

Step 1: Assessing Your Personal Thoughts Prior To The Interview

Students should answer the following questions to fully understand the quality of life, personal choice of decision making, and self-reflection. Complete this part of the activity prior to conducting the interview.

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

- I want to live as long as 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 definitely choose the second option. I hope that my quality of life will be relatively good for the vast majority of my life. I have cared for patients with dementia. I do not desire to live the way my patients had to live because of that disease. If I could think clearly and communicate with my loved ones, I would want to live even if my body was not working. But if my mind is not functioning and I can't communicate, I would prefer not to suffer that way.

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

I do feel that I have full autonomy as an adult, but I choose to limit it to some extent because I make my personal decisions based on what is best for my family and me. I am not just Sarah, the individual. I am also Sarah, the wife, and mother of three children. My decisions about almost everything take my family into significant consideration.

3. How do you feel when people make decisions for you? I feel disrespected when people make decisions for me. At times I have had this happen both in my family and in my workplace. I have felt disrespected by people making decisions for me in both instances.

4. What do you see as important in your life? The most essential things in my life are my faith and my family. I became a Christian when I was 15 years old. I lived without knowing Jesus for 15 years, and I never want to live that way ever again. Following Jesus gives me joy and peace that I can't explain. My family is also a very important part of my life. They are the people I love the most. This question will be different for each person because we all have different values.

5. What risks have you taken in the past that has affected your quality of life? I have made decisions that affect my quality of life to some degree. My husband and I accepted the placement of a special needs foster child 7 months ago. We will almost certainly adopt her in the next year. I feel that this decision does affect our quality of life because it will drastically affect our future. Our special needs daughter will need our care for the rest of our lives, and then she will continue to need care after that. Accepting her into our family affects all of us, including our other two children. They will grow up with a special needs sister for the rest of their childhoods. I know this doesn't affect my medical quality of life, but it certainly does affect my emotional quality of life to some extent.

6. What risks have you taken in the past and how has this affected you? My husband and I took a risk in becoming foster parents. We didn't know the ways it would affect our family. But we chose to do it despite the risks. We have had to re-organize our lives overnight in order to accommodate a new family member. Our hearts have been broken as children we love deeply have left. These risks have always been worth it because the children are worth it. Every child deserves to have a family.

7. What risks do you want to take now? I want to take the risk of adopting both of my foster children. I also would love to become a kidney or liver donor someday. I know it is a risk, but I really would love to bless a person this way.

8. What risks are you not willing to take? If I had the right reason, there's a lot of things I would do. I'm not willing to risk my children because they depend on me for their safety and wellbeing.

9. How would you explain to the people who love you why you want to take this risk? I take risks that I think are worth it. If I could improve a person's life or help them learn about Jesus, I would do a lot of things that others would consider too risky. Some of my

family members would be understanding of this. They have watched my husband and I move across the world to pursue ministry. But others family members would be upset I am taking a risk.

10. What frightens you about taking this risk? If I have accepted a risk, I am not afraid of it. Any risk I commit to, I know God will provide for me in. Even when I thought a situation was impossible, God has never left me hanging. If I couldn't accept the consequences of a risk, I wouldn't take it.

Step 2: Conducting Your Interview

Find an older adult to interview, the interviewee may be a family member and does not have to be a patient. Each interview should be a minimum of 20 minutes. Students should use therapeutic communication techniques to build therapeutic relationships within the community. Students should ask a minimum of 5 question listed below. Students can rephrase the questions during the interview to convey a conversational tone. A student may ask a question not listed below but will need to write down additional questions asked in the post-interview evaluation. The interview process is not graded but will assist the student in completing their self-reflection.

1. Which of these two statements is most important to you?
"The second one, because I think the quality of life is more important than longevity."
2. Do you feel you have full autonomy for decision making?
"Yes, I do. I make decisions for myself with my family in mind, but I am the person who has the last say."

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

"I don't really like that unless it is something that will be better for me in some way. I like to make my own decisions. Let's say, for example, that the children don't want me going up and down the stairs, so they would like to do my laundry. I would try to listen to them, but I don't want to give up my independence."

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

"My priorities are my relationship with the Lord and then my family and friends."

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

"I chose to have back surgery, and it was risky. I chose to have the surgery because I was in so much pain. The risk was worth it to me because I was hoping for pain relief."

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

"I have, over time, learned to be less afraid about taking risks. All of life is a risk, but I can't enjoy my life if I worry all the time."

7. What risks do you want to take now?

"I can't think of any risks I would take now. I recently accepted the risk of taking my covid vaccine. It was worth it to me."

8. What risks are you not willing to take?

"At this stage in my life, if I were to be asked to have major surgery by a doctor, I probably would choose not to do that. If I got cancer at my age, I probably wouldn't go through treatment. I want to enjoy my final time on earth, instead of being sick because I'm trying to prolong my life."

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

"I think my family would be fine with the choices I make regarding my health care. My family is concerned about my health, but they support my decisions."

10. What frightens you about taking this risk?

"I am not afraid of taking these risks. I've spent a lot of time considering my choices about my health care, and I think I would make decisions I am the most comfortable with."

After interviewing an older adult, students are to complete a self-reflective evaluation. When completing this portion of the activity, the student should consider the information collected in previous steps, as well as the interview experience. Self-reflection is a powerful tool that nurses in all stages of their career utilize to improve their practice.

1. What therapeutic communication techniques did you use during the interview? Provide examples

I was able to use a few therapeutic communication techniques during my encounter with Doris. The one I probably used the most is active listening. We spoke over the phone, so my active listening was actually a form of verbal communication. I stayed engaged during our conversation. While she was talking, I made small "mhmm" sounds to show her I was listening. I also asked her some questions to check that my understanding of what she said is correct. I used empathy by listening to her story about her back surgery and how she felt it was a risk. I can understand how she felt like it was a risk. I made some observations about her statements. I did this in question form because I wanted to make sure I understood correctly instead of falsely assuming I understood her meaning. A few times, I used silence to give her time to think. Some of the questions were difficult for her to answer. It took her a little longer to collect her thoughts to form her responses.

2. What went well?

I think Doris felt good about our interaction. I am very thankful for the communication skills I have learned over time, making me an effective listener and communicator. I also enjoyed learning about Doris's perspective.

3. What would I do differently next time?

I really wish I could have done this interview in person. My time is pretty limited right now, so it was much easier to do this on the phone. But in person would have allowed me to practice things like controlling my facial expression. After a year of wearing a mask and being able to do a lot more with my face that others weren't able to see, it is going to take me some time to learn to control my facial expressions again!

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

My major take-home lesson is to allow more silence than I am typically comfortable with. Doris is a competent, alert, and oriented older adult. Even though that is true, she still took longer than usual to formulate her thoughts. As I begin to care for clients who are not as alert and oriented, it will be vital for me to allow them adequate time to communicate and make decisions.

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

I can slow down when I am with older adults. I typically speak very quickly. I have been told by older adults that this is difficult for them. I will choose to communicate using a slower pace. I will allow more time for silence. I will preserve the independence and dignity of the individuals I am caring for by allowing them to make their own choices. Doris reminded me that simple things like doing her own laundry are pieces of her independence. She's not ready to give them up. In the hospital setting, I should not assume that my patients are ready to give up their modesty or independence just because it is more convenient for me.

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

I am going to interact with a lot of older adult clients while I am a nurse. Unless I go into a pediatric specialty, the likelihood is a great majority of my clients will be older adults. I am learning to communicate more effectively with this age group. It will serve me well when the stakes are higher and choices being discussed are more critical.

