

Introduction

Mental health is defined by Healthy People 2010 as the ability of individuals to negotiate the daily challenges and social interactions of life without experiencing cognitive, emotional, or behavioral dysfunction (*Abel and Adams, 2008*).

Psychotic disorders are a group of serious illness that affects the mind. These illnesses alter person's ability to think clearly, make good judgment, respond emotionally, communicate effectively, understand reality and behave appropriately. When symptoms are severe, people with psychotic disorders have difficulty staying in touch with reality and often are unable to meet the ordinary demands of daily life, however, even the most severe psychotic disorders usually are treatable. About 1 % of the population worldwide suffers from psychotic disorders. These disorders most often first appear when a person is in his or her late teens, 20 or 30s. They tend to affect men and women equally (*Fortinash and Worret, 2003*).

Psychiatric mental health nursing are the diagnosis and treatment of human responses to actual or potential mental health problems. Psychiatric mental health nursing is a specialized area of nursing practice employing theories of human behavior as its science and purposeful use of self as its art (*Shives and Louise, 2007*).

The Psychiatric Mental Health Nurse Practitioner specialty focuses on the promotion of mental health for individuals, families, and groups across the lifespan. Psychiatric mental health nursing involves education, research, and practice directed at the treatment of mental

illness and optimizing mental health. PMHNPs work in partnership with their clients to provide care for the whole individual using nursing science and psychological theory to understand how mental health affects overall health (*Abel and Adams, 2008*).

The psychiatric nurses, as a member of the multi-professional mental health team, utilises a goal-directed approach to assist the psychiatric patient in mobilising resources to promote, restore and maintain his mental health as an integral part of his quest for wholeness. This goal-direct approach is the nursing process which comprises assessment, planning, implementing and evaluation. All four steps of the nursing process and the nurse's interaction with the patient are dependent upon therapeutic communication. Therapeutic communication remains important as the core of all nurse-patient interactions (*Sibeko and Greeff, 2004*). The clinical practice of psychiatric-mental health nursing occurs at two levels, basic and advanced. At the basic level, registered nurses work with individuals, families, groups and communities, assessing mental health needs, and developing a nursing diagnosis and a plan of nursing care, implementing the plan and finally evaluating the nursing care (*Dole, Johnson, and Chairs, 2009*).

The group includes registered psychiatric nurses and graduate psychiatric nurses. They provide direct services to persons whose primary health needs are related to their emotional or mental well being. Psychiatric nurses deliver mental health education programs to a variety of patients and are employed in a variety of settings including general hospitals, mental health centers, community clinics, personal care homes, crisis centers, community agencies, psycho-social rehabilitation

programs, community agencies and companies, or they may be self employed (*Ashdown, 2009*).

By no mean nurses can not care empathically for people, recognize and responds to their feeling if they are not in touch with their own. It can be difficult to respond appropriately to a person's distress if they can not face and deal with their own emotional pain. It is right that the unknown sides of nurses appear like an uninvited guest in their interaction with patients. In nursing, the professional nurses are direct reflection of their selves. Responsibility for their own action especially toward others will flourish in an environment which fosters growth of self and independence (*Barker, 2003*).

The nurse should re-evaluate and readjust beliefs and attitudes periodically as he or she gains experience and wisdom ongoing self-awareness allows the nurse to accept values, attitudes, and beliefs of others that may differ from his or her own. A person who does not assess personal attitudes and beliefs may hold a prejudice (hostile attitude) toward a group of people because of preconceived ideas or stereotypical images of that group. *For example*, a nursing student comes from a white, protestant, middle -class environment, until beginning nursing school in a multicultural urban environment, she had little experience with cultures other than her own. She came with an ethnocentric attitude of believing that her culture was superior to all others. Once she became friends with students from Mexico and Kenya, she began to realize that each is as important as the others. By letting her new experiences and friends become part of her view of the world, the student has revised her beliefs and attitudes and expanded her understanding of people and the world (*Videbeck, 2008*).

Becoming self aware does not mean being selfish though. Discovering the inner you will enable you to give more of yourself to others and this will benefit your relationships as well as helping to build your self esteem and confidence as you become truer to yourself (*Perera, 2006*).

Self-awareness is the process by which the nurse gains recognition of his or her own feelings, beliefs, and attitudes. It's a consciousness of her personality. It is the act of looking at her self, considering her abilities, characteristics, aspirations, and concepts of self in relation to others. It is her alertness to her personal and social behavior and their impact on other (*forchuk, 2008*).

Self awareness is the process of developing an understanding of one's own values, beliefs, thoughts, feelings, attitudes, motivations, prejudices, strengths, and limitations and how these qualities affect others. Self- awareness allows the nurse to observe, pay attention to, and understand the subtle, responses and reactions of clients when interacting with them (*Videbeck, 2008*).

Nurse must understand their own personal feelings and beliefs and try to avoid projecting them onto clients. The development of self awareness will enhance the nurse's objectivity and foster a nonjudgmental attitude which is so important in building and maintaining trust throughout the nurse- client relationship (*forchuk, 2008*).

The single most significant point for dispelling the confusions which sometimes infest talk of self awareness is that it need have nothing whatsoever to do with consciousness. No single definition of self awareness commands a dominant mind share in the specialist literature,

and it is true that it is sometimes conflated with consciousness. But within the context of analyzing cognition and of building robots, we are safe in treating self awareness as a purely cognitive characteristic, while 'consciousness' refers to the phenomenal properties of mental processes (*Daniel, 2008*).

Remembering that very stressful day of psychiatric nursing clinical made author decide to blog about self awareness. Because looking back, author must admit that his reported to his first day of psychiatric nursing clinical ill-prepared. Author was judgmental, prejudiced, and guilty of stereotyping my patient. Author was not a tad therapeutic. Simply put, author lacked self-awareness (*Freelancer and Strategist, 2009*).

In the area of personal development, there is often a lot being said about the need to remain positive or to have a positive mental attitude (PMA). However, what is less talked about is the importance of your self concept and self-esteem and how these key factors directly influence your ability to maintain a positive mental attitude (*Schlessinger, 2006*).

Self-esteem is a major key to success in life. The development of a positive self-concept or healthy self-esteem is extremely important to the happiness and success of children and teenagers (*Myers, 2008*).