discovery. However, as a professional nurse, I would acknowledge my emotions and remain cautious so that my attitudes do not affect my behavior in providing specialized care.

### References

Hood, L. J. (2018). *Leddy & Pepper's professional nursing* (9th ed.). Wolters Kluwer.

Walsh E. (2009). The emotional labor of nurses working in her Majesty's (HM) prison service. *Journal of Forensic Nursing*, 5(3), 143-152.

<https://ezproxy.lakeviewcol.edu:2097/10.1111/j.1939-3938.2009.01047.x>