

Unit-III

Self- perception & self-
concept

--

- Self-concept (an individual's perception of self) affects every aspect of life, including relationships, functional abilities, and health status
- No two people have an identical self-concept
- self-concept is what helps make each individual unique.
- Everyone has both positive and negative self-assessments in the physical, emotional, intellectual, and functional dimensions, which change over time and according to the context of the situation

- Because self-concept is an individual's frame of reference for perceiving and interacting with the world, it exerts a powerful influence on one's life.
- neither visible nor tangible, a positive self-concept is one of the greatest strengths a person can possess
- One's view of self affects the ability to function
- positive self-concept approach new experiences and tasks with confidence;
- they expect to be accepted by others and to succeed

--

- the person with a negative self-concept tends to shy away from others and to avoid challenges.
- Self-concept greatly influences health status. For example, a person with a positive self-concept is more likely to care for one's self—physically, emotionally, and spiritually.

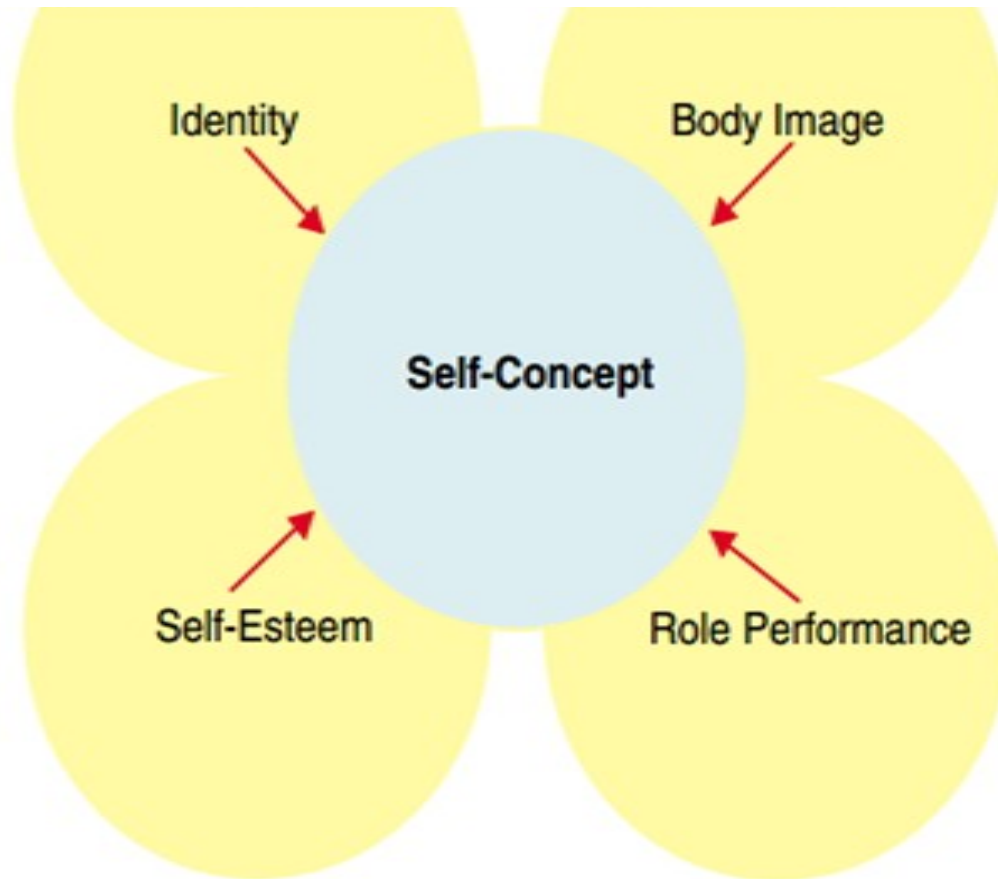


Figure 19-1 The Interrelationship of the Components of Self-

- COMPONENTS OF SELF-CONCEPT
- Self-concept is composed of four components: identity, body image, self-esteem, and role performance.

Identity

- what sets one person apart as a unique individual.
- A well-formulated identity provides the answer to the question “Who am I?” Identity may include a person’s name, gender, ethnic identity, family status, occupation, and various roles.

Body Image

- an attitude about one’s physical attributes and characteristics, appearance, and performance.
- dynamic because any change in body structure or function, including the normal changes of growth and development, can affect body image.

--

Self-Esteem

- Is an individual's generalized sense of worth and value, or how a person regards self.
- **refers** to an individual's self-evaluation, whereas self-concept is a broader term encompassing an individual's overall self-description.
- The level of self-esteem at any given moment can be influenced by many factors.
- Individuals will make decisions on what life factors (for example, physical attributes, skills, social accomplishments) they deem important and will calculate their self-esteem on the basis of their achievement of the factors they value most highly.
- These values will be based on the individual's familial and cultural background and influenced by societal standards.

--

- Self-esteem will vary over time depending on the situation
 - (e.g., new job), the environment (e.g., cocktail party with strangers), and an individual's level of development and overall self-confidence.
- Role Performance
- Refers to a set of expected behaviors that are determined by familial, cultural, and social norms.

--

- Individuals fulfill several roles simultaneously—parent, sibling, friend, spouse, student nurse.
- Each role has a set of expected behaviors, that is, a belief about how a person in that role should behave.
- The nurse may assume several different roles, such as counselor, teacher, leader, or surrogate parent.

--

- Whenever a person is unable to fulfill role responsibilities, self-concept is impaired In addition to overload;
- another common problematic role experience is role conflict, which occurs when the expectations of one role compete with the expectations of other roles.
- The person may feel unable to establish priorities among competing role expectations.

DEVELOPMENT OF SELF-CONCEPT

- changes during each developmental stage.
- Developed primarily in response to social interactions and experiences.
- According to Stuart and Laraia (1998), the ongoing process of self-concept development is facilitated by the following:
 - Interpersonal and cultural experiences
 - Self-perceived competence
 - Self-actualization (living up to one's potential)

Childhood

- Self-concept is not innate; rather, it develops through-out the life cycle as a result of social interactions.
- An infant whose basic needs are met in a warm, consistent manner develops positive feelings about self.
- Formation of self concept occurs in the following manner:

--

- 1) During infancy, the child develops a self-perception of being separate from the environment (including parents);
 - (2) As the child ages, perspectives (especially of the parents) are internalized; and
 - (3) Society's norms (e.g., expectations of appropriate behavior) are then internalized by the child.
- A child's sense of self is shaped by family experiences and interactions with parents and siblings.

--

❑ Adolescence

- The numerous changes in physical, emotional, and psychosocial status that characterize the adolescent years bring about rapid and often continuous changes in self-concept.
- Impressions about self from childhood may be internalized or challenged.

❑ Adulthood

- Self-concept continues to develop and change as individual progresses through the adult years.
- Periods of relative stability in self-image may be interspersed with realizations of physical changes in body size, proportion, characteristics, and energy levels, all of which will influence perception of self.

FACTORS CONTRIBUTING TO SELF-CONCEPT ALTERATIONS IN THE OLDER CLIENT

- ✓ Changes in environment
- ✓ Ageism (social stigma against the elderly)
- ✓ Loss of significant others (including pets)
- ✓ Social isolation
- ✓ Illness, acute or chronic
- ✓ Financial change
- ✓ Altered Health Status
- ✓ Experience

Nsg process

□ ASSESSMENT

- When assessing a client's self-concept, the nurse must consider both the client's developmental level and chronological age.
- addressed at a level that reflects their current condition as well as their cognitive competence.
- Use d/t material for understanding. e.g. picture if illiterate.

--

- determine the client's perception of self-concept and the factors affecting it.
- Behavior, thoughts, and emotions are affected by self-concept.
- It is important to attend to the client's verbal and nonverbal clues.
- Self-concept is reflected in a person's behavior and conversation.
- Individuals who feel they are unable to accomplish goals will experience changes in eating, sleeping, and activity patterns.

Body Image and Self-Esteem

☐ Body Image

- What do you like best about your body?
- What do you like least about your body?
- If you could change how you look, what would you change?

☐ Self-Esteem

- What do you like best about yourself?
- What do you like least about yourself?
- How do you describe yourself to others?
- How would others describe you?
- What are your strengths and weaknesses?

--

- ❑ The client's strengths are a foundation on which to build therapeutic interventions. Some areas to assess include the client's ability to:
 - Develop and maintain appropriate relationships
 - Care for self in order to meet basic needs
 - Adapt to stressors in a positive manner
 - See table high and low self esteem indicators.

--

❑ DIAGNOSIS

- Individuals experiencing self-concept disturbances usually have feelings of anxiety, hostility, guilt, and shame.
- Self-concept alterations affect every aspect of a person's life: emotions, relationships, and functional ability.

E.g. Disturbed Body Image

- Parental Role Conflict
- Chronic Low Self-Esteem
- Situational Low Self-Esteem
- Social Isolation
- Hopelessness
- Powerlessness

--

- ❑ Outcome identification and planning
 - For clients with an altered self-concept, a major nursing goal is to promote the client's sense of well-being and to facilitate growth.
 - This involves teaching coping skills and the effective use of personal resources.

--

□ Implementation

- Whether a client is experiencing optimal level of health or an alteration in health, a high degree of self-esteem is important to a positive outcome.
- The nurse needs to find ways to support positive self-esteem.
- In attempting to support the client's high self-esteem, the nurse should try to learn sources of self-esteem for the client and reinforce them.

--

a) Initiate Therapeutic Interaction

- Self-concept, or lack of it, affects the nurse-client relationship.
- using a non-judgmental approach, the nurse encourages clients to feel more positive about themselves
- use of open-ended statements facilitates open, honest communication
- Active listening is essential in working with clients experiencing self-concept alterations
- applying therapeutic communication skills, the nurse facilitates the development of trust and rapport.

--

b) Support Healthy Defense Mechanisms

- Use of defense mechanisms is a common reaction to anxiety or a perceived threat.
- First identify the client's strengths and successful coping mechanisms before formulating and implementing a plan of care

c) Ensure Satisfaction of Needs

- The relationship between satisfaction of basic needs and psychological comfort is undeniable.
- When needs are unmet, anxiety increases.

--

❖ Physical Needs

- self-concept stems in part from the client's perception of personal appearance, competencies, and limitations.
- It includes the client's self-perception as well as others 'perceptions.
- Self-esteem is generally decreased as a person becomes more dependent on others

--

❑ Psychosocial Needs

- Uncertainty escalates anxiety.
- Explain procedures, telling the client what is expected and what is going to occur.
- -The following nursing actions promote the client's psychological safety:
 - Respect a client's privacy
 - Treat each client as an individual worthy of dignity.
 - Encourage the client to be as independent
 - Promote Positive Self-Esteem across the Life Span

--

□ Evaluation

- ✓ A client's behavior and attitudes will reflect the degree of progress toward restoring an altered self-concept
- ✓ The nurse must reconsider the alignment of the client's targeted self-concept
- ✓ consideration of time b/c self-concept is based on personal attitudes, feelings, and impressions, it often requires months or even years to change.

the end!!!