



Reflective writing example: Nursing

COMMONWEALTH OF AUSTRALIA

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Sample Reflective journal

The following are extracts from a Reflective journal written for the course, *Reflective Nursing Practice 1* by a first year student, Chrissy Poulos:

CHRISSY POULOS – REFLECTIVE JOURNAL

Excerpt from Week 1

Defining nursing is a tough one. I am not sure about the ins and outs of it yet. But I will write what I think of it now. This should make for some good laughs when I read back at the end of semester (study period)! It is about caring for people. I guess I see it as a job where you have to give of yourself physically, and by physically I mean doing things like making beds. But you also have to give a lot of yourself emotionally. Dealing with people a lot of the time, this is not really surprising. I see nurses as being privileged in a way. I mean you are allowed to share some intimate moments with people. Births. Deaths. All this is not to say I have romanticised the whole occupation. I do realise you have to wipe people's bums too! Now I'll try to incorporate some of what we have learnt this week into this definition.

All of this is underlined with the premise that the role of the nurse is to guide people on the path to wellness. Not simply cure their illness. I really enjoyed the reading on wellness and I am pleased to see that this program is so how do I put this? — new age? My mother has been a believer in the wellness idea for a long time. She is a physio. She will probably be mentioned quite a bit in this journal, as she is a very influential person in my life. (Incidentally, I see nursing as a craft, an art and a vocation).

Excerpt from Week 2

I love history and see great value in it for the following reasons. It is fascinating. Nothing is more valuable or wonderful than immersing yourself in all the different beliefs that people held in former ages. Not only what their beliefs were, but how they changed over a period of time, and why. And perhaps the most important reason for the study of history can be summed up in one sentence—'The key to understanding our present is in the understanding of our past'. Perhaps we are hoping that in learning where we have been, we will also learn where is that we are going. We hope, also, to learn from our mistakes.

To me then, I see great value in the study of history. Or perhaps I should say not only the value in the study of history, but the understanding of it all. The history of nursing is fascinating. Last year I did a project on Midwifery from 1500 to 1700. Some of the ancient writing now only on microfilm is just fantastic. Some of the things they did in the name of medicine. All I can say is that I am glad that it's all only history now!

OUR COMMENTS

Here Chrissy in her first week of the nursing program writes about what nursing means to her at that time. Each week she responds to questions set in the Course Outline

Notice the use of personal writing with 'I'

Chrissy makes a link to one of the readings on 'wellness' set in the Course Outline.

Note: She should have put the name and date of the source in brackets as for all referencing.

Again Chrissy responds to the Course Outline question and to her reading.

She relates the topic to a previous life experience.

Chrissy relates topic to previous part of her study.



Excerpt from Week 5

The issue of caring is a really tricky one. My family almost came to blows over it when I brought it up at the dinner table! LITERALLY. It is obviously an emotive issue among health professionals.

I must say that I did not agree with the views expressed at the tutorial. For I believe that caring can be learnt—and so does my Mum! It was my father who didn't agree, and thereby caused the rowdy discussion! I believe that caring is an umbrella term that is used to describe a number of qualities that some people show. Although it is not an emotion, it is similar in that it is not tangible. It is not like a chair or a table. You cannot touch it. You only know caring exists if you experience it. I guess caring means different things to different people. So this is what it is all about to me, on a personal level.

Caring = understanding

Caring = support

Caring = time

Caring = empathy

Caring = acceptance

Caring = want to care

And the last one is surely the most important. For caring must be something you choose to do. Everyone can learn to care, but not everyone makes the choice to learn. Some are perhaps innately more caring initially, but we can all learn something. We are not all born equal.

Excerpt from Week 6

Our treatment of indigenous people of Australia is really shameful. Especially hearing the mortality rates of the infants, you cannot help but feel disgust at everyone. However, our treatment of many members of our society is really awful also. The mentally ill. The Phillipina women. To name a few!

Perhaps the problem with trying to improve the state of Aboriginal health lies in the attitudes of guilt. Our acting to help them improve the state of their health / education systems is not based on a want of the community at large to help them because they are human and need our help, but a warped sense of guilt. We look back and say 'what we did 200 years ago was disgraceful and we should try to make amends now'. But guilt is the wrong motive for helping people. And, similarly, it is the wrong motive for people thinking that they need to be helped. If we all let go of the past and started acting on real reasons, we might, just might, begin to get somewhere. Perhaps the whole situation is a really good example of how really bad humanity actually is at living in the now?

The student reflects on her reactions to the tutorial and a family discussion about the topic of caring.

Here the student summarises her own meaning of caring.

Chrissy responds to the topic of the weekly tutorial.

She reflects on the issues.



REFLECTIVE NURSING PRACTICE 2

(Clinical Experience—Nursing Home)

Excerpt from Day 1

While it is a lovely place in many respects, I was quite moved when we were taken into the nursing care section. We were taken into a locked part, where they put the demented people that wander. There are locks on the door. When we were walking through, I saw this little old lady who made me think. She was walking aimlessly around, and sort of dribbling. When we went into the next section she tried to come along and had to be taken back to her section. I felt really sad then. Thinking that her movements have to be restricted like that. That she was made a prisoner. Not because of anything she had done, but because she was ill. And I wondered who she was before she came to the home. What had she done? What had she thought? What had she believed? And why was it was her, and not anyone else that was made a prisoner in such a way. And how terribly terribly afraid I am that it should happen to someone I love. Like my parents. Funny that I only saw her for a couple of minutes, and yet she made me think so much. I have this feeling I'll be thinking a lot this week. I'm looking forward to tomorrow.

Excerpt from Day 2

While it is a lovely place in many respects, I felt frustrated because there are some questions I will never have answers to. The people Rachael and I were assigned to are pretty incapacitated, especially Mrs J. She actually has to be fed. She never goes into the day-room, at her daughter's request, and so she sits in a chair all day. She has lost either the will, or the actual ability to communicate. Every time I had contact with her I kept wondering Can she hear me? Does she know what we are talking about? Does she know (if) we are talking about her? And does she get bored in her room by herself, with all the days so much the same that they must blend into each other? If she is a thinking, feeling and still intelligent being, what is it like to be a prisoner in her body as she must be? They say that she cries all the time. Just cries, and I wondered what it was that made her cry. Was it out of frustration? Or was it that only the horrible moments of others lives are relaying through her head like some kind of endless repeating videotape? I guess I'll never know. But I really did think about it today.

I was quite upset by the smell in the room. My want to open the window wasn't just for me though. It was for the resident. I kept thinking how degraded and horrified I would feel if it was my urine that was making people upset. I would have given my right

OUR COMMENTS

Here the student writes about her first day of field experience in a nursing home. Throughout the entries, the student has not simply described the day's events. She has reflected on the meaning of the events for herself.

The student writes honestly about how she is finding the experience. This is important for true reflection about events to occur.

It can sometimes be tempting to reframe events to make them sound more interesting or acceptable and this should be avoided.



arm for some fresh air at that point.

I felt amazed. Amazed at how small things that you do for the residents can really make a difference. For instance, today Rachael and I took Miss R for a walk (well, a wheel) outside. It was only ten minutes worth really, but it made her shine. And being with her there, I really appreciated everything that I saw. The trees, the bright colour of the day and most importantly the clean air! (For more of my clean air fetish, see above). I picked her a camellia from a tree, and she loved it. I think, when I reflect on today, that it was ten or fifteen minutes that made the whole day. I felt that I had made someone happy. And that made me feel just so good.

Excerpt from Day 3

Well, much to my relief today was easier. Easier because I knew what to do (more or less) and I wasn't as shy to do bigger things as I had been. And easier because I realised today how little some of these people are able to understand. They seem to see and hear, but I'm not so sure they comprehend that much. Understand things that happen around them. But this does not change anything that I wrote yesterday. Respect of the people should still be paramount. I guess today I realised how sick they actually were.

What really brought me to this train of thought was Mrs R. The woman Rachael and I had taken for a walk yesterday. I thought that I had made a difference. I thought I'd done something worthwhile. But then today I saw her and I realised she didn't even recognise me. She must have forgotten all about the walk. My first feeling was hurt. How could she not have remembered something that was so meaningful? To not only me but to her too? My plans for a second walk today were about to be thrown out the window, when I realised something important. These people have special needs. And instead of doing things that will be remembered for a long time as meaningful, we have to do things that are meaningful on a daily basis. Part of what I said yesterday still stands up (I think!) as pretty accurate. This being that the small things do mean more. But the small things do need to be done on a regular basis. The whole thing makes me think about living in the now. They say that we should. We should take every moment how it comes. Not living in the past and the future but the now. And I guess that these people do that. They know what is happening at that moment, but when the moment is gone, so is everything that happened in it.

Excerpt from Day 4

Things really seem to be getting better and better. I think that I have now learnt (more or less) exactly what the routine is. This is

Chrissy goes beyond just describing the events—she reflects honestly on them and the impact on herself and how to resolve the issues they raise for her professional life.

Chrissy reflects on her experience.



good as it means I do not have to keep checking if I'm doing the right thing at the right time any more. I am becoming more efficient, and more confident. Initially, even touching the residents in the gentlest possible way left me feeling concerned that I was going to hurt them. I now know that, whilst they are fragile and still must be handled with care and gentleness, you have to be firm if you are going to get things done. The staff are a good deal nicer. I guess they have had time to suss us out. They are now being really encouraging and supportive. They have also begun offering us aid and advice when, even though it's not called for, it is relevant and helpful.

Rachael and I gave Mrs J a hand massage using the massage oil I took in. Yet again she drifted off to sleep. However this time she didn't drift off until the massage had finished. One hand relaxed completely, and the other only partly. But I think that was more due to the arthritis than anything. It loosened up considerably. She looked at both of us very intensely the whole time and made some sighing noises. Goodness only knows what is going on in her mind. I think in my overall effort to gain emotional space from these people I will try to stop guessing. All the thinking about it only serves to make me frustrated and upset. It's not like I'll ever know the answers anyway.

Excerpt from Day 5

Well, today was my last day at the nursing home. I have mixed feelings about that. Part of me feels happy to be not going back. For I felt that in some ways it was a place full of sadness and monotony. But another part of me feels unhappy to be leaving. I have already grown fond of some of the residents, and gotten used to caring for them. I was even getting used to the 'character building early starts' (direct quote from my Dad). The time at the nursing home brought me much. I got used to all the skills (yes, all of them!) I had learnt this semester (study period) at University. I also learnt a lot of things. Some funny little things (like how to place the spoon on the back of the tongue so that the food goes down better) and some bigger things (like how to operate the hydraulic bath).

Being at the nursing home made me think about a lot that I wouldn't usually be thinking. How I felt and my revelations are written up in the preceding paragraphs and I see no point in repeating them here. But my most important thoughts were about the value of a human life. When you are born, life is a miracle. We see little babies and coo and look in awe at them and marvel that they are alive. When you reach the other end of the spectrum (specifically the elderly that I saw in the nursing home), where is the miracle of life. Is there one? Life for them seems to be simply an existence. Days the same stretching on forever with

Chrissy is dealing with the issue of ambiguity that faces all professionals.

Here Chrissy relates her skills learnt in the Nursing Skills laboratory

Chrissy draws some overall conclusions from her journaling in the time she was on field placement to her field experience



little or no change.

To exist, I believe, is not to live. What I learnt at the nursing home was how to make a life that is in existence more bearable. Not an easy lesson. But there are none of those are there?