Assessment of Nursing Students Self-Awareness Dealing With Psychiatric Patient

Prof. Dr. Abdel Rahim S¹, *Dr. Mervat Hosny Shalaby², Asmaa Mohamed Ali Hassan El Abd³
1. Shoulah, Professor of Community Medicine Faculty of Medicine
2. Lecturer of Psychiatric And Mental Health Nursing, Faculty of Nursing - Tanta University
3. Demonstrator in Psychiatric Mental Health Nursing

Manuscript Info

Abstract

The aim of the present study was assess nursing student self-awareness dealing with psychiatric patient through: Assess knowledge of students about self-awareness and Assess knowledge of students about self-esteem. This study its descriptive design conducted at Faculty of Nursing, Benha University. The data was collected from (October 2008 to December 2008); the sample was 216 nursing students. There were two tools used for collected data. The first tool constructed by Arletta, (1999); and William and Torray, (2000). An interview questionnaire comprised socio- demographic characteristics of students, Students’ self- awareness data, and Students’ expectations and benefits of nursing. The second tool constructed by Lowason and Marshallw, (1989); involved modified social self- esteem inventory. The results of the study revealed that the majority of student's had adequate knowledge about self-awareness and self-esteem after taking the lecture. There was highly significant and positive correlation between Level of students’ knowledge of self-awareness and their levels of self-esteem. The study recommended that throughout academic years, a lecture of self-awareness will help nursing students understand their reaction towards patients, colleagues and others

Introduction

Psychiatric disorders have special communication and relationship needs that require advanced therapeutic communication skills. In psychiatric and mental health nursing, the nurse – client relationship is an important intervention tool that is used to reach treatment goals. The purpose of this study is help the nurse develop self-awareness and communication techniques needed for therapeutic nurse – client relationship and his care (Forchuk, 2008).

The psychiatric nursing is "an interpersonal process that strives to promote and maintain behavior which contributes to integrate functioning. It employs the theories of human behavior as its science and purposeful use of self as its art. Psychiatric nursing is directed toward both preventive and corrective impacts on mental disorders and their squeal and is concerned with the promotion of optimum mental health for society, the community, and the individuals who live within it (American nurses association, 2000).

Personal identity (the self) "depends on consciousness, not on substance" nor on the soul. We are the same person to the extent that we are conscious of our past and future thoughts and actions in the same way as we are conscious of our present thoughts and actions (Locke, 2007).

In general, "awareness" may also refer to public or common knowledge or understanding about a social, scientific, or political issue, and hence many movements try to foster "awareness" of a given subject. Examples include AIDS awareness and Multicultural awareness (Maturana and varela, 2007). Self-awareness is the process of understanding one's own beliefs, thoughts, motivations, biases, and limitations and recognizing how they affect others (Forchuk, 2008).
Self-Awareness is having a clear perception of your personality, including strengths, weaknesses, thoughts, beliefs, motivation, and emotions. Self-Awareness allows you to understand other people, how they perceive you, your attitude and your responses to them in the moment (Warmerdam, 1994).

The psychiatric and mental health nurse's role continues to adapt to the changing needs of people with mental illness. As behavioral health care delivery occurs more in outpatient settings, so does the work of the nurse most rehabilitation programs have a full time nurse who functions as part of the multidisciplinary team (Chavez, et al, 2008).

The role of Psychiatric Mental Health Nurse Practitioners (PMHNP) is primarily clinical and involves a full range of primary mental health care. Focus is placed on the biopsychosocial assessment, diagnosis, and management, including medication management, of patients with mental illness (Phoenix, 2007).

**Aim of the Study**

The study aimed to assess nursing student self-awareness dealing with psychiatric patient through:-

1. Assess knowledge of students about self-awareness.
2. Assess knowledge of students about self-esteem.

**Research Questions**

1. Are the students’ having knowledge about self-awareness dealing with psychiatric patient?
2. Have the students’ knowledge about self-esteem?

**Subjects and Methods**

This study aimed to assess nursing student self-awareness dealing with psychiatric patient.

Subject and methods for this study were portrayed under main designs as follows:

1. Technical design.
2. Operational design.
3. Administered design.
4. Statistical design.

**The Technical Design:**

I-Research design:-

Descriptive design was utilized in this study.

II- Setting:-

This study has been carried out at the Faculty of Nursing, Benha University.

III-Subject:-

The target population of this study applied on nursing students who were undergoing psychiatric nursing experience at Benha Faculty of Nursing, Benha University. These students were in the first semester of last academic year (2008-2009). They were selected at this time because students were beginning being in the realm of psychiatric nursing. The total number of the students was (216). The students were further into two groups: pre lecture with a number of 216 nursing students, and post lecture consisting of 216 nursing students.

III-Sampling:-

All students were selected in this study.

**Tools of data collection:**

The aim of study was achieved through the use of the following tools:

**The tool I:**

An interview questionnaire was modified by the researcher after reviewing of literature and references, whose content has been tailored to assess change in nursing students’ self-awareness in specific areas of personality before and after given of self-awareness lecture. This tool includes the following items.

**A –Socio- demographic data:**

This includes data about students’ age and residence.

**B – Students’ self-awareness data: this is subdivided in three areas.**

I- Area related to significant characteristics of student personality this area is composed of 4 open ended questions.

II- Area related to students’ values and beliefs. It is formed of ten statements to be completed by the study subjects.

III- Self-awareness: this is composed of:

- Open ended questions based on the “Johari window model” for developing self-awareness developed by “11”
Students’ knowledge about benefits of self-awareness for herself and in nursing practice, it consists of two ended questions.

C – Self-sharing tool:
Was composed of three areas:
I- Topics considered by the student as easiest and hardeist to disclose about herself this consisted of “12” statements.
II- Situations that the student wishes to happen for herself it is formed of “13” statements.
III- Characteristics that help the student to relate with others and characteristics that hinder her relation with other people. It consist of “25” characteristics.

D – Students’ expectations and benefits of nursing:
It is formed of three areas:
I- Area related to satisfaction with nursing.
II- Beliefs about helping in nursing practice checklist and open end question about the characteristics of effective helpers.
The score systems for answer were “0” for unknown and no answer and “1” for known and yes answer.
Total score of self-awareness =
< 55 not awareness
56-84 awareness

The tool II:
Modified social self-esteem inventory.
This tool is used to measure the self-esteem level. It includes “20” items “10” positive and “10” negative, each item has a set of three levels (not agree, agree, and very agree).
The score in positive self-esteem was “3” for very agree, “2” for agree, and “1” for not agree. But in negative self-esteem was “3” for not agree, “2” for agree, and “1” for very agree.
Grad “3” indicate high self-esteem, Grade “2” indicate moderate self-esteem, and Grade “1” indicate low self-esteem.
The total score =
0-20 low self-esteem
21-40 moderate self-esteem
41-60 high self-esteem

The operational design:
Preparatory phase:
Review of current and past literature related to topic by using books and magazines periodicals. This was done to get a clear picture of all aspects related to topic of research.

Pilot study:
A pilot study was done before embarking on the field work to check the clarity and feasibility of designed tool to be sure that it was understood and to estimate time needed to complete its items. It was carried out on a sample of 22 students (10% of sample size) from the fourth academic year (2008-2009). The tool then was revised, redesigned and rewritten.
N.B: the pilot study included into the sample.

Ethical consideration:
- The researcher was obtained permissions from the Dean of Benha Faculty of Nursing.
- Subjects were reassured about confidentiality of the information gathered and its use only for the purpose of the study.
- Counseling was provided to subjects needing help.
- The tool of self-awareness was used before from” Abo El-Yazed, (2004)”.
- This phase took three months from (October 2008 to December 2008). The researcher applied working with student for two days a week from 10 am to 1 pm o’clock. The students divided into “11” groups, each group included of “20” students and the last group consist of “16” student.
Before the actual collection of data the researcher explained to the participating student nurses the purpose of study and reassured them questionnaire confidentiality.

Data was collected using the interview method. The sheet was filled for each student during an individual interview in order to be sure that every statement was understood and clear to every student.

**Administrative design:**
A written letter was issued from the Dean of Faculty of Nursing, Benha University, to collect the study data from nursing students.

**Statistical analysis:**
Analysis of data was carried out and the collected data was organized, coded, computerized and tabulated and analyzed by using (SPSS) programs version"11". Data analysis was accomplished by the use of number, percentage distribution, correlation, the mean and standard deviation, and chi- square (X\(^2\)) test, according to "Knapp and Miller, (1992)"

**Results**
Table (1): This table showed that, the total number of students was (216). The majority of them were under 22 years old (62.0%) and only (38.0%) over 22 years old, the mean and standard deviation of them are (21.5±0.7). In accordance with their residence, the majority of them were scoring "Urban area" (65.7%).

Table (2): This table showed that, there was highly statistical significant difference between nursing students’ self-awareness based on “Johari windows model” pre and post lecture but significant only related to unknown to self and known to others. The highest percentage was (94.0%) for known pre lecture related to known to self and known to others. Also post lecture the highest percentage was (97.7%) in it.

Table (3): This table showed that, highest percentage of level of students’ knowledge of self-awareness in pre lecture was (93.5 %) for not awareness, while in post lecture the highest percentage was (69.9 %) for awareness.

Table (4): This table showed that, highest percentage of level of students’ knowledge of self-esteem in pre lecture was (73.6 %) for moderate self-esteem, while in post lecture the highest percentage was (99.1 %) for high self-esteem.

Table (5): This table showed that, there was significant negative correlation between level of students’ knowledge of self-awareness and their residence (r= -0.045, p=<0.05).

Table (6): This table showed that, there was highly statistical significant positive correlation between level of students’ knowledge of self-awareness and their level of self-esteem (r=0.608, p=<0.001)

**Table (1): Distribution of the studied nursing students in relation to their Socio demographic characteristics.**

<table>
<thead>
<tr>
<th>Item</th>
<th>N (216)</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Age in years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;22</td>
<td>134</td>
<td>62.0</td>
<td></td>
</tr>
<tr>
<td>&gt;22</td>
<td>82</td>
<td>38.0</td>
<td></td>
</tr>
<tr>
<td>Mean ±SD.</td>
<td></td>
<td>21.5±0.7</td>
<td></td>
</tr>
<tr>
<td>*Residence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rural</td>
<td>74</td>
<td>34.3</td>
<td></td>
</tr>
<tr>
<td>Urban</td>
<td>142</td>
<td>65.7</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>216</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>
Table (2): Nursing students’ self-awareness based on” Johari windows model” pre and post lecture.

<table>
<thead>
<tr>
<th>Item</th>
<th>Pre lecture</th>
<th>Post lecture</th>
<th>X²</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N=216</td>
<td>No.</td>
<td>%</td>
<td>No.</td>
</tr>
<tr>
<td>A-Known to self and known to others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown known</td>
<td>13</td>
<td>6.0</td>
<td>5</td>
<td>2.3</td>
</tr>
<tr>
<td>B- Un known to self and known to others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>42</td>
<td>19.4</td>
<td>196</td>
<td>90.7</td>
</tr>
<tr>
<td>No</td>
<td>174</td>
<td>80.6</td>
<td>20</td>
<td>9.3</td>
</tr>
<tr>
<td>If yes what is it?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown known</td>
<td>47</td>
<td>21.8</td>
<td>9</td>
<td>4.2</td>
</tr>
<tr>
<td>C-Known to self and un known to others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>134</td>
<td>62.0</td>
<td>165</td>
<td>76.4</td>
</tr>
<tr>
<td>No</td>
<td>82</td>
<td>38.0</td>
<td>51</td>
<td>23.6</td>
</tr>
<tr>
<td>If yes what is it?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unknown Known</td>
<td>27</td>
<td>12.5</td>
<td>7</td>
<td>3.2</td>
</tr>
<tr>
<td>Known</td>
<td>189</td>
<td>87.5</td>
<td>209</td>
<td>96.8</td>
</tr>
</tbody>
</table>

*Highly statistically significant

Table (3): Levels of students’ knowledge of self-awareness pre and post lecture.

<table>
<thead>
<tr>
<th>Item</th>
<th>N= (216)</th>
<th>Pre lecture</th>
<th>Post lecture</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
<td>No.</td>
</tr>
<tr>
<td>Awareness</td>
<td>14</td>
<td>6.5</td>
<td>151</td>
</tr>
<tr>
<td>Not awareness</td>
<td>202</td>
<td>93.5</td>
<td>65</td>
</tr>
<tr>
<td>Total</td>
<td>216</td>
<td>100.0</td>
<td>216</td>
</tr>
</tbody>
</table>

Table (4): Levels of students’ knowledge of self-esteem pre and post lecture.

<table>
<thead>
<tr>
<th>Item</th>
<th>N= (216)</th>
<th>Pre lecture</th>
<th>Post lecture</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
<td>No.</td>
</tr>
<tr>
<td>High self esteem</td>
<td>57</td>
<td>26.4</td>
<td>214</td>
</tr>
<tr>
<td>Moderate self esteem</td>
<td>159</td>
<td>73.6</td>
<td>2</td>
</tr>
<tr>
<td>Low self esteem</td>
<td>0</td>
<td>0.0</td>
<td>0</td>
</tr>
</tbody>
</table>
Table (5): Correlation between Level of students’ knowledge of self-awareness and their residence

<table>
<thead>
<tr>
<th>Item</th>
<th>r</th>
<th>+P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of students’ knowledge of self-awareness</td>
<td>-0.045</td>
<td>&lt;0.05</td>
</tr>
<tr>
<td>Residence</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table (6): Correlation between Level of students’ knowledge of self-awareness and their level of self esteem

<table>
<thead>
<tr>
<th>Item</th>
<th>r</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of students’ knowledge of self-awareness</td>
<td>0.608</td>
<td>&lt;0.001*</td>
</tr>
<tr>
<td>Level of students’ knowledge of self esteem</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Highly statistically significant

Discussion

It is clear from the proceeding discussion that the psychiatric mental health nurse needs a strong sense of self or at least the willingness to develop one. The term sense of self refers to self-awareness or self-knowledge, which is necessary because nurses must be able to separate their own subjective beliefs from the facts. It is necessary that the psychiatric nurse be committed and open to self-exploration. There are many ways for the nurse to do this work: support groups, values clarification work, role-playing, and individual supervision. Self-assessment increases the nurse’s self-awareness and helps develop more effective therapeutic interactive skills (Fortinash, 2004).

In simple terms self-awareness is about trying to understand who people really are and why people do the things people do, in the way that people do them. By becoming a bit more self-aware people can gain a greater degree of control over how people are operating in the present, instead of reacting to something conditioned by people past. Generally, focusing attention on the aspects of the self, people find negative discrepancies and they react by attempting to reduce such discrepancies (Uzzell and Horne, 2006).

Developing self-awareness is a lifelong process that requires continual work. It necessitates disciplined attention to one’s own needs, as well as insight about how to meet them. Nurses also go through ups and downs, rendering them more or less able to respond flexibly and easily to others’ demands. Knowing one’s own limits, detecting signs of becoming exhausted or less to learn, and being able to nourish oneself physically, mentally, and spiritually is essential to becoming a therapeutic agent for others (Mohr, 2006).

The result of the present study revealed that, the total number of students was 216; the highest percentage of them were under 22 years old, while the lowest percentages of them were over 22 years old.

These findings were similar to the study done by El Sayed (2006), and Mohammed (2004) who founded that the majority of baccalaureate nursing student were under 22 years old and the lowest percentage of them were over 22 years old.

Concerning students’ residence, the present study showed that the majority of student from urban area, while the lowest of them from rural area. Table (1) these findings were not similar to Abo El-Yazed (2004), who founded that the majority of baccalaureate nursing student from rural area, while the lowest of them from urban area.

In relation to self-awareness based on “Johari window model” These finding revealed that there is highly statistically significant change in nurse student’s answers, but show significant change related to un known to self and known to others in post lecture than pre. This changes related to three aspect from johari window are “things that the student known to herself, and known to others”, “things that the student unknown to herself, but known to others”, “things that the student known to herself, but unknown to others”. The result found change in their answer and expressed of their weakness and limitation. Then from this finding denote that the important of self-awareness.

These finding agreement with Joseph (2009), founded that the benefit of self-awareness is to feel at ease about yourself, so you don’t fear criticism and you see their opinion from their perspective. Confidence can be instilled from doing this exercise because you can be clear about the actions and personal image you want to project.

Regards to total score of students’ knowledge of self-awareness pre and post lecture show that, the highest percentage of level of students’ knowledge of self – awareness in post lecture than pre. These denote that important of self-awareness in our life and in any scope not only in nursing. Arrange on it creativity and development in any things. Jeffries (2007), suggested that students can benefit from the use of creativity diagnostics, particularly as a
means of raising self-awareness regarding skills relevant to their creative development. Moreover, this diagnostic process has the potential to occur within a mass higher educational context.

Foster, McAllister and O’Brien (2009) stated that an exploration of the ‘self’ is generally considered a fundamental and necessary place from which to commence practice as a mental health nurse. Self-awareness and attention to one’s own feelings, thoughts, and experiences can contribute to the therapeutic use of self in effective provision of mental health nursing care.

Warmerdam (2009) stated that, having self-awareness allows you to see where your thoughts and emotions are taking you. It also allows you to see the controls of your emotions, behavior, and personality so you can make changes you want. Until you are aware in the moment of the controls to your thoughts, emotions, words, and behavior, you will have difficulty making changes in the direction of your life.

Regard to levels of students’ knowledge of self-esteem, the students’ level between moderate and high self-esteem. The highest percentage in post lecture related to high self-esteem than pre. This denotes that when the student is high self-esteem can deal with any patient by confidentially manner and caring of him professionally. Table (4)

Vines, and Rowland (1995), presented an argument for the responsibility for learning to be returned to the students. This produces an environment that fosters a greater capacity for innovation, self-management, self-direction, and initiative, enhancing knowledge, skill, independence, self-reliance, and self-trust—-in a word, self-esteem.

Salloum (2009) stated that high self-esteem also is attributed to the acceptance of self, despite mistakes, defeats, and failure. When people do not attain goals and feel unloved by others, they will feel inferior and have lower self-esteem. People also tend to see themselves as others believe them to be. Body image, sexuality, and other personality traits can be affected by altered health status, and can result in a change in self-esteem.

In relation to correlation between level of students’ knowledge of self-awareness and their level of self-esteem, show positive correlation with highly statistical significant between them. These denote that when founded self-awareness should founded high self-esteem. Table (6)

Kawash, and Clewes (2009), suggest that self-esteem may be more integrated within an individual's total personality functioning than has been discussed in the literature. According to the findings of the present study, it can conclude that improvement of self-esteem of student affected by improvement of self-awareness and arranged on it.

Lastly and not last, we should build high self-esteem in our children in the first then they have self-awareness in elderly.

Conclusion

Knowing and understanding oneself enhances the ability to form satisfactory interpersonal relationships. Self-awareness requires that an individual recognize and accept what he or she values and learn to accept and uniqueness and differences in others. This concept is important in everyday life and in the nursing profession in general, but it is essentially in psychiatric nursing. In order to improve the capacity for self-awareness, nurses must become aware of how they judge themselves and how these judgments impact others and their growth. Self-judgment shuts down self-awareness. To begin to increase self-awareness, seek feedback on the performance from others by asking good questions and listening without justifying or defending them actions. Remember, organizations benefit far more from leaders who take responsibility for what they don't know than from leaders who pretend to know it all.

Self-esteem affects people behaviors, understanding of how the world works and where they fit into it and the communication performance. A person who has high self-esteem will make friends easily, is more in control of his or her behavior, and will enjoy life more.

Concerning students’ knowledge about self-awareness, there was a highly statistical significant difference between students’ knowledge pre and post lecture and highly level of students’ awareness in post lecture than pre.

Regarding to students’ knowledge about self-esteem, there was a highly statistical significant difference and highly level of students’ self-esteem in post lecture than pre.

There were negative correlations between Level of students’ knowledge of self-awareness and their residence. While positive correlations between level of students’ knowledge of self-awareness and level of students’ self-esteem.
Recommendations

In the light of the results of this study the following recommendations are suggested:-

- Throughout academic years, a lecture on self-awareness will help nursing students understand their reaction towards patients, colleagues and others.
- The need to help students further examine their own and others attitudes, beliefs, and worldviews as well as develop a broad contextual knowledge base from various cultures.
- The nurses need to be aware of themselves in relation to other through support and supervision group that offer opportunities for personal professional and growth.
- A course for training psychiatric nurses about development of self-awareness and therapeutic use of self can be developed and implemented. This course should be conducted with self-awareness exercises to improve interpersonal skills.
- Curricular emphasis should be placed on expanding and raising nursing students' awareness of their responsibilities toward patients, especially in challenging or difficult situations, and on improving their concept of nursing as a profession.
- Further studies about self-awareness in nursing are needed as a trend toward professionalism. This studies focus on:
  * Nurses personal values and beliefs which directly affect their interaction with patients.
  * Relation between self-awareness and quality of care.
  * Awareness nurse's satisfaction.
  * Relation between awareness of nurse's personal need and therapeutic use of self.
- Periodic workshop for nurses, working in different settings can help them in their work. The workshop is to be included:-
  * Means of developing empathy to help nurses perceive actual response of patients.
  * Practice self-introspection to help nurses to become authentic, to be authentic is to be the self that nurse truly is by understanding her needs and values that guiding her behavior.
  * Used self-sharing as a method to increase self-awareness without exposure to a sense of vulnerability.
  * Used workshop with student and her father to understand how increase self-esteem in their children from childhood.

References