

2018 Hope Babette Tang Humanism in Healthcare Essay Contest

1st place | Nursing Students

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Seeing Stephen

I was nervous to say the least when I got assigned to the schizophrenia unit of a major psychiatric hospital for my second ever clinical rotation as a nursing student. My initial reaction was how am I, a 22-year-old second semester nursing student, equipped to deal with people with serious mental illness? Nerves were transcending down my entire body when I heard where I had been assigned. Going over one PowerPoint lecture about therapeutic communication does not necessarily make one prepared to interact with these patients one on one, I thought to myself. It's one thing to read a textbook and take a test, and another to see these disorders affecting actual people in real life, to look at them face on, eye to eye. Feeling completely unprepared and expecting the worst, here I was at 6:30 a.m. on a Saturday. Nursing school has numerous moments like that, sheer panic with an overwhelming feeling of 'what did I get myself into.'

Forcing myself to stop the internal dialogue in my head, I started walking towards the doors of the unit. I tugged nervously at my one pair of slacks, the ones I bought for my nursing school interview, and contemplated briefly on how far I had come since that day. I remember talking passionately about wanting to be a nurse and here I was being thrown into the ocean it seemed. I was shaking as I fiddled with the key to open the double doors to the unit. I could feel myself starting to sweat. Past those doors was yet another set of locked double doors this time with "CAUTION ELOPMENT RISK" plastered across them. That's a comforting sign, I thought sarcastically to myself. The mechanical doors opened slowly and there I stood, blankly staring.

I paced slowly around the unit, finding myself judging and examining each and every patient in the day area. Are they going to hurt me? Why is that guy mumbling under his breath constantly? Why is this other woman yelling at the nurse? I was ashamed at how quick I was to pass judgment, but I felt completely out of my element. I was tempted to hide in the conference room and pretend to look at patient charts all day. "Get it together," I mumbled to myself and continued pacing and examining the day room of the unit. The walls were neutral, the couches were neutral, and the tables were neutral. What a therapeutic environment yet somehow my mind could not stop racing. My attention shifted and I quickly noticed a young man sitting alone at one of the tables. I wanted to talk with him; I yearned to learn his story. But the idea of talking to a psychiatric patient alone riddled me with fear.

Shaking off my self-doubts, I walked up to him nervously and introduced myself. “Hi, I’m a student nurse. Today is my first psychiatric rotation. Honestly, I’m not really sure what to do,” I said offering my hand hesitantly.

I felt my cheeks turn pink and realized none of that was in the script I had prepared for my patient interviews. I was technically supposed to use a broad opening, and most definitely was not supposed to tell him I had no clue what I was doing. Regardless, a sweeping grin spread across the young man’s face as he shook my hand in return. “Hey! I’m Stephen. It’s okay, I’m not really sure what to do here either,” he said jokingly. I immediately felt myself relax. I quickly learned that we were actually the same age, freshly 22. He told me about his dreams to go to college and how much he loved his mother. Our conversation was easy, natural, and flowed. I was amazed at, for a lack of a better term, how normal he seemed. We sat in silence for a few minutes and towards the end of the conversation I could tell he wanted to tell me something. He finally looked at me intensely in the eyes and said “You’re the only person who has talked to me like I’m a normal person.” I swallowed hard. He continued, “All the other students that have been here just stared at me like they were scared of me.”

I felt myself tear up, ashamed at how 15 minutes prior I was tempted to hide away in the conference room and do the same exact thing. His words made me realize how easy it is to look at a psychiatric patient and see only that. In reality, these patients are so much more than a label or diagnosis. Stephen, recently diagnosed with schizophrenia at age 22, is more similar to me than I would have ever guessed. Maybe it is human nature to try to focus on the obvious, to keep our distance, put people in a box, and perhaps that makes working in healthcare easier. But easier is not better, and when you dig beyond labeling a patient with an illness, healthcare can become more encompassing by treating the entire person and not just the illness. Stephen’s words that day changed my perspective of what it really means to be a nurse because sometimes just treating someone as a human and simply talking to them makes an immeasurable difference in their level of care.

When I left the unit that day, I walked up to Stephen to say goodbye. He handed me a picture that he drew me, a picture of a beautiful, vibrant sunset. He proudly told me that he used all the crayons in the box and even mixed some colors to make it just perfect for me. On the sheet of paper above the sunset, it read “Thank you for truly seeing me.” I vowed that day to never write off a patient or to let their illness define them. There is so much more to people than what meets the eye. Walking out of the unit that day and waving goodbye, I did not look at someone who was a psychiatric patient, I just saw Stephen as Stephen.

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