

Reflection

Student's Name

Institution

Reflection

My Experience

In my third week of the rotation, a charge nurse requested that I visit a ward where a patient had just successfully delivered their child. Upon arrival, I noticed that the patient and her husband were in extreme distress. The nurse had indicated that the baby was slightly underweight, but that she would be okay throughout her development. I took the baby's vital signs and noted that everything was fine. I then provided counselling to both parents on how they ought to handle their child thereafter. While providing this information, I was conscious of social determinants like literacy and culture. The patient did not have any medical background, so I had to simplify any technical jargon required. I made her aware of the potential illnesses she might develop and laid out an immunization schedule for the child. I also assured her that the child's underweight state would not impede the quality of her life, as this was something about which the mother was quite concerned. Later in the day, another nurse came in to perform family centered therapy. I was quite impressed by how she created an ambient environment for free expression, as well as by the level of compassion and empathy she expressed towards the new parents. This approach provided emotional relief for the patient and also reduced her chances of getting postpartum depression (Henderson et al., 2016). The mother was also assured that the child's medical risks would be addressed progressively to ensure good health.

Research Supported Learning

Adequate patient support in postpartum care is crucial to the welfare of new mothers and their children. Caregivers should create an ambient environment for communication and

expression in postpartum care by making the patients comfortable and alleviating their emotional and psychological concerns (Parson, Menezes & Mann, 2019). This goal can be realized by providing the expectant mom and her family members with the necessary information concerning childcare and health literacy. The caregivers should also ensure that the patients are emotionally stable by continually checking on them through follow-up questions and reassurances (Beauvias, Andrevshik & Henkel, 2017). Family centered care should be tuned to the needs of the specific family members. Therefore, nurses and other health practitioners should take time to appreciate the patient's beliefs in order to increase cultural sensitivity. According to Forster et al. (2016), postpartum depression ensues because of inadequate health literacy after childbirth. Tailoring postpartum care to suit the patient's needs and creating an adequate provider-patient relationship reduces emotional and psychological turmoil (Lake et al., 2019). Nurses should ensure patients receive the best quality care, as a lack thereof will affect how the mother cares for the child negatively.

Implications for Future Practice

This experience has established a steady foundation for my future practice in postpartum care. I have acknowledged the importance of family-centered care and communication during this process and will use this insight to provide quality care. Emotional and psychological care should be tailored to the needs of the patient and family members. Therefore, I will practice cultural sensitivity in all interactions so that the beliefs I express do not conflict with those of other people. Aside from that, I will be vigilant in creating an ambient environment in the labor unit at all times. This measure ensures that the patient is at ease, therefore making postpartum care success more likely. I will also strive to provide patient education extensively to aid new

mothers in childcare so as to prevent postpartum depression. By being made aware of what to expect in the future, new mothers will be more resilient even when the future seems uncertain.

References

- Beauvais, A., Andreychik, M., & Henkel, L. A. (2017). The role of emotional intelligence and empathy in compassionate nursing care. *Mindfulness & Compassion*, 2(2), 92-100.
- Henderson, V., Stumbras, K., Caskey, R., Haider, S., Rankin, K., & Handler, A. (2016). Understanding factors associated with postpartum visit attendance and contraception choices: listening to low-income postpartum women and health care providers. *Maternal and child health journal*, 20(1), 132-143.
- Lake, E., French, R., O'Rourke, K., Sanders, J., & Srinivas, S. K. (2019). Linking the Work Environment to Missed Nursing Care in Labor and Delivery. *Journal of nursing management*.
- Parson, J., Menezes, K., & Mann, S. (2019). A Triple Aim Curriculum That Addresses Health Care Inequity: A Resident Driven Patient Centered QI Project that Improves Postpartum Care Utilization for a High Risk Population. *Obstetrics & Gynecology*, 134, 44S.