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Increasing Self-Awareness in Nursing

Adrienne Irene Abbot
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Walden University

College of Nursing

This is to certify that the doctoral study by

Adrienne Irene Abbot

has been found to be complete and satisfactory in all respects,
and that any and all revisions required by
the review committee have been made.

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Walden University
2023

Abstract

Increasing Self-Awareness in Nursing

by

Adrienne Irene Abbot

MS, Walden University, 2010

Project Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Nursing Practice

Walden University

November 2023

Abstract

Nursing self-awareness is essential for nurses to develop relationships with co-workers and patients. In the local organization, the practice problem for this doctoral project is a perceived low level of self-awareness in nursing. This Doctor of Nursing project aimed to determine if an educational intervention focused on self-awareness and the benefit of self-awareness increased knowledge among nurses working on a medical-surgical unit. A comprehensive literature review of peer-reviewed evidence provided evidence to support this project. A total of 26 individuals ($N = 26$) participated in the educational intervention. Eighty-nine percent (89%) of the participants ($n = 23$) were female, and ($n = 3$) were male. The mean age of the participants was 38.9 years ($SD = 12.43$), ranging from 21 to 62 years. On average, the participants had 14 years ($SD = 11.42$) with a range of 2 to 40 years of nursing experience and had been in their current position for 3.79 years ($SD = 3.73$) with a range of 0.5 to 13. The mean pretest score for knowledge was 86.9 ($SD = 14.63$), with a range between 50 to 100. The mean posttest score for knowledge was 98.5 ($SD = 3.25$), with a range of scores between 90 to 100. Using a Wilcoxon to estimate the data, there was a statistically significant difference in pretest and posttest scores ($z = -3.45$, $p < 0.001$), indicating increased participant knowledge. As a result, providing an education session on self-awareness can increase the nurse's understanding of self-awareness with the hope that the increased knowledge will translate into practice and the development of the translation into practice will result in patient, provider, and organizational change, generating positive social change.

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Dedication

I wish to dedicate this project to all nurses who believe in continuous self-improvement to become the best example of caring nurses they can be.

Acknowledgments

I want to acknowledge my DNP mentor, Dr. Patricia Schweickert, who has supported and encouraged me throughout my academic journey. Thank you for pushing me forward. To Dr. Marilyn Losty, thank your guidance and support. My husband and two children have watched me struggle but pulled me up and supported me throughout the journey.

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Section 1: Nature of the Project

Introduction

Self-awareness is an essential skill that enables nurses to develop therapeutic relationships with patients and is directly associated with high patient satisfaction, as indicated by empathetically delivered quality care (Eckroth-Bucher, 2010; Gulay, 2017; Haley, 2017; Rasheed & Younas, 2018). As a result, self-awareness and knowledge of self-awareness are critical to nursing practice (Haley et al., 2017), as self-awareness enhances a nurse's decision-making capacity, necessary thinking skills, and ability to form therapeutic relationships with patients (Rasheed et al., 2021). Developing a therapeutic relationship may increase patient satisfaction, an essential indicator of healthcare quality (Haley et al., 2017). Patient satisfaction correlates with lower malpractice risks, increased employee satisfaction, reduced turnover, and improved patient loyalty (Vogus & McClelland, 2016). In addition, self-awareness among nurses may increase empathy, promoting a stronger relationship between nurse and patient (Gulay, 2017).

Problem Statement

Nursing is an interpersonal relationship between the patient and the care-providing nurse. Gaining self-understanding, support, and self-awareness may improve the nurse's behaviors to become natural and support interpersonal relationships (Han & Kim, 2016). Self-awareness is understanding and acknowledging one's feelings, motives, desires, and character (Haley et al., 2017). It affects how nurses present themselves to patients, which can affect how patients perceive the quality of care (Lehman et al., 2015).

Although implementing traditional patient satisfaction strategies such as interdisciplinary rounding methods on patients, patient involvement in handoffs, and reviewing specific patient needs such as positioning, pain assessments, or toileting, the organization's patient satisfaction scores remained low on the medical-surgical unit in the rural organization. Given the importance of self-awareness in promoting a stronger relationship between nurse and patient (Gulay et al., 2017), increasing the understanding of self-awareness among nurses may be a plausible strategy that ultimately may result in improved patient satisfaction and positive patient outcomes.

Purpose Statement

This DNP project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit. Based on the literature, the educational program on self-awareness was intended to highlight the importance of knowing how a person comes across to others through verbal and non-verbal cues, the importance of self-awareness on patient satisfaction, and the introduction to a self-awareness tool. The tool was a newly created pre- and post-educational survey to determine if the educational session increased nurses' self-awareness knowledge. It is hoped that the increase in understanding among the nurses can then be translated into practice and, as a result, will ultimately improve patient satisfaction among the patients receiving care in the organization.

Nature of the Doctoral Project

Sources of data collected for this project were established from a pretest and posttest educational session survey (Appendix A); the survey intended to measure the impact of the academic session in increasing the level of nurses understanding regarding self-awareness. The program was presented in person. The pretest included six demographic questions to describe the sample and ten questions to establish a beginning knowledge level of self-awareness. The posttest contained the same 10 questions and measured the ending level of knowledge among the participants. The face validity of the educational session, pretest, and posttest was established by a review of materials by organizational stakeholders to ensure that all content is relevant and includes critical content. Flyers were used to advertise the educational intervention for registered nurses, and an invitation was sent to all nurses working in the medical-surgical unit at the hospital. Before the educational intervention, participants completed the pretest. Following the educational intervention, the posttest was presented. The participants created and used a unique identifier to match the pretest to the posttest. All data were reported in the aggregate. Descriptive analysis was used to describe the sample, and inferential statistics were used to determine if there was a difference in pretest and posttest scores regarding knowledge of self-awareness.

Significance

Nurses must be clinically competent in today's healthcare environment, establish positive patient relationships, and promote high-quality care (Kirkpatrick, 2019). Self-awareness for nurses is essential, as it enhances critical thinking and the ability to

develop a healing relationship with patients (Rasheed et al., 2021). Rasheed et al. (2021) stated that self-awareness is a fundamental skill every professional nurse should possess. In addition, Haley (2017) noted that patient-centered care develops relationships with patients that meet the patient's needs and desires. For a nurse to establish such a relationship, the nurse must be able to care, share, and communicate (Haley et al., 2017). One of the critical factors for developing communication that improves quality and develops competency in establishing relationships for professional nurses is the understanding of self-awareness and the nurse's ability to believe in the impact of self-awareness (Rasheed et al., 2021).

Potential significance and contributions to nursing practice from this doctoral project include the ability for nurses to grow their knowledge and awareness regarding self-awareness, increase the quality of care provided, and increase their understanding of the caring connection between nurses and patients (Haley et al., 2017). Given that listening, caring, and showing compassion are essential elements of self-awareness and are critical to the patient's experience, the lack of self-awareness can affect the perception of empathy (Gulay, 2017). In evaluating this project, similar practice areas within a hospital setting may also be gained from nursing education in self-awareness when interacting with the patient, family, and team members (Beckett et al., 2019).

Social change is defined as changes in human interactions and relationships that can transform organizations as a society. As a society, we attempt to make the changes we need or want to see (Read et al., 2016). This project can impact positive social change by empowering nurses with knowledge surrounding self-awareness and the importance of

self-awareness, which can be translated into practice and, ultimately, result in a higher level of quality patient care.

Summary

This DNP project examined whether an education session for nurses can increase a nurse's understanding of the impact of self-awareness in nursing. Self-awareness is an essential skill for nurses, enabling the development of therapeutic relationships with patients, and it is directly connected to improved quality of care (Eckroth-Bucher, 2010; Gulay, 2017; Haley, 2017; Rasheed & Younas, 2018). Unfortunately, many organizations struggle with improving patient satisfaction scores, even by implementing evidence-based practices such as hourly rounding and bedside reporting (Beckett et al., 2019). Potential contributions to nursing practice include the ability for nurses to improve their understanding of self-awareness, thus increasing their ability to establish stronger relationships with patients and improve the quality of care. The following section presents the background and context of the project, explaining the reasoning behind the concepts, models, and theories used to inform the project. It also highlights their significance to the field of nursing practice.

Section 2: Background and Context

Introduction

The practice problem for this doctoral proposal was the organizational need to improve patient satisfaction scores for the medical-surgical unit in a rural hospital. Despite trying traditional methods, the scores continued to decrease as measured by Press Ganey scores and written patient comments that nurses' body language, nursing comments, and nursing actions may cause patient dissatisfaction (Press Ganey, 2018). Thus, it is hoped that by educating nurses on the importance of self-awareness, the increased knowledge may translate into practice and improve patient satisfaction scores. Therefore, the project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit. The practice-focused question is, "Does an educational intervention focused on self-awareness and the benefits of self-awareness increase knowledge among nurses working on a medical-surgical unit?"

Concepts, Models, and Theories

Jean Watson's theory of caring was used for this doctoral project on self-awareness. Watson's caring theory is a middle-range theory focusing on the human connection between nurse and patient, and according to Watson (2018), caring in nursing results in patients expressing their problems and concerns openly without judgment or criticism. Watson (1997) defined self-awareness as the ability of nurses to listen by being in the moment, listening, and leaving all chaos and personal judgment behind to connect with a patient. The rationale for using Watson's caring theory emphasizes establishing a

loving relationship and being present to provide a healing environment. Watson's theory of caring focuses on seeing the patient as an individual, not just a diagnosis or a patient assigned to a room number. Connecting with patients individually creates a sense of safety and comfort for patients at their most vulnerable times.

For example, hospitals have searched for evidence-based practices to improve quality, safety, and patient perceptions of care. Centers For Medicare and Medicaid (CMS) pay for performance programs depending on the patient's perception of care. CMS focuses on the clinical care process and the patient experience (Hui-Chuan et al., 2020). Watson's theory of caring emphasizes that creating a relationship provides a higher sensitivity for the patient of caring for them as an individual, providing a safe and caring environment. As a result of striving to improve the patient's experience, many organizations have trialed and implemented best practices, such as shift reports to the bedside.

Literature has shown that moving shift reports to the bedside improves safety, patient satisfaction, and nurse satisfaction (Gonzalo et al., 2016). Patient hourly rounding is an additional best practice organization to enhance safety and patient perception of care. Fabry (2015) stated that organizations implementing hourly rounding improve safety and patient perception of care. Hourly rounding and bedside reporting are tasks performed by nurses to seek improved communication, safety, and patient perception of care. Establishing a healing relationship with patients is a critical competency some nurses may need to possess (Rasheed et al., 2018). The nurse's power to become aware of their responses to patients, whether negative or positive, can increase one's self-

awareness and become more faithful to themselves and others (Rasheed et al., 2021). Improving a nurse's self-awareness enhances the relationship between the nurse and the patient through a therapeutic relationship that improves the perception of care by the patient. (Oyur et al., 2017). Nurses who develop listening, caring, and self-awareness skills increase their ability to form therapeutic relationships with patients. A therapeutic relationship promotes a sense of connection and improves the patient's perception of care, increasing patient satisfaction (Feo et al., 2017).

Relevance to Nursing Practice

Self-awareness is the ability to recognize one's reasoning for emotional reactions and to understand one's responses to a particular situation or different people (Rasheed, 2015). Self-awareness in nursing is essential for creating a healing and trusting relationship between nurses and patients. Self-awareness is understanding and acknowledging one's feelings, motives, desires, and character (Haley et al., 2017). The evidence to inform the project was derived from a concise systemic review of relevant literature for the best evidence to inform the educational program.

Literature on self-awareness in nurses and the capacity of nurses to become self-aware is limited. The themes identified through the literature search included that self-awareness should be a competency of registered nurses, providing the ability to establish a relationship with patients. Self-awareness raises the nurse's ability to become authentic, caring, and compassionate. When nurses are self-aware, they are more conscious of their values and beliefs and how they impact an individual's self-awareness. The competency of nurses in understanding and developing self-awareness promotes relationship

development in all areas of nursing, from nurse-to-patient relationships to co-worker and leadership development (Rasheed et al., 2021).

Local Background and Context

This doctoral project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit. Despite traditional efforts to improve patient satisfaction, scores remain low in the medical-surgical unit. Since there is a relationship between self-awareness, the development of nurse-patient relationships, and patient satisfaction (Sutton et al., 2015), one plausible way to improve patient satisfaction may be grounded in improving nurses' self-awareness. The institutional context for this project is a 65-bed acute-care hospital in the eastern region of the United States. This project was conducted on the medical-surgical units, with 87 nurses invited to participate. The organization seeks Magnet Status, and the sister hospitals seek Pathway to Excellence (Waite et al., 2020), focusing on nurse and patient satisfaction. The organization's mission statement speaks to helping all community members attain optimal health and diagnose and treat disease with an environment of compassion (The Guthrie Clinic, n.d.). The vision is to improve health. Our goal is to provide clinical excellence and compassionate care to every patient. Locally used terms and definitions for this doctoral project included *empathy*, the ability to understand and share feelings (Watson, 2018). *Self-awareness* is understanding one's character, motives, and desires (Morin, A., 2011a). *Compassion* is defined as sympathy, concern for others, and caring, looking after others who cannot care for themselves (Watson, 2018). No known

measurement instruments throughout the literature measure nurses' self-awareness in the clinical nurse-patient arena (Rasheed et al., 2020). The study aims to discover if an education presentation will successfully improve nursing knowledge of self-awareness.

Role of the DNP Student

As a doctoral student, my role in this project was translating the evidence into professional practice. In the organization, despite implementing the best procedures related to patient satisfaction scores, such as hourly rounding and bedside reporting, patient satisfaction scores still need to improve. Thus, it was imperative to attempt other strategies. As a leader within the organization and a DNP student, I wanted to understand if educating nurses on self-awareness and the importance of self-awareness is a plausible strategy for increasing knowledge of the importance of self-awareness with the hope that the knowledge will translate into practice and ultimately, result in improved patient satisfaction scores. Motivation for this doctoral project also comes from witnessing negative interactions between nurses, their peers, patients, and families. Education for nurses on self-awareness and the impact self-awareness has on patient-centered care has shown to be a practical approach to improving the patient's evaluation of care (Haley et al., 2017). Thus, this may be a plausible strategy for the organization. My motivation for this DNP project comes from many years of attempting to understand why some nurses are superior at establishing relationships with patients while others fail. The bias for this project is that I have worked with the nurses participating. However, given the importance of this project, I am committed to its success.

Role of the Project Team

A doctoral project takes more than a single person to complete. A project takes a team of people in functional roles to collect data, obtain the subject's permission to conduct the project, and manage and evaluate data (Moran et al., 2017). The project team included the director of education and research and the education team. The education directors assisted in recruiting, delivering, and monitoring the education program. The director of education supported the attainment of approval from the organization and assisted in the oversight at the rural community hospital in providing access to the nursing staff to complete the project. The director of education electronically received the data collection results from the pretest and posttest surveys. I analyzed and interpreted the data to determine the project outcome.

Summary

In summary, this DNP project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit. After using best practices recommended by Press Ganey for bedside reporting and hourly rounding, the patient comments led to a further understanding of the patient satisfaction scores. The project team played a significant role in designing and validating tools and the project's success. The group, using sources of evidence, data collection, and analysis, contributed to the overall findings of this project. The following section describes in detail the collection and analysis of the data.

Section 3: Collection and Analysis of Evidence

Introduction

To improve a nurse's professional performance, one must understand one's emotional state, outlook on life, values, beliefs, and communication delivery (Rasheed et al., 2021). As organizations seek to improve patient satisfaction and the impression of the quality of care, nurses need to establish a relationship with their patients to gain trust and feel they are well cared for (Haley et al., 2017). This DNP project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit. The context for this project was established through an organization implementing best practices to increase satisfaction without successfully resulting in higher satisfaction scores. After 2 years of problem-solving through initiating best practices with the assistance of Press Ganey, scores have not significantly improved. In a review of monthly Press Ganey results, negative comments emerged (Press Ganey, 2018) regarding the lack of relationships between nurses and patients. Section 3 discusses the sources of evidence, published outcomes, and research applicable to self-awareness and clinical nurses used to support this DNP project. Analysis and synthesis were assessed, including the systems used in data collection and analysis of the evidence and procedures used to manage the impact of this project.

Practice-Focused Question

Self-awareness is the ability to recognize one's reasoning for emotional reactions and to understand one's responses to a particular situation or different people. Self-awareness in nursing is essential for creating a healing and trusting relationship between nurses and patients. Self-awareness is understanding and acknowledging one's feelings, motives, desires, and character (Haley et al., 2017). How nurses present themselves to patients can affect how they perceive the quality of care (Oyur et al., 2017). The local problem addressed for this DNP project was consistently low patient satisfaction scores after best practices were established and hardwired. This DNP project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit.

A pretest, an educational intervention, and a posttest were presented to close this gap. The literature review provided theories and models used in nursing and other professional fields to review how self-awareness impacts the relationship between nurses and patients. Inclusive in the search was a decision on a theoretical framework. Jean Watson's theory of caring is the supportive nursing theory for this project. The list of databases and search engines used to find outcomes and research related to the practice problem were MEDLINE with full text, CINAHL Plus with Full Text, Education Source, ASA PsycINFO, Google Scholar, Pub Med, Science Direct, Google Chrome, EBSCO, and Soc Index with full text, and Press Ganey.

Search terms used were *self-awareness, nurses and self-awareness, knowledge of self-awareness in nursing, empathy, relationships, communication, self-knowledge,*

nurse-patient relationships, bedside handoff, and hourly rounding. The scope of this literature was from 2016 to 2022. The types of literature included theoretical and empirical literature as well as professional organizations. The literature review ensured that every source contributed to evidence-based learning and practice. All evidence was reviewed from peer-reviewed publications and primary or secondary sources.

This DNP project literature review was based more on the primary source rather than secondary source articles. The authors of the peer-reviewed articles were reviewed for authors' qualifications. The evidence supports that understanding self-awareness and recognizing one's reactions to people and situations can improve the nurse-patient relationship (Eckroth-Bucher, 2010). Self-awareness improves interpersonal relationships, nursing competency, and communication skills (Beckett et al., 2019). The literature review for this DNP project provided insight and understanding of previous research and outcomes in the knowledge of self-awareness in nursing and its impact on interpersonal relations, focusing on the effects on patient-nurse relationships and overall quality of care.

The participants for the DNP project received a written invitation to participate in the project. The director of education and research at the project facility assisted in delivering the invitations, posting the information, and attending huddles on the inpatient medical-surgical floors to explain the project and answer any specific questions. Approximately 87 nurses from this rural community hospital's medical-surgical unit were invited to participate, but not all participated. The individuals were asked to participate in

this project by contributing evidence to address whether an educational session presented to medical-surgical nurses can increase self-awareness.

The tools used to collect evidence to answer the project question include a deidentified pre- and post-education survey with unique identifiers to assess for improved understanding of self-awareness. A site-provided independent individual review for any possible identifying factors was collected on the de-identified data. These data was then stored in a secure, password-protected database. All information specified in the data collation was included in the study. Data retention was determined to be for 10 years after completing this doctoral project, all to be retained by the facilities research department. The study's consent process was confidential, and participants chose to participate or decline without consequence.

The role of the Walden IRB and the facilities IRB in the approval process is to review the doctoral project for risk. Risk for the participants, the researcher, and the organization. The IRB is also looking to ensure the selection of participants is equal, there is informed consent for the project, and the data is being monitored for the safety of the participants. In summary, the individuals were identified based on continuous low patient satisfaction scores despite efforts to implement best practices in nursing.

The educational intervention consisted of a one-hour virtual presentation defining self-awareness, connecting to nursing, and establishing relationships with a nurse's patient. Self-awareness is both introspective and intrapersonal. The educational presentation allowed nurses to understand their limitations and strengths in their beliefs,

negative and positive reactions to patients, and how body language plays a role in expressing their attitude towards patients based on constraints and workload.

The educational session followed the data collection to determine education's value in increasing self-awareness. The master list of participants and the raw data were stored in a secure location with access limited to the primary investigator, which in this case is the director of education. A developed Excel program data codebook was used to collect the survey scoring. Each participant was asked to use a unique pre- and post-survey identifier. The data entered into the code book continued until the last education session. Any survey missing data points or illegible was excluded from this study. The data were then entered into the Statistical Package for the Social Sciences (SPSS). All entries were double-checked for accuracy.

Analysis and Synthesis

Data analysis began with placing the pretest and posttest results into Excel and uploading them into SPSS for analysis. Integrity was confirmed by cleaning the data and searching for outliers by inspecting the values in a frequency distribution; some outliers may be justified. The data were also reviewed for missing values and the variable's extent, pattern, nature, and role in the results. Every effort was made to inform the participants of the importance of answering each question. The first approach to missing variables was to delete the variable unless there were significant numbers of missing data. The analysis procedures used in this doctoral project to address the practice-focused question were through the SPSS data distribution results and bivariate statistics, simultaneously looking at pre- and post-variables. Descriptive statistics were used for the

sample, and the sample and inferential statistics were used to determine if there was a difference in pretest and posttest scores.

Summary

In summary, there is an association between self-awareness and patient satisfaction, and outcomes demonstrate the need for education to improve self-awareness (Haley et al., 2017). To determine the increase in self-awareness in nursing, the participants completed a pre- and post-education survey to provide their knowledge and understanding of self-awareness before and after an education session on self-awareness. All data remains protected, confidential, and unidentifiable to the individual participant. The following section discusses the findings of this doctoral project and recommendations.

Section 4: Findings and Recommendations

Introduction

The local problem for this DNP project was a perceived need for more self-awareness among nurses within a rural community hospital. This perception was derived from low patient satisfaction scores, but more prevalent evidence was in patient satisfaction survey comments. In efforts to increase patient satisfaction scores by implementing best practices such as hourly rounding and bedside reporting, scores remained stagnant. Patient comments returned in the surveys provided insight into themes of lack of compassion, rudeness, and poor listening skills. As self-awareness in nursing is essential in establishing positive relationships with patients (Rasheed et al., 2021), the question was whether education on self-awareness increases a nursing understanding of the importance of self-awareness in their practice. This DNP project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit.

Evidence was obtained from a comprehensive, evidence-based literature review of 29 articles and studies. Evidence was also gained from Jean Watson's theory of caring. Search terms include self-awareness, nurses' self-awareness, knowledge of self-awareness in nursing, empathy, relationships, communication, self-knowledge, nurse-patient relationships, bedside rounding, and hourly rounding. Descriptive statistics were used to describe the sample, and inferential statistics were used to determine if there was a difference in pretest and posttest scores.

Findings and Implications

Findings

A total of 26 individuals (N=26) participated in the educational intervention. Eighty-nine percent (89%) of the participants (n=23) were female, and (n =3) were male. The mean age of the participants was 38.9 years (SD=12.43), ranging from 21 to 62 years. Life experience may play a factor in a nurse's level of understanding of self-awareness, as the pretest scoring was high at 86.9. From an education perspective, 42% of the participants (n=11) had an associate degree in nursing, 23% (n=6) had a master's degree in nursing, 23% (n=6) had a bachelor's degree in nursing, 8% (n=2) were Certified Nursing Assistants (CNA); and 4% (n=1) had a Diploma Degree in nursing. On average, the participants had 14 years (SD = 11.42) with a range of 2 to 40 years of nursing experience and had been in their current position for 3.79 years (SD 3.73) with a range of 0.5 to 13. The mean pretest score for knowledge was 86.9 (SD = 14.63), with a range between 50 to 100. The mean posttest score for knowledge was 98.5 (SD 3.25), with a range of scores between 90 to 100 (Table 1). Using a Wilcoxon to estimate the data., There was a statistically significant difference in pretest and posttest scores ($z = -3.45, p < 0.001$), indicating increased knowledge among the participants.

Table 1*Descriptive and Inferential Statistics, N = 26.*

	Frequency	(%)	Mean (SD)	Range
Gender				
Male	3	89%		
Female	23	11%		
Education				
Certified nursing assistants				
Diploma	2	8%		
Associate's degree	1	4%		
Bachelor's degree (BS /	11	42%		
BSN)	6	23%		
Master's degree (MS /	6	23%		
MSN)				
Age			38.85 (12.43)	21 to 62
Years in Nursing			14.04 (11.42)	2 to 40
Years in current position			3.78 (3.73)	0.5 to 13
Knowledge*				
Pretest score			86.92 (14.63)	50 to 100
Posttest score			98.85 (3.25)	90 to 100

*Significant at $p < 0.001$.**Implications**

Based on the findings of this project, an educational presentation on self-awareness increased the participants' knowledge of self-awareness. Given that self-awareness is a developing characteristic of an individual, ongoing education is warranted to supplement the journey of learning and building nursing competencies. Self-awareness enhances one's ability to form relationships at all levels in life, but most importantly, with nursing between the caregiver and the patient (Haley et al., 2017). To gain self-awareness, one must be willing to reflect and utilize feedback for improvement to maintain a positive journey.

Education on self-awareness is helpful for all organizations dealing with customer service-type industries. Most importantly, it is impactful for healthcare as building trust and relationships with patients has been shown to increase the patient's sense of the quality of care and being treated as individuals (Rasheed et al., 2021).

Social change in nursing is embracing new practices to improve the health and quality of care provided to patients and their families. Increasing and developing self-awareness in nursing by providing education and developing competency increases a patient's perception of the quality of care the patient received, thus promoting a healing environment. Self-awareness competency assists in building positive relationships with patients, co-workers, families, and friends. Patients who develop relationships with their caregivers feel cared for and safe (Rasheed et al., 2021).

Recommendations

The proposed and recommended solution to the problem of a perceived lack of self-awareness in nursing is to include education on self-awareness at all levels of nursing. If education on self-awareness starts at the schooling level and continues as part of onboarding for organizations, nurses would, at minimum, understand the impact of self-awareness. A second phase of the education process would be to provide continuing education and support of the journey of self-awareness at the organizational level, supporting reflection activities and managing stress opportunities. One of the most impactful parts of education was utilizing real-life scenarios to promote discussion and understanding of self-awareness, included in Appendix B of this document. This brought

an opportunity to evaluate the education results against patient satisfaction scores and patient comments to assess the impact.

Contribution of the Doctoral Project Team

The project team was very impactful. The director of education assisted with the overall coordination of the project, recruitment in the dissemination of invitations, and oversight of the project. The director of education and education team supported ensuring nurses could attend the sessions and assisted with placing the data into the spreadsheet for submission to the SPSS program. To that end, the DNP project team was committed to achieving the project's goal.

Strengths and Limitations of the Project

This project's primary strength is its relevance in today's environment, both at the workplace and personally. The nurses attending this session expressed the need for this education for all employees and repeated it regularly. The second strength was the enthusiasm of the nurses who attended the educational sessions. Without them, this project would not have been possible.

Despite these strengths, there were some limitations to the project. The COVID-19 pandemic delayed the completion of this project promptly. Second, the education presentation was divided between 2 days, with time limits for presentations between eleven in the morning and two in the afternoon. Each session was 45 min, allowing for fifteen minutes of discussion post-presentation. As a result, not all staff could participate without having to come in on a day off. Third, the nurses targeted for the project were recruited from a convenience sample of nurses from a single hospital organization; thus,

the results may need to be more generalizable to other organizations or nurses. Finally, the sample size of 26 participants may need hospitals to describe the general nursing population of the project hospital sufficiently. It is recommended that this project be replicated with a larger sample, perhaps across multiple units, to validate results.

Summary

This project aimed to determine if an educational program would increase self-awareness in nursing. Despite the relatively low participation of 26 nurses, the finding was positive, as described above. As a result of these findings, recommendations are made for further studies and implementation of increasing nursing self-awareness through education from nursing programs and continuous employment. The following section will discuss a dissemination plan, and an analysis of myself as a practitioner and scholar will be addressed.

Section 5: Dissemination Plan

Introduction

Now that the project is completed, I must disseminate the results through as many avenues and opportunities as possible. Sharing positive or negative effects is essential, as many organizations and institutions are probably experiencing the same issue.

Dissemination of this project will be to the stakeholders involved in this project and the academic community. The data and testing within this project provided an opportunity for future change and improvement in the relationship between nurse and patient and to improve the quality of care provided.

Dissemination Plan

The dissemination plan for this DNP project is to share the project results with the participating organization, the executive CNO, for the system where the study took place. The project and findings will also be shared at my current organization for possible future education on self-awareness. I also want to publish this project for others to continue the journey amongst their organizations and schools. Education on self-awareness is appropriate for nursing and all healthcare workers or any profession where establishing a solid relationship with their customers is essential.

Analysis of Self

As a practitioner and DNP student, I am responsible for continuing a lifelong learning journey. Self-awareness in nursing is a passion I will continue to investigate, review, and read about to improve myself as a leader and in all my personal and professional interactions. As nurses, we must overcome barriers and realize how to

improve our well-being to care for others. As a CNO, I am responsible for creating a positive working environment. I have enhanced my ability to reflect on my self-awareness, which has polished my skill level. Unfortunately, the project organization had to shut down learning opportunities and had to focus on the pandemic of COVID-19. Not having a fluid timeframe to complete the project made the project challenging to keep moving forward. This educational journey has proven that I can make a difference as a student and leader.

I have learned to look at different aspects of asking questions to unearth new knowledge and explore literature for historical and empirical research, evaluate theory, and integrate it into practice. This project has allowed me to lead in implementing, evaluating, and optimizing knowledge. As a scholar, it is my responsibility to my profession in nursing to continue asking questions and collecting and analyzing data to grow the nursing profession.

Project management in itself is a skill one must possess to have the ability to bring together a team of nurses to work collaboratively, both inter-professional as well as intra-professional, toward a common goal. This DNP project allowed me to grow my skills by establishing a shared purpose, common goals, trust and recognition, a clear understanding of the project, and expectations of participants and team members.

The completion of the project has been rewarding. The nurses so well received the education session. Challenges were experienced due to the time spent between the project's original development and presenting the education, collecting the data, and evaluating the results. Insights gained from this project were about myself as a leader and

a scholar. I have gained knowledge and have grown in all aspects of my leadership. My goal in seeking my doctorate is to teach nursing after retirement. In the meantime, I will use the knowledge gained in this project to lead my current nursing staff by discovering best practices.

Summary

This DNP project aimed to determine if an educational intervention focused on self-awareness and the benefits of self-awareness increased knowledge among nurses working on a medical-surgical unit. As presented by the results, this educational intervention increased understanding among the participants. As a result, when nurses are educated, the knowledge is hoped to be translated into practice, which may ultimately improve patient, provider, and organizational outcomes. The DNP project is expected to begin closing the gap for improved patient satisfaction scores among the population.

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Appendix A: Pretest and Posttest

Unique ID: _____

Please answer the following demographic questions. Please do not provide any additional information outside of the questions being asked. All information collected is anonymous and will be reported in the aggregate.

Age (in years): _____

Gender:

_____ Male

_____ Female

_____ Non-binary

Current Position:

_____ RN

_____ Nursing Assistant (NA)

Highest Level of Education:

_____ High School Graduate / GED

_____ CNA Certificate

_____ Associates (AA)

_____ Bachelor's (BS or BSN)

_____ Masters (MS)

_____ Doctoral (DNP or PhD)

Years in Nursing: _____

Years in Current Position: _____

Knowledge Questions: Please read each statement below carefully. Check "True" if you think the idea is TRUE. Check "False" if you believe the message is FALSE. Please do not provide any additional information outside of the questions being asked.

1. Self-awareness plays a role in nursing by noting a patient's condition and acting on that change to improve patient outcomes.

True _____ False _____

2. Being able to pivot and redirect a patient's plan of care when needed requires self-awareness of the nurse.

True _____ False _____

3. Nursing is often a stressful profession. Being able to prevent a situation from escalating does not involve self-awareness.

True _____ False _____

4. Self-awareness does not include the ability to remain confident and act in a necessary way to reach the patient and the provider's goals.

True _____ False _____

5. Resilience starts with self-awareness and includes understanding how you are affected by uncertainty and complex events.

True _____ False _____

6. Self-awareness prevents us from maintaining our well-being and responding effectively in adverse situations.

True _____ False _____

7. Self-awareness allows nurses to believe that they can improve nursing practice.

True _____ False _____

8. Self-awareness prohibits me from using my past nursing experiences to learn more about my interactions with patients.

True _____ False _____

9. Self-awareness can increase a nurse's confidence in managing challenging situations. **True** _____ False _____
10. A nurse's ability to be self-aware and regulate emotions is key to their health and well-being but does not contribute to positive patient outcomes.
True _____ **False** _____

Posttest

My Unique ID: _____

Knowledge Questions: Please read each statement below carefully. Check "True" if you think the idea is TRUE. Check "False" if you believe the message is FALSE. Please do not provide any additional information outside of the questions being asked.

1. Self-awareness plays a role in nursing by noting a patient's condition and acting on that change to improve patient outcomes.
True _____ False _____
2. Being able to pivot and redirect a patient's plan of care when needed requires self-awareness of the nurse.
True _____ False _____
3. Nursing is often a stressful profession. Being able to prevent a situation from escalating does not involve self-awareness.
True _____ **False** _____
4. Self-awareness does not include the ability to remain confident and act in a necessary way to reach the patient and the provider's goals.

True _____ False _____

5. Resilience starts with self-awareness and includes understanding how you are affected by uncertainty and complex events.

True _____ False _____

6. Self-awareness prevents us from maintaining our well-being and responding effectively in adverse situations.

True _____ False _____

7. Self-awareness allows nurses to believe that they can improve nursing practice.

True _____ False _____

8. Self-awareness prohibits me from using my past nursing experiences to learn more about my interactions with patients.

True _____ False _____

9. Self-awareness can increase a nurse's confidence in managing challenging situations. True _____ False _____

10. A nurse's ability to be self-aware and regulate emotions is key to their health and well-being but does not contribute to positive patient outcomes.

True _____ False _____

Appendix B: Real-Life Scenarios for Discussion

1. In this scenario, does the RN show self-awareness in providing care?

It is the beginning of your shift, and you are triaging patients in the emergency department. A patient walks in and has an initial complaint of abdominal pain. The patient is male, 24, and has never been to your hospital, so no previous records or history are available. VS is stable; the pain is 5 out of 10. The waiting room is complete, so you ask the patient to return to the waiting room. Ten minutes pass, and you are continually triaging arriving patients. The 24-year-old patient with abdominal pain is uneasy in his chair, looking pale. You approach the patient, and he is complaining of increased abdominal pain. You take him back to a bay and hand your assessment to the admitting nurse. The nurse places the monitor on the patient and immediately notices his rhythm is not stable, calls the tech for a 12 lead, and the patient is having a STEMI. Self-awareness played a role in this nurse noting the change in condition as self-awareness allows a person to provide better care and assess a patient's needs.

2. Is this RN demonstrating the ability to pivot in difficult situations?

It is 6 a.m., and your shift ends at 7 a.m. While rounding on your patients, you note that one was admitted the evening before with a diaphoretic bowel obstruction and blood pressure drops with a rigid abdomen. You call the physician, and he comes to assess the patient. The Doctor orders you to assist with placing an NG tube to suction. The oncoming nurse wants you to give a report; the doctor needs you to help with the NG tube placement. As you assist, the patient vomits, aspirates, and becomes unresponsive. You call a code blue and immediately begin compressions. A nurse's aide enters the room to notify you of a family member calling on another patient's status. You ask the Nurse's aide to have the charge nurse get the phone call, transfer the compressions to the next nurse, and give the room a brief history of what has occurred. In this scenario, did you demonstrate self-awareness by being able to pivot when needed in an evolving situation?

3. Nursing is very stressful at times. Self-awareness can assist in preventing a situation from getting out of control. Does this charge nurse appropriately address this situation?

You are the oncoming charge nurse; the floor is busy with no beds available for admissions. The hospital is experiencing higher than average census throughout and is short-staffed. You discover that all the nurses on this floor will be two patients over their average ratios, and there are no nurse aides to assist with care. One nurse coming on shift finds out what the staffing is and begins to raise her voice and state she is turning around and going home. The other nurses and patients can all hear what she is saying. You

immediately call the house supervisor. The commotion at the nurse's station continues until the house supervisor arrives. In this situation, the charge nurse did precisely what she was supposed to do and demonstrated self-awareness.

4. Does the scenario below demonstrate self-esteem and self-efficacy?

You are taking care of a cardiac patient who just came to the progressive care unit after having open heart surgery; the patient is three days post-op. On your shift, the patient goes into atrial fibrillation. From experience, you need to notify the physician and start IVP and IV drip medication. The physician on call questions your interpretation of atrial fibrillation and has a curt attitude about waking him up at night. He states, "I do not know this patient, and I want an ICU nurse to verify the rhythm." You calmly say that you are 100% certain this is an atrial fib and have 20 years of experience reading and verifying rhythms. The patient is now showing signs of becoming unstable. You ask the physician again and promptly give the demands required to care for this patient. The physician finally agrees and delivers the orders. Self-awareness is the ability to remain confident and act to reach your goal.

5. Read the scenario below. Is this RN demonstrating resiliency through self-awareness?

Behavioral Health units can be challenging and rewarding at the same time. As a nurse working in behavioral health, you must always be aware of changes in behaviors and the collective environment. Today, you are the medication nurse in an adolescent-locked behavioral health unit. A patient, without provocation, jumps over the entry to the med room and starts beating you. The other staff are doing rounds, so it takes them a few seconds to realize what happened. The team can pull the patient off and restrain them, but you have suffered a broken nose, two black eyes, and a broken rib in just a few seconds. You are off work for six months to recover from injuries and to receive mental health assistance through the hospital. You are ready to return to work and state that you are 100% sure you want to return to the behavioral health unit. You are an example of true resilience and demonstrating self-awareness.

6. In this scenario, are the two nurses self-aware enough to stop and look at themselves first and understand how to eliminate the negativity?

The nursing supervisor for the day shift just recently moved into a supervisor position after working many years in the ICU (Intensive Care Unit). The ICU census is climbing, and the current charge nurse must take a patient assignment. The charge nurse in the ICU approaches the supervisor and states that as the charge nurse, she does not have to take patients. The supervisor explained that the census in the entire house was climbing, and there were no other resources to give the ICU for this shift. The charge nurse turns to the supervisor and tells her that she does not have to listen to her. The charge nurse does not

take patients. Again, the supervisor tells the charge nurse the situation, and the conversation volume rises. The charge nurse then tells the supervisor that moving from an ICU nurse to the supervisor has gone to her head. Both people are now angry at each other.

7. The scenario below is an excellent example of self-awareness positively influencing the state of mind around you.

One of the best nursing practices is to complete bedside reporting to engage the patient in their care. On a 30-bed orthopedic and neurology floor, the manager will propose to the group in a staff meeting that the nursing council for this area investigate the best practice of bedside reports. During the staff meeting, the discussion started around bedside reporting, and every nurse commented negatively about the course. No one had tried this before, but they expressed their discontent verbally. One nurse spoke up about completing this best practice at another hospital and what all the positives were about the procedure for herself, the patients, and the family. The tone switched with the other stuff; at minimum, learn about the practice and trial it for a period.

8. Someone not self-aware encounters obstacles, sometimes the same ones repeatedly, and needs help understanding why. The example below describes the nurse as self-aware.

Have you ever heard the phrase; she is a good nurse but.....? A nurse in a medical-surgical unit has been working for an organization for over 30 years. The staff that works with her know her personality and do not interact with her unless they must. In interactions with other support services, this nurse presented herself as rude. For example, the nurse had a patient who needed an MRI. MRI has concrete safety processes in place for the safety of all staff and patients. The nurse was asked if she had completed her education on MRI safety and became defensive, the radiology tech stated why he was inquiring, and this nurse said, "You are just a bunch of Nazis."

9. Is the following scenario an example of knowing one's emotional triggers?

A nurse gets woken up at 5 a.m. by the hospital asking if they can work today. The unit needs to be more staffed and requires additional staff. They agreed to cover the shift. While driving to the hospital, they get stuck in traffic. The delay continues for a few minutes, and you get agitated. They start escalating and getting beyond frustrated with the traffic. This frustration and anger continued, negatively impacting the rest of the day.

10. All the following are the benefits of self-awareness.

- a. Better to deal with external factors that cannot be controlled
- b. Anticipate how certain events will influence your state of mind

- c. Better understanding the emotions of the people around you.
- d. positively influences the state of mind of people around you.