

Vulnerable Populations

Alaska Anacker

Lakeview College of Nursing

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Professor Travis Whisman

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Introduction

Cultural competence is the ability to deliver care that respects each patient's background and beliefs and is a big part of being a nurse. When we take time to learn what matters to each patient, we can give care that is ethical, personal, and compassionate. It's about understanding people and where they come from. When nurses take the time to understand those things, the care feels more personal. It builds trust and it feels human.

It's especially important with groups who are already vulnerable. These patients don't always get fair treatment or the same chances at good health. When nurses work on their own humility and take a step back to reflect, it helps lower the walls between them and the patient. That's how trust grows. That's how stigma starts to break down (Kaihlanen et al., 2019).

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People with substance use disorders are often treated like they're not worth the effort. I used to see it that way too, if I'm being honest. Addiction is a chronic disease that changes the brain and the way people think. It's not just a bad habit someone can stop whenever they want (Substance Abuse and Mental Health Services Administration [SAMHSA], 2023). This group faces a lot of challenges that are physical, emotional, and social.

Physically, they can deal with things like withdrawal, infections, liver problems, and poor health overall. Mentally, many fight guilt, shame, and depression. Socially, a lot lose jobs, homes, or support from family. It all piles up, and it makes recovery harder (Volkow & Koob, 2021). When they go to the doctor or the hospital, they're often seen as a problem instead of a patient. That kind of judgment pushes people away from care.

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As a future nurse, I want to do the opposite. I want to meet them where they are. Sometimes it's just about listening without making them feel small. Sometimes it's giving education they can actually use. It's also about understanding harm-reduction approaches and being patient. I see this through my faith too. I believe God calls us to care for people who've been cast aside. Everyone is made in His image, even when they're struggling. Especially when they're struggling.

Reflection

When I first thought about addiction, I honestly had a lot of judgment in me. I used to believe people could just stop if they really wanted to. I thought it was a choice. I didn't understand the way addiction takes control of someone's life. In class and through my own reading, I've learned that addiction is a disease. It changes the brain. It changes how people think, react, and live. Seeing it that way has made me more compassionate and less quick to judge (Volkow et al., 2022).

My faith is a big part of why this matters to me. I believe God calls us to care for people who are hurting. Jesus didn't push people away when they were broken. He cared for them. I want to be that kind of nurse. Not perfect, but patient and kind. Even if someone is at their lowest, they still deserve respect. They still deserve good care.

For the question about the role of nurses in promoting social justice, I think nurses have a real responsibility. We see things up close. We see when people are ignored or mistreated. I believe nurses should speak up for their patients. Social justice is about fair treatment. It's making sure everyone gets the same chance to heal. That means fighting against stigma in healthcare and helping people get the resources they need.

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For me, this isn't just a job. It's personal. It's faith. Helping people who feel invisible or unwanted is how I live out what I believe. I know what it's like to feel broken, and I want to be the kind of nurse who doesn't give up on anyone.

Conclusion

Cultural competence isn't just a concept you learn once. It's something that you grow the more you work with people and the more you pay attention to your own thoughts. What matters most is when working with people who face stigma and barriers. People with substance use disorders deserve care that's honest, patient, and respectful.

Learning to check my own bias has already changed how I look at this group. I see them as people who've been hurt, not problems to fix. My faith reminds me to meet people where they are and offer hope. That's how I want to practice nursing. I don't ever want someone to feel small or unwanted when I'm their nurse.

This population reminds me why cultural competence matters. It's not about being perfect. It's about trying to understand, to listen, and to treat people with dignity every single time.

References

Kaihlanen, A.-M., Hietapakka, L., & Heponiemi, T. (2019). Increasing cultural awareness: Qualitative study of nurses' perceptions about cultural competence training. *BMC Nursing*, *18*(38), 1–9. <https://doi.org/10.1186/s12912-019-0363-x>

Substance Abuse and Mental Health Services Administration. (2023). *Key substance use and mental health indicators in the United States: Results from the 2022 National Survey on Drug Use and Health*. <https://www.samhsa.gov>

Volkow, N. D., & Koob, G. F. (2021). Brain disease model of addiction: Why is it so controversial? *The Lancet Psychiatry*, *8*(8), 635–650. [https://doi.org/10.1016/S2215-0366\(21\)00129-7](https://doi.org/10.1016/S2215-0366(21)00129-7)

Volkow, N. D., Koob, G. F., & McLellan, A. T. (2022). Neurobiologic advances from the brain disease model of addiction. *The New England Journal of Medicine*, *386*(10), 868–879. <https://doi.org/10.1056/NEJMra2111936>