

Effect of Self awareness Education on the Self efficacy and Sociotropy Autonomy Characteristics of Nurses in a Psychiatry Clinic

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Abstract: To be a part of the therapy in the patients' surroundings, nurses need to know about patient's behaviors, needs, feelings, and ways to define these behaviors. However, to obtain information on patient, nurses particularly need to be aware of themselves and understand the effects they have on their surroundings. This study was aimed to investigate the effect of self awareness education on the self efficacy and sociotropy autonomy characteristics of nurses in a psychiatric inpatient clinic at Zagazig University Hospitals. The sample was composed of 19 nurses who on the job. Three tools were used for data collection: nurses characteristics data form, self efficacy scale, and sociotropy autonomy scale. The study result indicated that the psychiatric nurses self efficacy was improved at post educational program, a significant difference was observed between the pre-test and post-test mean scores for the total nurses autonomy and total nurses sociotropy ($P < 0.05$). However the mean score of total Sociotropy autonomy didn't differ significantly at pre and post educational program ($P = 0.488$), and a highly significant correlation was present between total of self efficacy and total of sociotropy autonomy at pre and post educational program ($P < 0.05$). It was concluded that self awareness education program had a positive effect on the development of self efficacy and sociotropy autonomy characteristics of nurses in a psychiatric clinic. It is recommended that, self awareness education should be applied as continuing education for nurses working in psychiatry clinics and further studies should be carried out with bigger and different sample groups, along with control groups.

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Key words: Nurses, Psychiatry Clinic, Self awareness, Self efficacy, Sociotropy Autonomy.

1. Introduction:

Working with people with mental illness is very challenging and Nurses who work in a psychiatric setting can have a significant impact on the mental status of their patients (Willets & Leff, 2003).

The quality of care nurses provide in a psychiatric setting is related to their skill of using themselves therapeutically in the setting and their ability to show empathy and listen effectively. It is, therefore, very essential that the psychiatry clinics should meet the professional standards of self efficacy and autonomy as determined by the American Nurses Association (ANA) to execute an effective nursing practice. These standards can possibly be achieved by improving several individual characteristics, such as self awareness and ability to give and accept feedback to and from others, as claimed essential for psychiatry nurses by ANA (Maccalum, 2002 & Melrose, 2002).

Self awareness means the discovery of different paths in relationships and life. Forming and maintaining healthy relationships can be promoted as long as individuals are mutually aware of their thoughts, feelings, and behaviors. (Rohrer, 2002).

Self awareness education can be given to health professionals with clinical supervision. The most commonly used method to increase self awareness in a clinical setting is group discussion (Taylor, 1990). The professional psychiatric nurse is aware of the need for ongoing mentorship to achieve increasing levels of mastery of psychiatric nursing practice. Clinical supervision not only reviews one's clinical care but also functions as a support system for the professional psychiatric nurse. (Jack & Smith, 2007).

The development of professional standards of psychiatric nursing also includes participants' self awareness of the use of professional autonomy. For psychiatric nursing, attaining autonomy means being able to define the domain of nursing and being able to exercise control over psychiatric nursing practice. This idea of shaping destiny, rather than letting outside forces be in control, views power as a positive force that allows nurses to attain goals. Autonomy is one of the primary elements of professionalism (Babadağ, 2001).

Autonomy has two major interrelated components. The first one is control over nursing tasks, and the second one is participation in decision making. This second component is particularly problematic for nursing because it requires some nursing conditions such as awareness of self and desire to improve professional performance. (Maccalum, 2002 & Melrose, 2002).

Autonomous individuals are conceptualized as individuals who have excessive personal demands for accomplishment and control. Autonomy is considered to be a combination of beliefs, behavioral dispositions, and attitudes that draw an individual to invest in oneself for one's own uniqueness, mastery over one's bodily functioning, and control over one's environment (Wynd, 2003). In contrast, sociotropy is considered to be a combination of beliefs, behavioral dispositions, and attitudes that draw an individual to attend to and depend on others for personal satisfaction. Highly sociotropic individuals are characterized as emphasizing interpersonal interactions involving relatedness, intimacy, empathy, approval, affection, protection, guidance, and help. Also Sociotropic individuals are conceptualized as having an interest in being loved, approved, esteemed, and praised by others significantly to maintain positive self-image (Şahin & Ulusoy, 2003 ;Sato & McCann, 2007). This means that psychiatric nurses should have self efficacy for increasing the quality of care that achieves these standards (Adams & Miller, 2001; Babadağ, 2001; Potter & Perry, 2005).

McCabe (2000) stated that, the self can be used therapeutically to develop the patient's trust and to promote a sense of wellbeing. By increasing our self awareness we can be more effective in our personal and professional lives. It is, therefore, essential that the psychiatry clinics should meet the professional standards of self efficacy and autonomy to develop an effective nursing practice.

Self efficacy is defined as Perceived concern with people's belief in their capabilities to mobilize the motivation, cognitive resources, and courses of action needed to exercise control over given events (Bandura *et al.*, 1999). Self-efficacy is one of the cognitive factors that influence a person's behaviors and the judgment and belief that one can do a specific behavior in a successful manner (Esra and Olcay, 2009). The study finding by Chye *et al.*, (1997) revealed that self-efficacy of nurses was associated with high performance. Nonetheless, other studies have shown that the self efficacy perception level of nurses can increase through appropriate education methods implemented to nurses, motivation, and positive feedback (Nicoll & Butler, 1996).

Group interaction is a process in which individuals are influenced by each other, receive approval from others, and interact positively, in other words, a process in which their sociotropic characteristics develop (Bieling *et al.*, 2000 & Bagby *et al.*, 2001). Group interaction is at the same time a necessary condition for the development of autonomy and self efficacy in individuals. Within this process, individuals might need to change their emotional, cognitive, and behavioral patterns (Mrayyan, 2005). On the basis of this information, it could be concluded that attempts of increasing self awareness of nurses through group interaction might lead to a more satisfactory and quality care service by influencing the individual characteristics of nurses such as self efficacy, autonomy, and sociotropy.

Continuing education for nurses has been determined to be effective in their development of positive attitudes and helpful in making nurses feel more effective and adequate and in making them act accordingly. Also the self efficacy and sociotropy autonomy characteristics of psychiatric nurses can be changed through a systematically planned education (Ryan & Deci, 2000 & Tanaka *et al.*, 2002). On the basis of this viewpoint, this research was aimed for examining the effect of a self awareness education program on the development of self efficacy and sociotropy autonomy characteristics of nurses in a psychiatric clinic.

The study aim:

The aim of this study was to investigate the effect of self awareness education program on the self efficacy and sociotropy autonomy characteristics of nurses in a psychiatry clinic.

2. Subjects and Methods

Research Hypotheses:

Self efficacy and sociotropy autonomy characteristics of psychiatric nurses can be widen through a self awareness education.

Research Design

A one-group before-after Quasi-experimental design was used to achieve the study aim.

Setting

This study was conducted in a psychiatry inpatient clinic at Zagazig University Hospitals. It has a capacity of 30 beds and provides educational and therapeutic services and training in the field of psychiatry.

Sample

All nurses available in the previous mentioned setting, no age limit, all educational level available was selected for this study (19 psychiatric staff nurses on the job).

Tools for Data Collection

Data was collected by using:

1- Nurses Characteristics Data Form

Nurses' Descriptive Characteristics Data Form A 15-item form developed by the researcher was used to collect data about the nurses' socio-demographic characteristics (age, marital status, residence) and professional characteristics and information that could be reflected in their perceptions (Years of experience ; educational level; Status of satisfaction with current place of work; Status of finding nursing profession appropriate for oneself; Status of considering quitting work on psychiatric ward; Opinion about effectiveness of professional practice; Opinion about patients' appraisal of their care; Opinion about their coworkers' appraisal of their care; Opinion about their supervisors' appraisal of their care; Participation in activities for the professional; Participation in decisions given by team about patients; and Having goals related to professional future).

2- Self Efficacy Scale (SES)

This tool was developed by Jerusalem & Schwarzer (1992). It was created to assess general sense of perceived self efficacy with the aim in mind to predict coping with daily hassles as well as adaptation after experiencing all kinds of stressful life events. It has acceptable Cronbach alpha values for scale reliability (internal consistency value of .81 and test-retest reliability of .92). Self efficacy scale has 21 items in a 4-point Likert-type scale with scores that can be as Good (63-84), as Moderate (42-<63), and as Weak (21-<42).

3- Sociotropy Autonomy Scale (SAS)

This tool was developed by Beck *et al.* (1983), It has acceptable coefficient alpha values for scale reliability ,the internal consistency value for sociotropy was ranged between .89 and .94 and that for autonomy between .83 and .95 Bieling *et al.* (2000). The tool contains 27 items about sociotropy and 28 items about autonomy for a total of 55 items in a 5-point Likert-type scale. A high sociotropy score points to a high sociotropy personality characteristic. A high autonomy score shows an autonomy personality characteristic at a high level.

Procedure

- A consent to conduct the study was taking from the hospital director, the researchers contacted to the staff nurse to explain the purpose and procedure of the study and determine the available time to demonstrate the educational session (twice /week for 1 week).
- The study tools was distributed to the staff nurse in the presence of the researchers to collect pre-assessment data related to nurses characteristics data form, self efficacy scale and sociotropy autonomy scales for 2 weeks twice /week.
- Ten sessions distributed on 15 weeks twice /week , it were provided for available staff nurses , each session was from 30 to 45 minutes
- Each session had its own title and objective according to its content.
- The contents of the educational program were prepared using pre assessment data and textbooks and psychiatric nurses' performance standards that had been defined in the literature. The self awareness education program consisted of the following subjects: introduction to awareness, anxiety, trust, dependence, flexibility, loneliness, helplessness, loss, anger, guilt, and power. (Beck *et al.*, 1984; Stuart, 1998; Pugliesi, 1999; Nezelek, 2002; Rohrer, 2002 & Sheldon & Bettencourt, 2002).
- The objectives of the education program were as follows:
 1. To raise nurses' self awareness of their own feelings, thoughts, and attitudes while working with patients with psychiatric illness (to increase autonomy)
 2. To comment on patient care of nurses working in psychiatric settings (to increase self efficacy).
 3. To increase the development of characteristics of adequacy and sufficiency in nurses working in psychiatric settings (to increase self efficacy).
 4. To promote the development of common solutions to work-related problems by nurses working in a psychiatric setting: exchanging their feelings and thoughts with others working in different environments and receiving feedback from them (to increase sociotropic characteristics).
- post assessment was done through distribution the study tools to the staff nurse in the presence of the researchers to collect post assessment data related to self efficacy scale and sociotropy autonomy scale for 2 weeks twice /week.
- Data collection lasted for 22 weeks which started from March to August 2010.

Statistical analysis:

The collected data were organized, tabulated and statistically analyzed using SPSS software statistical computer package version 13. For

quantitative data, the range, mean and standard deviation were calculated. For qualitative data, comparison between two groups and more was done using Chi-square test (X²). For comparison between means of two groups before and after the conduction of a designed program, paired t-test was used. Correlation between variables was evaluated using Pearson's correlation coefficient (r). Significance was adopted at $p < 0.05$ for interpretation of results of tests of significance. (Petrie and Sabin, 2005)

Limitations of the Study

- Small size of the sample and no control group are the main limitations of this study
- Not being able to apply the program to all samples at the same time as a result of the distribution of nurses throughout the day.

3. Results:

Table (1) revealed that, the studied sample ages ranged from 19 to 53 years, with mean age (33.95 ± 11.91) and their years of experience ranged from 1 to 35 years. More than half of them (52.6%) had a technical institute of nursing, 63.2% were a rural residency, and about two third of them were married (68.4%).

Majority of the studied sample not considering quitting work on psychiatric ward, in the same time they were not participate in activities for the professional development (89.5% and 73.7% respectively). More than half of the studied sample were somewhat satisfied with the current place of work, and had a natural opinion about their coworkers' appraisal of their care (52.6% and 57.9% respectively). About two third of the studied sample revealed that she is somewhat finding nursing

profession appropriate for oneself (63.2%), participated in decisions given by team about patients (68.4%), had nursing professional goals related to future (68.4%), and had a natural opinion about their supervisors' appraisal of their work (68.4%).

It could be concluded that, the studied sample had a positive professional perception and that they made every effort for their professional development.

Table (2) shows the difference between the pre-test and post-test of total nurses self efficacy mean scores, it highly differ significantly at pre and post intervention program ($p = 0.001$). Figure (1) illustrated that, the psychiatric nurses self efficacy was improved at post educational program.

Table (3) shows that a significant difference was observed between the pre-test and post-test mean scores for the total nurses autonomy ($P < 0.05$) and total nurses sociotropy ($P < 0.05$). However the mean score of total Sociotropy autonomy didn't differ significantly at pre and post educational program ($P = 0.488$). Figure (2) demonstrated that total Sociotropy–autonomy scores didn't differ at pre and post educational program.

Table (4) revealed that, a highly significant correlation was present between total of self efficacy and total of sociotropy autonomy at pre and post educational program ($P < 0.05$). Figure (3,4 and 5) revealed that, there was a significant positive correlation between nurses self efficacy and sociotropy autonomy at pre educational program. Figure (6,7 and 8) revealed that, there was a significant positive correlation between nurses self efficacy and sociotropy autonomy at post educational program.

Table (1): Distribution of the psychiatric nurses' professional characteristics and perception of the profession (n=19).

Variables	The studied psychiatric nurses (n=19)	
	NO	%
Age (Years):		
Range	19-53	
Mean±SD	33.95±11.91	
Median	32.00	
Education:		
Nursing diploma	7	36.9
Technical institute of nursing	10	52.6
Baccalaureate degree	2	10.5
Postgraduate degree	0	0
Marital status:		
Married	13	68.4
Single	3	15.8
Widowed	3	15.8
Divorced	0	0
Residence:		
Urban	7	36.8
Rural	12	63.2
Years of experience		
Range	1-35	
Mean±SD	13.58±13.72	
Median	9.00	

Table (1) con.: Distribution of the psychiatric nurses' professional characteristics and perception of the profession (n=19).

Variables	The studied psychiatric nurses (n=19)	
	N	%
Status of Satisfaction with current place of work:		
Satisfied	7	36.8
Somewhat satisfied	10	52.6
Unsatisfied	2	10.5
Status of finding nursing profession appropriate for oneself:		
Appropriate	7	36.8
Somewhat appropriate	12	63.2
Not appropriate	0	0
Considering quitting work on psychiatric ward:		
Considering quitting	2	10.5
Not considering quitting	17	89.5
Opinion about effectiveness of professional practice:		
Good	7	36.8
Neither good nor bad	8	42.1
Bad	4	21.1
Opinion about patients' appraisal of their care		
Positive	7	36.8
Neither positive nor negative	8	42.1
Negative	4	21.1
Opinion about their coworkers' appraisal of their care:		
Positive	4	21.1
Neither positive nor negative	11	57.9
Negative	4	21.1
Opinion about their supervisors' appraisal of their care:		
Positive	4	21.1
Neither positive nor negative	13	68.4
Negative	2	10.5
Participation in activities for the professional development:		
Yes	5	26.3
No	14	73.7
Participation in decisions given by team about patients:		
Participate	13	68.4
Don't participate	6	31.6
Having goals related to nursing professional future:		
Has professional goals	13	68.4
Doesn't have professional goals	6	31.6

Table (2): Distribution of the psychiatric nurses' self efficacy score at pre and post educational program.

Self Efficacy items	The studied psychiatric nurses (n=19)				X ²
	Pre-program		Post-program		
	N	%	N	%	
Good (63-84)	1	5.3	11	57.9	19.40 0.0001*
Moderate (42-<63)	7	36.8	8	42.1	
Weak (21-<42)	11	57.9	0	0	
Range	37-66		60-72		
Mean±SD	42.00±6.84		65.47±4.40		
Median	40.00		64.00		
Paired t-test	11.327				
P	0.0001*				

*Significant (P<0.05)

Figure (1): Level of Self efficacy in the studied psychiatric nurses at pre and post educational program.

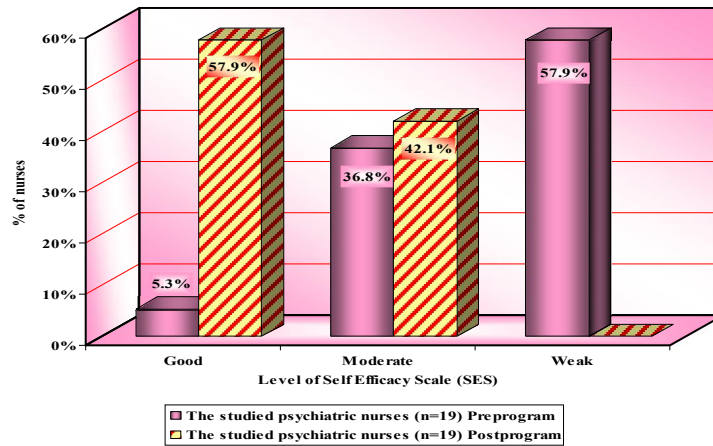


Table (3): Distribution of the psychiatric nurses Sociotropy Autonomy scores at pre and post educational program.

Sociotropy-Autonomy items	The studied psychiatric nurses (n=19)		Paired t-test	P
	Pre-program	Post-program		
	Range Mean±SD	Range Mean±SD		
Sociotropy items:				
A-Fear of criticism and rejection	24-43 38.95±5.80	23-33 26.68±4.95	9.110	0.0001*
B-Preference for affiliation	16-26 24.42±3.48	15-21 17.53±2.43	9.066	0.0001*
Total Sociotropy	41-69 63.37±9.15	38-54 44.21±7.36	9.208	0.0001*
Autonomy items:				
A-Independent Goal Attainment	14-20 15.31±2.13	19-20 19.84±0.37	7.884	0.0001*
B-Sociotropy items	6-8 6.31±0.75	8-8 8.00±0.00	9.798	0.0001*
C-Sensitivity to Others' Control	24-42 29.53±5.89	40-42 41.05±0.40	8.569	0.0001*
Total Autonomy	45-70 51.16±8.50	68-70 68.89±0.56	8.724	0.0001*
Total sociotropy-autonomy	109-119 114.53±2.85	106-123 113.10±7.37	0.708	0.488

*Significant (P<0.05)

Figure (2): Mean score of Sociotropy-Autonomy of the studied psychiatric nurses at pre and post educational program.

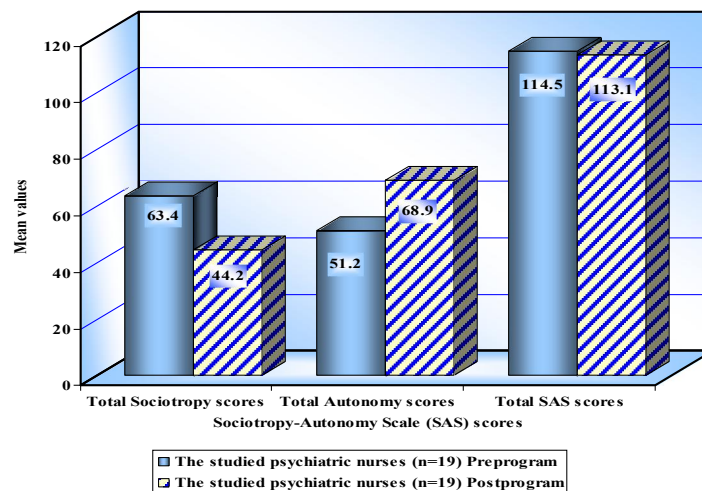


Table (4): Correlation between Self efficacy scale (SES) and Sociotropy Autonomy Scale (SAS) of the studied psychiatric nurses at pre and post educational program.

Sociotropy-Autonomy Scale (SAS)	Self efficacy scale (SES) of the studied psychiatric nurses (n=19)			
	Pre-program		Post-program	
	R	P	R	P
Sociotropy items:				
A-Fear of criticism and rejection	-0.736	0.001*	0.934	0.0001*
B-Preference for affiliation	-0.696	0.001*	0.888	0.0001*
Total Sociotropy	-0.703	0.001*	0.924	0.0001*
Autonomy items:				
A-Independent Goal Attainment	0.671	0.002*	0.692	0.001*
B-Sociotropy items	0.672	0.002*	-	-
C-Sensitivity to Others' Control	0.678	0.001*	-0.545	0.016*
Total Autonomy	0.691	0.001*	0.372	0.117
Total SAS	-0.542	0.017*	0.901	0.0001*

*Significant (P<0.05) r=Correlation coefficient

Figure (3): Correlation between Self efficacy scale (SES) scores and total sociotropy scores among the studied psychiatric nurses at preprogram.

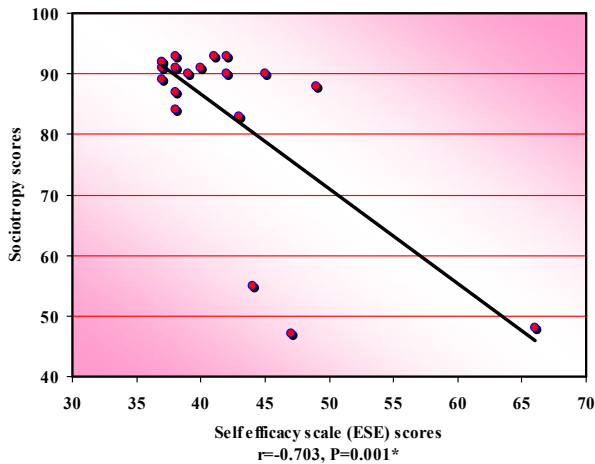


Figure (4): Correlation between Self efficacy scale (SES) scores and total autonomy scores among the studied psychiatric nurses at pre program.

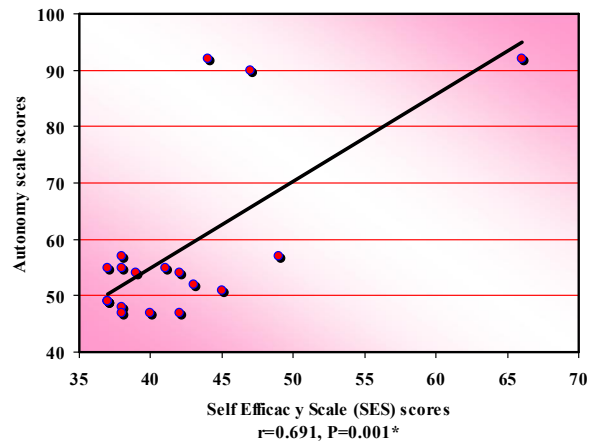


Figure (5): Correlation between Self efficacy scale (SES) scores and total sociotropy-Autonomy scale (SAS) scores among the studied psychiatric nurses at pre program

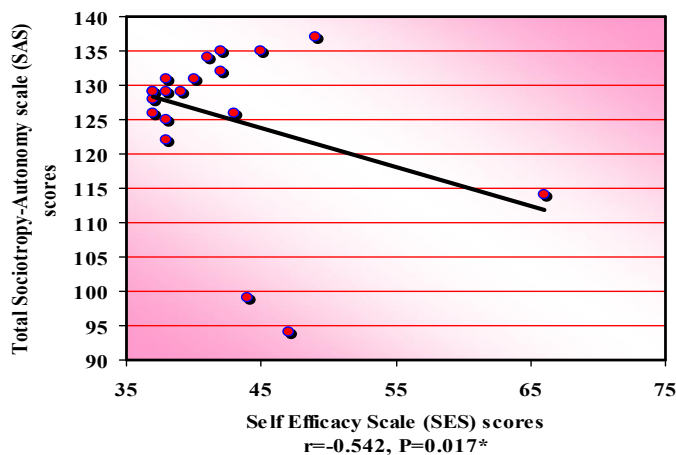


Figure (6): Correlation between Self efficacy scale (SES) scores and total sociotropy scores among the studied psychiatric nurses at post program.

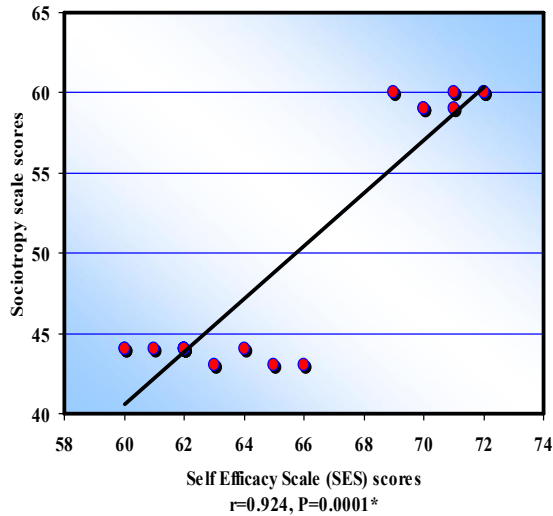


Figure (7): Correlation between Self efficacy scale (SES) scores and total autonomy scores among the studied psychiatric nurses at post program.

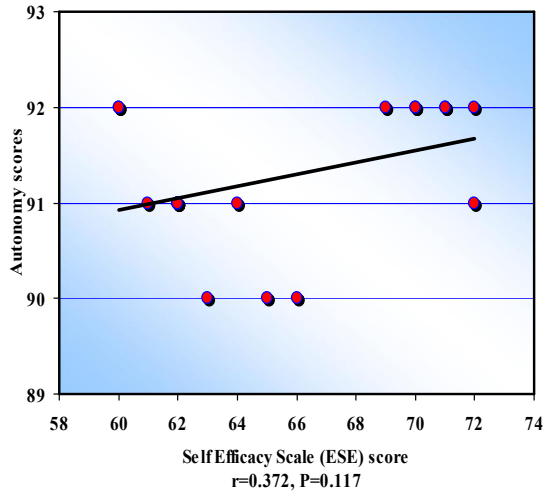
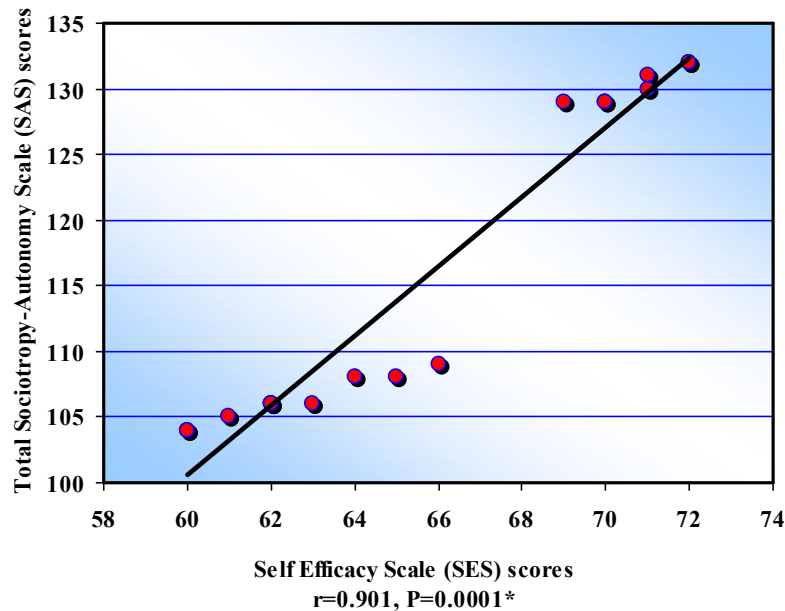


Figure (8): Correlation between Self efficacy scale (SES) scores and total sociotropy Autonomy scale (SAS) scores among the studied psychiatric nurses at post program.



4. Discussion

All health care professionals, such as nurses who work in a psychiatric setting, care for patients through observation by meeting the patients and their families and evaluating individuals' problems, needs, abilities, level of adaptation with their surroundings, and self-concepts. However, to be aware of this information, nurses particularly need to be aware of

themselves and understand the effects they have on their surroundings (Esra and Olcay, 2009).

It can be seen that the nurses in the present study are undergoing a productive period. Moreover, it could be concluded that the professional perception of the nurses participating in the research is positive and that they are qualified to make every effort for their professional development.

As displayed in table 2, figure 1, the mean score of total nurses self efficacy scores were highly differ significantly at pre and post intervention program, it is seen that the pre program self-efficacy perception of nurses was ranged from Moderate (36.8%) to Weak(57.9%) level, increased to Good (57.9%) and Moderate (42.1) level after the education was received, despite the data showing that most of the nurses in the sample found their profession appropriate for themselves and felt satisfied while working, this could be interpreted as a lack of feedback and awareness of feelings in nurses while working.

Consistence with this result Schwarzer (1994 & 1996) and Rohrer (2002) found that people who have high levels of self efficacy exhibit more energy at the beginning of an action, and they continue this longer than do those with low self efficacy. When faced with an obstacle, those with high self efficacy group more quickly and continue to work to reach their goals.

On the same line Esra and Olcay (2009) added that, the education had a positive effect on the nurses' self-respect, motivation for success, and ability to control events. According to our best knowledge about self awareness, if we are aware of our emotions, thoughts, and behaviors, we can lead our activities. In addition, in an occupational setting, self efficacy plays a role in how well employees perform their jobs (Schwarzer, 1996; Bandura *et al.*, 1999 & Rohrer, 2002).

On the other hand Dunn *et al.*, (2007) argue that awareness of feelings is especially significant for nurses in psychiatry clinics to cope with feelings such as anger and that it directly affects the self efficacy perception of nurses.

The education program also affected the autonomy of the nurses who participated in the present study that increased after educational program. In addition to the nurses' finding more satisfaction with their work, this situation could be expected to have a positive effect on their relationships with coworkers and patients under their care.

This study results is consistent with self awareness knowledge , Beck's (1987) cognitive theory and Rohrer (2002) who they found that increasing autonomous personal characteristics, along with increasing individuals' feelings of success, was the cause for an increase in motivation to do their work. A highly autonomous person is characterized as emphasizing individuality, self-reliance, personal achievements, and a sense of power to do what one wants.

The present study result indicated that 89.5% of the nurses in the sample stated that they had not considering quitting working in a psychiatry clinic

and that they willingly choose their profession . Studies by Adams & Miller(2001); Babadağ(2001) and Kelleci & Gölbaşı (2004) reported the same result and relates it to the self-control and autonomy of these individuals , they assumed that nurses with a high level of autonomy would play a more effective role in meeting the criteria of their profession.

The present study result also demonstrate in table (3) , figure (2) that the level of study sample autonomy was higher than their sociotropic characteristics at post education, it may be related to the study sample positive professional perception. Although the total Sociotropy autonomy scores didn't differ at pre (mean=114.53) and post (mean=113.10) educational program, this result indicated the balanced sociotropy autonomy nurses characteristics that it was expected to be observed in this study for the education program was aimed to increase the ability to give and accept feedback to and from others and to increase sociotropic characteristics , in the same time to increase autonomy. This findings agrees with Sato & McCann (2007) who reported that functional interpersonal styles have balanced sociotropy autonomy characteristics

The study finding revealed that ,there is a highly significant correlation was present between total of self efficacy and total of sociotropy autonomy at pre and post educational program, this may be due to the functional interpersonal styles have balanced sociotropy autonomy characteristics. In addition the working in psychiatric setting required the nurses have a special skills to be autonomous in the same time sharing their feelings in the group by providing feedback about care plan examples of team relationships and helpful attitudes to have with patients and they were willing to have approval of others, and the needs they felt for love and respect in the group were increased, and in this way, their sociotropic personal characteristics increased as well. In this study, this finding supported Beck's (1987) cognitive theory and Esra and Olcay (2009).

Different factors may influence whether group members are willing to provide or accept feedback and the acts of giving or receiving feedback may have different impacts (Marcus, 2006). The major influential factor in our education can be the exchange of emotions and related experiences. The literature also supports our findings on this type of self awareness education method that involves group supervision feedback (Stuart, 1998).

5. Conclusion

On the basis of the findings of this study, it can be concluded that self awareness education program has a positive effect on mounting self efficacy and autonomy personal characteristics in our

sample, and a highly significant correlation was present between total of self efficacy and total of sociotropy autonomy.

6. Recommendation

-Self awareness education should be applied as continuing education for nurses working in psychiatry clinics.

- Further studies should be carried out with bigger and different sample groups, along with control groups.

- Further studies should be carried out to investigate the relationship between self efficacy, work stress and psychiatric nurses' performance.

-The findings of this study would help in developing standards for psychiatric and mental health nursing.

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