

ADELE MOANDA

Therapeutic Communication Gerontology Assignment

Pre-assignment work

Students should answer the following questions to fully understand the quality of life, personal choice of decision making, and self-reflection.

1. Which of these two statements is most important to you?

- I want to live if possible, regardless of the quality of life that I experience.
- I want to preserve a good quality of life even if this means that I may not live too long.

I would like to live longer if possible, regardless of the quality of life that I experience.

2. Do you feel you have full autonomy for decision making?

Yes, I do. I am alerted and oriented. I can decide about my life. I have the freedom of deciding life.

3. How do you feel when people make decisions for you?

I feel insecure when someone decides for me. I also feel incompetent, handicap mentally, or less important.

4. What do you see as important in your life?

Well-being, making a judgment, and breathing are the things that are seen as very important in my life.

5. What risks have you taken in the past that has affected your quality of life?

In 2015, I was 32 weeks of pregnancy. Early morning my water breaks. My boyfriend and I went faster to the Hospital. The nurse asked me to void, so they can get urine sample. The sooner I tried to urinate, then I started bleeding because I had placenta abruptio. I lose a lot of blood; I lose consciousness for 3 hours. The doctor asked my boyfriend to sign up for a paper for them to do an emergency C-Section. He did sign. I did not know anything until when I got up. From the day that I had the emergency C-Section until now. I am having back pain from the anesthesia that they did in my lower back. The good thing is that they save my life but, my baby boy did not survive. This risk affected me because I cannot stay longer in a standing position due to back pain. So, I have never been a full-time employee anymore due to back pain.

6. What risks have you taken in the past and how has this affected you?

Life in the USA is very expensive. You need to have a good job financially stable. But, since 2015 my life change. I less go to work, so I can avoid using my back because I do not want to end up with back surgery.

7. What risks do you want to take now?

It has been four months now that I noticed a small nodule in my neck. It is painless. I talk to my primary care physician, he transferred me to a HEENT doctor who advises me to get neck surgery. I want to take a risk by accepting to have neck surgery.

8. What risks are you not willing to take?

The risk that I not willing to take is having another baby or getting pregnant. I am scared that the next pregnancy may present with the same complication that I have before such as bleeding or death of the baby.

9. How would you explain to the people who love you why you want to take this risk?

I explain to them that I am scared to keep this nodule in my neck longer, I am afraid that it may turn into cancer.

10. What frightens you about taking this risk?

One of my family members like me to get neck surgery. They are afraid and saying that the neck is not a safe place to get surgery. Now, I am scared that after neck surgery I may come up with another health issue.

Interview process

1. Which of these two statements is most important to you?

- I want to live if possible, regardless of the quality of life that I experience.
- I want to preserve a good quality of life even if this means that I may not live too long.

The client claimed that he wants to preserve a good quality of life even he might not live too long. He says that he always agrees with what the world says that only God knows how long a person may live. Some people have short live and other have a long life. He gives an example of his daughter who passed during labor and delivery at the age of 21 years old.

2. Do you feel you have full autonomy for decision making?

The client agrees that he has his autonomy. He says that he is alert and oriented. So, he can decide by himself. He claims that he does not like none of his children to decide his life.

3. What do you see as important in your life?

The client says that it seemed to be healthy as the most important in his life because when you are healthy you can do what you want to do such as going out on vacation. He also claims that another important in his life is seeing and talking to his family (brother, sister, children, and grandchildren). He says “I feel happy” while talking to my family.

4. What risks are you not willing to take?

The client is FULL CODE, so he says the risks that he is not willing to take is making a change on his life support. He claims that He loves life. So, changing from Full Code to DNR will shorten his life. The client says “I know I am old; I will die one day. But I prefer to take all the risk of having CPR than pass out”. He stated that health care people are careless when taking care of someone who is DNR. He gives an example of his wife who died from breast cancer. He says that she passed sooner because she was DRN.

5. How would you explain to the people who love you why you want to take this risk?

The client claims that he told all his children that he likes to have a long life by having life support. This will prolong life and help his heart to breathe back when he is in a serious situation. He states that he told his daughter CPR keeps a person alive when you are in need. He is claiming that today he is good, he does not need that, but he may need it tomorrow when his health may change.

Interview Evaluation-Reflective Activity

After interviewing an older adult, students are to complete a self-reflective evaluation.

1. What therapeutic communication techniques did you use during the interview? Provide examples.
 - a. I use the Active listening technique. I was able to hear and observe what the client was telling me. For example, when he told me that he chooses to be a full code so he can have a long life to enjoy with his grandchildren. I ask him what he does to enjoy with his grandchildren. He told me that they always go on vacation together. Before Covid-19, they use to go out to eat and doing shopping. They all like outside life. As an active listener, I give a client time to talk and express his feeling.
 - b. Open-ended questions.

When I ask question 5 That talks about risk-taking by being a Full code. I did not ask him a yes or no question such as “Have you explain to the people who love you the risk that you have by choosing to be a full code?”. I ask an open question, so this can interact with the discussion and help me to get more information. He told me that one of the grandchildren ask him a question “Grandpa do you want to break your ribs by having CPR” His response was “broken ribs is better than to die”.

c. Restating

When the client told me that he told her daughter that CPR keeps a person alive when you are in need. By using the restating technique, I repeat the client’s exact words.

2. What went well?

The communication was good. The client was comfortable asking all my questions. He was talking a lot.

3. What would I do differently next time?

Next time I will need to manage my time better than this one. Redirect my patient during the interview on timing. I did not like to interrupt him, so I just let him talk.

4. What are the major take-home lessons after interviewing an older adult?

I understand that autonomy is very important in life. The person feels inferior and lacks when someone else decides for him. However, individuality and autonomy of each program are encouraged Eliopoulous, (2018).

5. How can I adapt my nursing practice to be more responsive to the unique needs of an older adult client?

By trying to respect them, giving them time to express their needs, and let them decide or participate in their care if they can.

6. In what way am I building my nursing skills?

I would like to be an active listener and try to give myself to my patient as I can. Therapeutic communication, including listening, is the most important skill in establishing an interpersonal relationship with patients in psychiatric wards (Abdolrahimi, et al., 2017). When the client is emotional, I will be able to keep silent.

References

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Eliopoulous, C. (2018). *Gerontological Nursing* (9th ed.) Wolters Kluwer.