

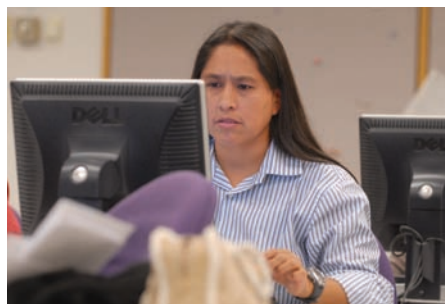


## The ability to respond: portrait of a future gerontological nurse practitioner

A GEPN student looks at Sylvia Parker with the hollow eyes of the weary and moans, "I used to be smart!"

"It gets better," Parker says softly.

Everyone accepted into YSN's Graduate Entry Prespecialty in Nursing (GEPN) is smart. Once they actually matriculate, they take a year off from feeling intelligent. Parker laughs when she remembers last year, the year she stopped being smart. It was the year Parker conquered GEPN, an intensive course of study that turns dancers, biologists and bankers into nurses. Parker, who had gotten her bachelor's degree in fine art, suddenly needed to know volumes about anatomy, physiology, chemistry, biology and nursing theory. And she needed to know it cold, because someday patients' lives would depend on how completely the information in those armloads of books and lecture notes had migrated into her head.



**“Health care providers think that it takes so much time to listen,” Parker says. “It’s the way you listen that’s important.”**

She studied every minute—every minute she wasn’t spending with her two-year-old daughter or at the hospital in her clinical rotation. She and her partner had lived an idyllic life in Vermont, a life Parker disrupted so that she could come to Yale and study to be a nurse practitioner. Now she was never home and was struggling to remember everything there is to know about electrolytes. She felt tired and most certainly not smart. But she also knew that she was doing exactly the right thing. A memory that played over and over in her head assured her of that:

*Parker is sitting next to her uncle, Edgar Monetathchi, Jr., at a powwow. Monetathchi, a medicine man with a master’s in public health from Harvard, has spent much of his career working with the federal Indian Health Services to build bridges between traditional and Western medicine. At the time, Parker is not at all sure how she wants to spend her own life. Looking at the swirl of activity around him, Monetathchi holds forth on his own people and what he sees as their failure to take care of themselves.*

*“Everyone is so afraid of what it means to have a sense of responsibility,” he says. “Do you know what it means?”*

*Parker thinks the answer is fairly obvious, but lets her uncle offer his own definition: “It means you have the ability to respond.”*

For Parker, being able to respond means being a gerontological nurse practitioner.

Growing up in Oklahoma, Parker and her family depended on the federal Indian Health Service for care. According to Parker, because providers tended to stay with IHS for short periods, a parade of different clinicians addressed—or didn’t address—Parker’s asthma. She did not have a consistent primary care provider until she was an adult and had left home.

Parker says many of the doctors and nurses her family saw were not culturally competent. The grandmother who raised her was mis-diagnosed as having Alzheimer’s disease by a doctor who spent a total of four minutes with her. The doctor tried to engage the woman in a discussion about azaleas, a plant Parker suspects her grandmother had never seen. The woman was also deemed to have frequent hallucinations because she spoke to dead relatives. For a Comanche, feeling connected to dead ancestors is perfectly normal. (Parker continues to speak to her uncle and her grandmother, though both have now passed away.) Nevertheless, the diagnosis stuck and rendered any health concern the grandmother had from that point a mere delusion.

Passionate as Parker was about the failings of the system serving Native Americans, health care was not her first career choice. Her family included a number of traditional healers. Healers, however, must be called. One cannot elect independently to become a medicine woman. Nor as a teenager did she have the self-confidence to propose a career

for herself in Western medicine. Her clear talent in and love for visual arts made that an obvious path. She’d been drawing since childhood, even selling pictures for a nickel to classmates in elementary school. Though her work was exhibited and recognized with awards, Parker now talks about painting and photography as a preparation for nursing. “An artist has to really look. And you can get so much information about a patient just by looking and being observant,” she says.

After a brief career as a painter, Parker enrolled in a post-baccalaureate program to prepare herself for medical school. She was going to be a different kind of doctor: holistic, willing to listen and culturally sensitive. While in the pre-med program, she worked as an EKG technician in a hospital where she saw how nurse practitioners dealt with complex medical issues while also taking time to learn about their patients as individuals. Parker realized that the kind of doctor she wants to be is a nurse practitioner.

She will be a nurse practitioner prepared to look and to listen. “With every patient I had, there were moments when I thought, ‘It’s a good thing I’m here with this person,’” Parker says. She listened, and she felt smart again. She had been studying that art since childhood. Her great-grandmother had told her that listening defined a person’s character. And Parker always listened to her great-grandmother. But not everyone wearing a stethoscope was lucky enough to be raised by Parker’s great-grandmother. *(Continued on page 10)*

(Continued from page 9)

"Health care providers think that it takes so much time to listen," she says. "It's the way you listen that's important."

She sees patients, particularly elderly patients, interrupted all the time. "How much more information could you get by uninterrupted listening?"

She wrote a piece about her experiences listening to patients that won a YSN Creative Writing Award (see box, below). Parker is still obviously creative and believes that she'll do visual arts again someday when life affords her more free time. Today much of her creativity goes into forging a role as

the gerontological nurse practitioner she is studying to be.

Doing a clinical rotation with a visiting nurse association was eye opening for her.

"How do elderly people get to their doctors' appointments?" she asks. "I want to come to them and just be in their space."

She also wants to serve Native Americans, which may mean that her office is an RV that travels between powwows. But as a lesbian, she is hesitant to return to Oklahoma. "Being gay in Oklahoma is a lot different from being gay in Vermont," she says, raising the possibility of serving

Native Americans in New York State.

Two years away from graduation, there is still a great deal of information to learn and a great many patients to be listened to. Parker has time to work out the specifics of where and how life will happen, but she is quite clear on what her life will mean:

"I want to be a healer; and I want to be a nurse practitioner; and I want to work with elderly people. All of the challenges that I have faced this year and last year, I'm going to wrap them up with those years of living with my grandmother and wishing I could have helped her. And I'm going to take that to the people I meet."

## From a long line of healers



Sylvia Parker is a graduate of Oklahoma City University with a BFA in Fine Art. She has received a number of recognitions for her painting and photographs. Currently in her second year at YSN studying to become a Gerontological Nurse Practitioner, she merges her art with the science of nursing. The following is Sylvia's winning submission to the 2006 YSN Creative Writing Awards.

*You come from a long line of healers*, my aunt said to me the summer before this—before Yale and med-surg, before cadavers and NCLEX questions. I had to remind myself of this many times throughout the semester. I would remind myself of my uncle and great-grandmother, the ways in which they healed and the people they touched. Maybe I should have been a medicine woman, but you have to be chosen and nobody chose me so here I am at Yale, a wannabe nurse, a wannabe nurse practitioner. I am supposedly someone who is learning to heal. So many times I struggled to grasp the smallest of details, those really important ones that keep you from killing a patient. I want to learn. I keep saying to myself, I want to learn. *You come from a long line of healers*. I remember these words, her embrace and the hopes of my family. So I work, work harder than I ever worked at anything in my life. I remember her words to the class, but it was like she was speaking to me. *You do not help me if you are great with patients and don't know the medicine; you don't help me if you are great with medicine, but terrible with patients. You have to be both.*

*You come from a long line of healers*. So I worked harder than I ever worked in my life. I cried. My heart broke when my daughter cried for me not to leave her in the morning. I begged myself for one less hour of sleep each night. I leaned on those who understood. I resented those who didn't. In the end I sat beside every patient and I listened. Maybe she should have said if you cannot listen you are no good to me. Period. I did what my great-grandmother said white people have a hard time doing. I listened. I heard voices. I heard a voice speak of his wife. He kissed her pillow every night and every morning. I lost her, he said. *How long ago?* I asked. *Eighteen years next month.* A voice of love. I heard a voice of longing. *Is it snowing outside?* she asked. She asked again and again. Ninety-five years of life and she was asking about the snow. *No*, I said. *Not yet*, I said. She'd tell me about the snow under her feet, her mother's hand in hers. The hill they'd slide down each winter. Each time she told me her story I'd ask her a question, *Do you miss your mother, Ann? Do you miss the snow?* *Yes, yes, yes, she'd say.* A voice of longing. I heard a voice speak clearly, although she barely uttered a word. There was the occasional yes, a whisper of a no. Her chart read non-responsive, doesn't communicate. Then why did she speak with her eyes every time we turned her to change the dressing on her stage IV ulcer? Her eyes became her voice to me. A voice of loneliness. I brought her a little stuffed monkey on a Saturday. Ask before you visit a patient, they said. Ask? Why? I wanted to give her time, my time. I was taught to go when your elders called. She called me and I went. We talked, I asked her about cooking and children. She smiled about her cooking. She attempted to speak about her children, but only tears came. So I sang her an Indian song, a prayer of healing and hope. As I kissed her head good-bye, I listened one last time. Don't you ever forget, *You come from a long line of healers*. And I left her holding my heart. I left with a voice of hope.