Psychosocial Development of Baccalaureate Nursing Students with Examination of Self Injurious Behavior

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Demographic Data

- Total participants: 38 Caucasian Females
- Ages:
  - 18 years: 10 (26%)
  - 19 years: 6 (16%)
  - 20 years: 7 (18%)
  - 21 years: 6 (16%)
  - 22 years: 5 (13%)
  - 23 years: 1 (3%)
  - 24 years: 2 (5%)
  - 40 – 45 years: 1 (3%)
- Freshmen: 12 (32%)
- Sophomore: 8 (21%)
- Junior: 5 (13%)
- Senior: 13 (34%)
Method

- Qualitative methodology & self administered quantitative research instrument
- Purposive sample
- Undergraduate student enrolled in a bachelor of science in nursing program, 18 years of age; self-identified as having practiced self injurious behavior at least once.
- Recruitment Process
Data Collection & Analysis

- Web-based survey
  - Measures of Psychosocial Development
  - Qualitative questions
    - to explore and describe the experience of self-injury as told by participants themselves

- Statistical Analyses of MPD responses of group
- Major themes and patterns - converted to the language of conceptual science and synthesized into a general structure of the meaning of the experience
Self report inventory which assesses degree of psychosocial development and adjustment

Erikson’s 8 stages

112 questions that can be completed in 15 – 20 minutes by most adult respondents.
Findings

Levels of Psychosocial Development

Stage 1 – Trust versus Mistrust
- P1 – Trust
- N1 – Mistrust

Stage 2 – Autonomy versus Shame and Doubt
- P2 – Autonomy
- N2 – Shame and Doubt
Levels of Psychosocial Development

Stage 3 – Initiative versus Guilt
- P3 – Initiative
- N3 – Guilt

Stage 4 – Industry versus Inferiority
- P4 – Industry
- N4 – Inferiority
Levels of Psychosocial Development

Stage 5 – Identity versus Identity Confusion
- P5 – Identity
- N5 – Identity Confusion

Stage 6 – Intimacy versus Isolation
- P6 – Intimacy
- N6 – Isolation
Levels of Psychosocial Development

- Stage 7 – Generativity versus Stagnation
  - P7 – Generativity
  - N7 – Stagnation

- Stage 8 – Ego Integrity versus Ego Dispair
  - P8 – Ego Integrity
  - N8 – Ego Dispair
Self-Injury

Qualitative

- 34% (13 of 38) - Participated in self-injurious behavior
- 66% (25 of 38) – No self-injurious behavior
- 29% (11 of 38) – More than one episode
First Experience

- 11 -18 years of age
- Angry
- Overwhelmed
- Depressed
- Alone

Method

- Cutting (knife, scissors, razor blade, butter/steak knife, apple slicer)
- Clawing at wrists, biting, picking at skin, hair, eye lashes
- Safety pins
- Burning
- Throw-up
- Hit solid objects
Thoughts, Feelings, Situations

- Guilt
- Habit
- Anxious; Depressed
- Hopeless, Lonely, Sad
- Anger; Frustration
- Emotional pain
- Stress
- Unhappy

Suicide

- Ideation
- Overdose
- Wrist cutting
Important Elements in Life

Currently
- Family, friends, school, significant other
- Education - Becoming a nurse
- Life
- Being happy & occupied
- Having more money; independence

Hopes & Dreams
- Marriage & children
- Satisfying career – Be a good nurse
- Advanced Education
- To help others; Leave a positive mark on others/community
- Being happy & occupied
What Nursing Faculty Need to Know

- It can be anyone.
- It is more common than professors think – good at covering it up
- Do not be judgmental. Empathize. School is stressful. Self-injury is an outlet to emotional pain. Make environment less stressful; less intimidating;
- Help students learn to handle the stress in the major and career
- People who cut are not bad people – they need help