Self Esteem, Competence Assessment and Nurses Ability to Write Reflectively

- Is there any connection?

Wendy Tustin-Payne
Masters of Nursing - 2008
WINTEC

Abstract

Background: Since the introduction of the Health Practitioners Competence Assurance Act 2003, nurses practicing in New Zealand are required by law to have evidence to support they are competent to practice. However many nurses have become distraught and / or angry at this prospect. From experience, the researcher suggests that this response appears to be more commonly related to the expectation of undertaking reflective writing, which is a key component of the competence evidence.

Aim: To explore the predisposing factors relating to nursing, reflective writing and competence to determine how this may impact on a nurse’s self esteem.

Method: Utilisation of Critical Social Theory informed by feminist framework allows for exploration of the historical, social, political and cultural factors that shape and form female nurses reality in practice. It is a theory that relates to oppression and power, with the primary intent being to raise consciousness in order to emancipate.

Findings: Although no definitive findings were made, there are multiple factors relating to nurse’s history, socialisation, political imperatives and cultural beliefs that have the potential to impact on their self esteem. Competence, competence assessment and reflective practice are complex, therefore presenting multiple challenges.

Conclusion: In order for nurses to understand their contextual reality and opportunities for change there is a need for them to engage in critical reflection. As context has the potential to have a significant impact on nurses self esteem, further research is needed to understand how it may influence nurses, their practice and the nursing profession.

Biography
I commenced my hospital based nursing training in 1973 at Hutt Hospital. It was a memorable time clouded with controversy, as I worked alongside some of New Zealand’s first polytechnic trained nurses, who had joined one of two pilot schemes.

Following my registration I began a career in paediatrics, both hospital and community based, until undertaking a position as a Professional Development and Recognition Programme Coordinator in 2002. This change in direction, accompanied by my
introduction to postgraduate education in mid 1999 has helped to shape my practice as an educator, with only a brief return to paediatrics in the preceding six years. My current role is Nurse Coordinator Graduate Nurse Programme for the Bay of Plenty District Health Board.