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Short Commentary on Factors Related to Self-Esteem among Psychiatric Nurses: Including Experience of Developing Negative Feelings toward Patients

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Commentary

This study of 'Factors Related to Self-Esteem among Psychiatric Nurses: Including experience of developing negative feelings toward patients'[1] is research that reports factors related to self-esteem among psychiatric nurses including the experience of developing negative feelings toward patients.

Nurses attach importance to good relationships with patients to accomplish nursing purposes. However, patients in distress or with impaired cognitive functions due to illness may occasionally display unreasonable behaviours toward nurses. Although nurses earnestly try to understand the import of the behaviours of patients, and act to the benefit of the patients, there are cases where nurses develop negative feelings towards patients, presenting ethical conflicts [2]. The present study is useful to assist psychiatric nurses to develop careers in a sound manner while maintaining self-esteem.

In this study, a self-administered questionnaire survey was conducted with 737 nurses working in nine non-public psychiatric hospitals in one region of Japan. The questionnaire included questions about "demographic", "working environment factors: it including the Negative Feeling toward Patient Frequency scale (NFPF) [3], a scale that measures the experience of negative feelings objectively", "mental health" and Japanese edition [4] of Self-Esteem Scale by Rosenberg [5]. Using the total score of a self-esteem scale as the dependent variable, a multiple regression analysis was conducted. Factors that showed statistically significant correlations are high environmental mastery dislike for the experience of negative feelings toward patients, respondent being married, presently assistant head nurse, coping behaviour by discussing with relevant persons when having concerns at the workplace, and respondents who had been working longest in surgery wards. The findings suggest the effectiveness of providing the following support: (a) to prevent developing excessive feeling of dislike when experiencing negative feelings toward patients, (b) to help acquire skills and understanding to know how to assist patients as a means to control the human and physical environments including psychiatric nurses themselves, and (c) to develop coping strategies for communication with those involved when encountering negative events at the workplace.

The findings of this study may not be generalizable as the study subjects are limited to a specific region of Japan, and because the study employed a cross-sectional design. However, the study significance lies in showing a conflict for nurses in relation to the self-esteem of psychiatric nurses, and uses the Negative Feeling toward Patient Frequency scale (NFPF). Nurses are specialists, trained to practice the sense of ethics that respects the rights and dignity of patients. This is a reason nurses tend to regard it as inappropriate to harbour negative feelings toward patients. It is natural for people to experience unstable emotions, both positively and negatively when interacting with others. However, if nurses focus on the discipline shown in the Code of Ethics for Nurses and on the discussion of nursing ethics related to decision making of patients, nurses may come to blame themselves for having negative feelings toward patients without knowing how to deal with and react to the negative feelings [2]. In other words, conflicting "feelings", a primitive emotion, are different from conflicts based on rationally developed conclusions, and it is difficult to cope with such conflicts only by establishing ethical norms and decision processes, as well as by the commonly offered proposals for solving "negative feelings". If it is possible for nurses to distinguish between unstable emotions and efforts to respect the rights and dignity of the patients, these feelings toward patients may protect nurses from developing excessively strong feelings of dislike toward themselves, to maintain pride as a nurse, and not inhibit a positive career development.

For the future, it is required to emphasize respect for the rights and dignity of patients, as well as maintain good relationships, closely observing situations that generate negative feelings, and expand the scope of discussions for the development of nursing ethics in accordance with clinical settings to help nurses develop careers in a healthy manner.

References

1. Matsuura R, Suzuki E (2017) Factors Related to Self-Esteem among Psychiatric Nurses: Including experience of developing negative feelings toward patients. Japan Academy of Nursing Science 37: 319-328.
2. Matsuura R (2010) Ethical Conflict of Nurses with Negative Feelings to Patients. The Journal of the Japan Academy of Nursing Administration and Policies 14: 77-84.

3. Matsuura R, Suzuki E (2014) Developing a Negative Feeling Toward Patient Frequency Scale. Japanese Journal of Human Science of Health-Social Services.
4. Yamamoto M, Matsui Y, Yamanari Y (1982) The Structure of Perceived Aspects of Self. The Japanese Journal of Educational Psychology 30: 64-68.
5. Rosenberg M (1965) Society and the Adolescent Self-Images. Princeton Univ Press 21: 1-11.