Original Article

Examination of student nurses' self-recognition and codependence

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Abstract

Objectives: Because the nursing profession demands the provision of services and continuous interaction with people uninterruptedly for 24 hours a day, self-recognıtıon is important for nurses. With the patient aiming to fulfil his/her needs for care and the nurse without adequate self-recognıtıon aiming to compensate her own emotional needs, both parts can reciprocally compromise on their own needs and become dependent on each other in the relationship. The aim of this study to examine the self-recognition of the nursing students and the conditions of co-dependence.

Methods: The research has been designed to be quantitative, cross-sectional and correlative. Sample of the research consists of 446 students attending nursery undergraduate program. Giessen Test (GT), Co-dependency Assessment Tool (CODAT) and a data collection form, which includes socio-demographic characteristics, have been applied to participants. Data analysis has been carried out with the SPSS 18.0 packet program. Mean, standard deviation, and the minimum and the maximum values were calculated for the quantitative variables. Pearson's correlation test was used for analyzing the independent variables.

Results: The study demonstrated that the fourth-grade students preferred to be controlled, socially potent, and submissive, and they had depressive personality characteristics. Regarding the co-dependency status of the nursing students, it was observed that the first-grade students tended to focus on the others, their self-worth was high, and they displayed a hiding self compared to the fourth-grade students. A positive correlation was found between self-awareness and co-dependency. Also, it was found that self-worth was positively correlated with the social potency-social impotency and hypomanic-depressive features ($p<0.01$).

Conclusion: Self-recognıtıon and co-dependency characteristics of student nurses were affected by self-worth, social potency/impotency, and hypomanic-depressive characteristics. İn order to prevent/correct co-dependence and to improve self-recognıtıon adequately in student nurses, education and training activities for supporting students' self-worth, self-recognition, affecting their mood and social potency favorably.

Keywords: Co-dependence; nursing; self-recognition.

The American Association of College of Nursing's "The Essentials of Master's and Doctoral Education for Advanced Nursing Practice" documents promote improving the self-recognition and patient understanding skills of nurses in their encounters with patients and healthy individuals in the course of their multi-dimensional education.[1] Self-recognition is highly important in establishing healthy nurse-patient relationships because it assists in accurately understanding the patients' behaviors, encouraging the patients to collaborate and develop self-confidence, and achieving a change in the patients to promote autonomy.[2,3]

"Recognition of the self" includes the concepts "self-awareness," "knowing one's self," and "understanding the self" and it is a cognitive process where the person discovers their thoughts, emotions, beliefs, and values and gains insight into the feedback received from others.[3,4] This process is based on

What is known on this subject?

• Self-recognition and codependence are important in nurse-patient relationships.

What is the contribution of this paper?

• According to the results of the research, there was a relationship between self-recognition and codependence of student nurses.

What is its contribution to the practice?

• It can pave the way for training programs for student nurses to improve their self-awareness, social potency, and capacity for recognizing the effects of mood changes so that the development of codependence can be prevented.

the concept of self, which integrates emotional and behavioral components and the attitudes shaping and orienting the personality, making the person unique and distinct from others.[5,6]

Self-concept is a way of perceiving and conceptualizing one's self, including interactions with others.[5] In general, how other individuals perceive a person is based on that specific person's thoughts and conscious perceptions about herself/himself.[5,6] The congruency between the ideal self and the real self is critical during these processes. The ideal self is "who the person would like to be" while the real self is "how the person is perceived by others in reality." The higher the degree of congruency between these two concepts, the better the individual differentiates what is inclusive or exclusive about herself/himself.[5] Therefore, the degree of the development of one's self is determined by the degree the individual is aware of herself/himself and the degree of the closeness of this awareness to reality.[5,6]

The development of self is critical for nursing because this profession requires patient interactions and care twenty-four hours a day.[3,7] For instance, a nurse can plan and prioritize the steps of care after determining whether she/he is sincere towards the patient and after recognizing her/his values, behaviors, attitudes, emotions, feelings, and opinions towards a patient when this patient argues: "How do you know what I feel? Have you ever thought that you will die of suffocation?". [2,3] On the other hand, a nurse with an insufficiently developed self and a lack of self-recognition may take this patient reaction personally and negatively, be unable to establish and sustain a comfortable relationship, and may not care about the needs of the patient. Consequently, the self-confidence of the nurse may be impaired leading to feelings of insufficiency and depression.[3,8,9] When the nurse gives up her/his needs to compensate for the demands arising from the insufficiently developed aspects of self and when the patient begins to give up her/his needs to ensure that the required care will be provided, they may become reciprocally dependent on each other.[10,11] This kind of nurse-patient relationship, which promotes and sustains a reciprocal dependency of both parties, is considered codependence in the nursing literature.[12]

The nursing literature states that neglecting one's self for the sake of other people's needs may establish codependence. [10,13] Nurses experience several mental and physical disorders when they perceive themselves as insufficient, ignore their negative feelings to prevent feelings of self-worthlessness and ensure they are appreciated, and sacrifice their personal requirements to respond to the needs of others.[14] Therefore, helping nurses overcome the physically and mentally challenging condition of codependence requires the recognition of the relationship between feelings, opinions, and behaviors of one's self.[12,15] Therefore, the nurse should have a mature self and the capacity to know her/himself. Thus, by communicating with self-confidence, she/he can establish equal, safe, and independent relationships with patients and healthy individuals.[12]

When the literature was reviewed, no studies were found that demonstrate the association between the levels of self-recognition and codependence. To the best of our knowledge, the present study is the first to provide evidence in this field in nursing education, practice, and research.

Materials and Method

This is a quantitative, cross-sectional, and correlational study.

This present study aimed to examine the self-recognition of nursing students and the conditions of codependence. The answers to the following questions were sought: "do nursing students have the ability for self-recognition?", "what is the codependence level of nursing students?", and "are self-recognition and codependence associated?"

Participants

The study participants were selected from the first-year and fourth-year nursing students of Ankara University and Ankara Yıldırım Beyazıt University. In order to evaluate self-awareness skills and the tendency to develop codependency, the study included first-year student who had not completed the self-awareness and communication courses or developed skills in nurse-patient relationships along with fourth-year student nurses who had completed the self-awareness and communication courses and had some experience in nurse-patient relationships. The student nurses who had a history of treatment for mental disorders were excluded from the study.

Instruments

The data were collected from the fourth-year nursing students of the baccalaureate program before graduation at the end of the spring 2016–2017 semester. For the first-year students, the data were obtained at the beginning of the fall semester in the academic year 2016–2017. The Giessen test (GT), the Codependence Assessment Tool (CODAT), and a sociodemographic characteristics information form were used to collect data.

Giessen Test (GT)

The GT is a personality assessment tool developed to determine how a person perceives herself/himself in interpersonal relationships for individuals older than 18 years old. It is composed of two parts, which are the "self" and the "other." The

"self" part assesses which features the individual ascribes to herself/himself and the "other" assesses how the individual perceives a significant other.[16] This present study employed the "self" part of GT.

The "self" part of the scale consists of 25 questions and 4 subscales. The subscales are:

Uncontrolled-Controlled: The personality features assessed include being overly-tidy/untidy, easy-going/overzealous, and able to let go/unable to let go.

Social Potency-Social Impotency: The individual's interactions with the environment are assessed in terms of being sociable, capable of establishing lasting relationships, and having a closed attitude.

Dominant-Submissive: The characteristics of one side include being independent, good at acting, and impulsive and those of the other side include being passive, patient, and subordinate.

Hypomanic-Depressive: It demonstrates whether aggressive efforts are reflected upon the self or outwards, assessing self-reflection.

The correlation coefficient of the original scale is 0.72. The correlation coefficients and the Cronbach's alpha values of the subscales used in this study are presented in Table 1.

The items are scored on a seven-point Likert scale (-3, -2, -1, 0, 1, 2, 3) and the middle point of the scale is zero. The individuals mark the number indicating the most appropriate condition for them. The scoring of the items is assumed to be 4 during the evaluation of the data if a questions is unanswered or two answers are present. If the number of items with erroneous scoring were six or more, the results of the test were excluded from the analysis.

The mean, maximum, and minimum raw scores of the subscales are presented in Table 2. The mean score of the scale is 48. The subscale scores higher than the mean score of the scale indicate positive personality characteristics, whereas the scores lower than the mean score are indicative of negative characteristics. The subscale scores equal to the mean score indicate traits are present in both spectrums.

Codependence Assessment Tool (CODAT)

The tool was developed by Hughes-Hammer et al. (1998) to determine codependence states. The validity and reliability of the tool in Turkish were studied by Ançel and Kabakçı (2009). The tool consists of 5 subscales and 25 items, which are scored on a Likert-type scale. The subscales are:

Focus On Others/Self-Neglect: Compulsively controlling people and giving advice in order to control events.

Self-Worth: Self-worth is defined by emotions, thoughts, and beliefs, which could also be expressed in bodily sensations.

Hiding Self: Hiding self refers to the use of a "positive front" by controlling or repressing negative emotions.

Medical Problems: The medical problems factor reflects the preoccupation with real or imagined health problems accompanied by worry.

The Family of Origin (While Growing Up): Unhappiness due to being brought up in a family where several problems or substance dependence was an issue or where emotional expression was lacking.

The Cronbach's alpha value of the original scale is 0.75. The correlation coefficients and the Cronbach's alpha values of the subscales used in this study are presented in Table 3.

CODAT does not have a cut-off point and is scored on a five-point Likert-type scale. The minimum and the maximum scores of the scale are 25 and 125, respectively. The mean value is 30. Table 4 presents the minimum, maximum, and mean raw values of the subscales.

Student Data Form

This form was developed by the investigators to document

Table 1. Correlation coefficients and Cronbach's alpha values of the subscales of the Giessen test		
Giessen Test Subscales	**Correlation Coefficient**	**Cronbach's Alpha**
Uncontrolled-Controlled	0.86	0.90
Social potency-Social impotency	0.74	0.83
Dominant-Submissive	0.70	0.82
Hypomanic-Depressive	0.70	0.82

Table 2. The mean, maximum, and minimum raw scores of the Giessen test subscales			
Giessen Test Subscales	**Minimum**	**Maximum**	**Mean**
Uncontrolled-Controlled	10	42	26
Social potency-Social impotency	05	35	20
Dominant-Submissive	12	42	27
Hypomanic-Depressive	6	40	23

Table 3. Correlation coefficients and Cronbach's alpha values of the codependence assessment tool (CODAT) subscales

CODAT Subscales	Correlation Coefficient	Cronbach's Alpha
Focus on others/self-neglect	0.78	0.84
Self-worth	0.86	0.92
Hiding self	0.82	0.86
Medical problems	0.74	0.80
Family of origin (while growing up)	0.70	0.76

Table 4. Minimum, maximum, and mean scores of the codependence assessment tool (CODAT) subscales

CODAT Subscales	Minimum	Maximum	Mean
Focus on others/self-neglect	05	25.00	15.00
Self-worth	06	30.00	18.00
Hiding self	05	25.00	15.00
Medical problems	04	20.00	12.00
Family of origin (while growing up)	05	25.00	15.00

the participants' sociodemographic data including age, gender, and marital status.

Ethical Consideration and Procedures

A written form was submitted to the ethics committee of the university to obtain permission to conduct the study. The permission was obtained with the date 31.03.2016 and number 258. The institutional permissions were obtained from the nursing departments of the universities where the study was conducted. The aim of the study was orally explained to the eligible participants. Written informed consent forms were obtained from the eligible participants when they agreed to participate. The students filled out the forms in the classroom. Explanations were provided in response to questions and about the items related to the scales. Completing the data collection forms took approximately 30 minutes.

Data Analysis

Data analysis was performed with the Statistical Package for the Social Sciences 18.0 (SPSS 18.0) program. After entering the data collected from the questionnaires into SPSS, a second investigator reviewed and cleaned the data prior to the statistical analysis. The quantitative variables are summarized as mean, standard deviation, and minimum and maximum values in the tables. The correlation of the test scores was assessed by calculating the Pearson's correlation coefficient. P values lower than 0.01 or 0.05 were considered statistically significant.

Results

Of the students participating in the study, 68% were first-year (females, n=231; males, n=65) and 32% were fourth-year (females, n=118; males, n=19) students. The mean age of the

Table 5. Distribution of the Giessen test (GT) subscale scores of the nursing students (n=433)

GT Subscales	Mean±SD	Minimum	Maximum
First year			
Controlled-Uncontrolled	24.92±5.64	12.00	44.00
Sociable-Unsociable	32.04±6.56	12.00	42.00
Dominant-Submissive	34.00±6.84	14.00	48.00
Hypomanic-Depressive	22.84±5.82	10.00	36.0034.00
Fourth year			
Controlled-Uncontrolled	31.02±6.50	14.00	42.00
Sociable-Unsociable	25.64±5.34	12.00	40.00
Dominant-Submissive	26.84±5.72	8.00	42.00
Hypomanic-Depressive	20.01±4.76	6.00	34.00

SD: Standard deviation.

Table 6. Distribution of the codependence assessment tool (CODAT) subscale scores of the nursing students (n=433)

CODAT Subscales	Mean±SD	Minimum	Maximum
First year			
Focus on others/self-neglect	08.02±3.92	10.00	28.00
Self-worth	26.14±5.84	10.00	36.00
Hiding self	12.24±5.24	8.00	24.00
Medical problems	9.10±4.26	8.00	32.00
Family of origin issues	12.28±6.62	14.00	46.00
Fourth year			
Focus on others/self-neglect	24.01±5.64	14.00	44.00
Self-worth	16.24±4.68	10.00	22.00
Hiding self	18.02±4.02	12.00	24.00
Medical problems	08.24±3.68	8.00	12.00
Family of origin issues	10.03±3.46	8.00	14.00

SD: Standard deviation.

participants was 20.10±2.31. Most of the students were single (97.7%) and unemployed (95%).

Table 5 presents the mean scores of the GT subscales associated with self-recognition. Compared to the mean figures in Table 2, the first-year nursing students had relatively lower scores in the uncontrolled-controlled subscale (Mean±SD=24.92±5.64), whereas they had higher scores in the social potency-social impotency (Mean±SD=32.04±6.56), dominant-submissive (Mean±SD=34.00±6.84), and hypomanic-depressive (Mean±SD=22.84±5.82) subscales. Compared to the mean figures in Table 2, the fourth-year nursing students had relatively higher scores in the uncontrolled-controlled (Mean±SD=31.02±6.50), social potency-social impotency (Mean±SD=25.64±5.34), and dominant-submission (Mean±SD=26.84±5.72) subscales. However, they had lower hypomanic-depressive subscale scores (Mean±SD=20.01±4.76). These mean values indicate that the first-year students displayed personality characteristics including being uncontrolled, socially potent, independent, self-confident, active, and lively, whereas the fourth-year students had traits including being controlled, socially potent, submissive, and depressive.

Table 6 presents the nursing students' mean scores of the CODAT subscales associated with codependence. Compared to the mean figures in Table 4, the first-year nursing students had a higher score in the self-worth subscale (Mean±SD=26.14±5.84), but lower scores in the focus on others/self-neglect (Mean±SD=08.02±3.92), hiding self (Mean±SD=12.24±5.24), medical problems (Mean±SD=9.10±4.26), and family of origin (while growing up) (Mean±SD=12.28±6.62) subscales. The fourth-year students had higher scores in the focus on others/self-neglect (Mean±SD=24.01±5.64) and hiding self (Mean±SD=18.02±4.02) subscales but lower scores in the self-worth (Mean±SD=16.24±4.68), medical problems (Mean±SD=08.24±3.68), and family of origin (while growing up) (Mean±SD=10.05±3.46) subscales.

Pearson correlation analysis was used to determine the correlation between CODAT and GT. The analysis demonstrated

Table 7. Correlation between codependence assessment tool (CODAT) and the Giessen test (GT)

CODAT	GIESSEN Test (GT)			
	Controlled-Uncontrolled	Social potency-Social impotency	Dominant-Submissive	Hypomanic-Depressive
	(r)	(r)	(r)	(r)
Focus on others	.077	.080	-.059	-.058
Self-worth	-.071	.018**	.084	.014**
Hiding self	-.022	.034	.033	-.059
Medical problems	-.027	.062	.019	-.068
Family of origin issues	.033	.022	.003	-.064

**Pearson Correlation is significant at the p level of 0.01 (2-tailed).

no correlations between the total scores of GT and CODAT. However, the self-worth subscale of CODAT was positively correlated with the social potency-social impotency (r=.188, p<0.01) and hypomanic-depressive (r=.148, p<0.01) subscales of GT (Table 7).

Discussion

The present study determined the levels and correlation of self-recognition and codependence in nursing students. The first parameter examined was self-recognition in nursing students. The results indicated that the first-year students were uncontrolled in terms of being tidy, easy-going, good with money, and ability to let go; socially potent and independent in interpersonal relationships; and self-confident. However, the fourth-year students were controlled in being tidy and easy-going, socially potent, and submissive and depressive in interpersonal relationships. These results might be primarily associated with the university entrance examinations in Turkey and secondarily associated with culture and family structure.

Although university entrance is a highly challenging process in Turkey, the achieved academic success, accompanying praise of the family and social environment, and the monetary support received from the family might cause an elevated self-esteem and help first-year university students have a high level of self-confidence. On the other hand, it might also lead to being more independent in interpersonal relationships, more uncontrolled in terms of money, and an inability to let go. International studies have drawn attention to the positive and significant correlation between self-esteem and academic success, reporting that the experience of success elevates self-esteem, allows for promotion in any aspect, and facilitates independent behavioral skills in interpersonal relationships. [17,18] Peyrovi et al. (2011)[19] demonstrated that the self-recognition and self-perception of nursing students are associated with their academic success as well as with socio-economic parameters such as residential area and economic level, whereas Jirdehi et al. (2018)[20] reported that self-recognition is associated with familial components. It was also reported that individuals who grew up feeling safe and valued in a family develop positive self-perception and self-esteem and consequently these might be attributed to the societal culture.

In addition to the abovementioned factors, other factors may also be effective including the support provided to the students for overcoming problems they faced, socializing in professional environments, prioritization of self-recognition, and promotion of self-esteem. Therefore, a curriculum and support enhancing the nursing students' self-assertiveness and self-esteem may provide benefits.

Studies suggest that the use of various educational methods based on simulation and arts in the nursing curricula may help students alleviate their worries, enhance their competencies in problem-solving, elevate their self-esteem, and ensure their self-recognition.[21–23] Indeed, studies have reported that the development of student-centered methods focusing on giving performances, acting, experiencing, and experience sharing with the use of movies and accompanying constructive feedback may form a basis of self-recognition in students. [24] Some studies emphasize the effective role of theatre-associated methods including drama and psychodrama in helping nurses to understand themselves, discovering others' points of view, and establishing relationships both with their own emotions and thoughts as well as with their patients.[25–27] In addition, studies report that positive social interaction skills and responding to challenges in the nurse-patient relationships in a controlled manner can be taught in the curricula to help improve self-recognition abilities. These studies also demonstrate these skills contribute positively to health care behaviors.[28,29]

Our study, secondly, examined the codependency status of nursing students. The behaviors of focusing on others and hiding the self were scored higher in the fourth-year students compared to the first-year students and their self-worth scores were lower. Therefore, one may argue that the nursing education prioritizes meeting the needs of others, consequently causing the nurses to neglect themselves and to internalize negative feedback from others, eventually lowering their self-worth. This suggests that self-neglect and lower levels of self-worth are the characteristics of codependence, which is culturally associated with being a female. Similarly, the literature reports that self-worth in women is based on sensitivity and valuing the happiness of other individuals and that having a positive feeling about themselves depends on their relationship with others.[30] In addition, the relationship with the mother is critically important in patient-nurse interactions and the development of self-worth in terms of establishing codependence.[31,32]

In addition, the inability to deal with stress factors, including disapproval, being considered inexperienced in the clinical environment, and lack of knowledge and skills in approaching patients from different cultures may lead to a decrease in self-worth and self-esteem in students. Moreover, self-esteem and self-worth of student nurses increase in association with being recognized and valued as a student nurse. Socializing in professional environments enhances self-confidence. Without this recognition and socialization, relatively lower levels of self-esteem will be observed.[33,34]

The characteristics of the Turkish culture and the way of raising children might have caused the observed codependence in the participating students. Considering that the students might have been brought up with the "do not let it out of this room" philosophy, which is a common theme in Turkish culture, several issues might have been experienced by the students in the family of origin, including problems in their relationship with their parents, an insecure and unaffectionate environment, and physical or psychological aggression. All of these untoward issues might have been kept as secrets that negatively affected the development of self-worth in the students, increasing the potential to develop codependence. The studies about codependence and self-worth have highlighted

that codependence levels are higher in nurses with lower levels of self-confidence and self-worth[35,36] and that witnessing or being subject to physical violence in the family or growing up in a dysfunctional family with parental conflicts, emotional abuse, or neglect might significantly hamper the development of self and lead to the development of codependence.[37–39]

Finally, the relationship between self-recognition and codependency was investigated, but no correlations were identified. In regards to the correlation between the subscales of the CODAT and GT, which measure levels of codependency and self-recognition, respectively, self-worth was positively correlated with the social potency-social impotency and hypomanic-depressive sub-dimensions of GT. This finding might have resulted from the influence of cultural factors since social potency includes society's approval of the individuals and, from the cultural point of view, it leads to the assumption that this approval will increase self-esteem. During times when personal needs become incongruent with the expectations of society, one may feel depressed and codependent, depending on her/his experience-based inferences.[40] To intervene, individuals may be assisted in improving their capacities for self-recognition to gain self-expression skills, and most importantly, awareness may be created to prevent the development of codependence so that the balance between society and individuals can be established.

Limitations

Although this study contributes to the literature significantly, there are some limitations in data collection. The data were collected only from the first- and fourth-year nursing students attending two different universities from which institutional permissions were obtained. Therefore, the study results cannot be generalized to the whole population of nursing students.

Conclusion

The study found a positive correlation between self-awareness and codependency. In addition, self-worth was positively correlated with social potency-social impotency and hypomanic-depressive features. These results suggest that the professionals responsible for the education of nursing students need to revise their approach within the framework of the curriculum so that nurses with a high level of professional skills will graduate with qualifications of being competent in self-recognition, having higher levels of self-esteem and self-confidence, and being able to understand and recognize the self and the other. It is suggested that further studies examining similar subjects with larger sample sizes need to be conducted, having both genders equally distributed within the study population.

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