A personal reflection, using theoretical frameworks to understand the impact of starting university on health and wellbeing.

Abstract

This work presents a personal reflection, using theoretical frameworks as the basis of understanding multifaceted influences on the personal health of the primary author, since beginning undergraduate university degree studies in nursing. The work explores theoretical and lay definitions of health and wellbeing, before analysing influences on health from a personal perspective. The work illustrates how understanding, developed through the use of theoretical frameworks, can enable individuals to act, to enhance their own health and wellbeing.

Key words: Health and wellbeing; holistic impacts on health; self-discrepancy theory; personal reflection

Key phrases

There can be many impacts on health and wellbeing in the transition to being a student nurse.

Self-discrepancy theory enables analysis of the impacts on health and wellbeing.

Understanding impacts on personal health and wellbeing enables individuals to develop coping strategies and resilience.

Understanding the impacts on personal health and wellbeing helps individuals to develop a deeper understanding of others, thus helping to support them more effectively

Defining health.

Both lay and theoretical perspectives define health. The similarities and differences of these definitions are examined and a personal definition of health is presented. The discussion examines factors that have influenced my health throughout my first year of university studies, focusing on one significant factor, stress, that impacted on my health and wellbeing.

Lay perspectives of health are definitions formed by non-professional individuals, who utilise conceptual understandings and perceptions of what health means to them, with a wide range of information origins used in order for a person to create their belief (Warwick-Booth et al. 2012). The concepts can have factual and evidential basis with underpinnings arising from broader theories, however, the lay perspective will also feature the incorporation of locally developed conclusions regarding health, which may not directly support theoretical basis. Giddens (2009) explains how different cultures have opposing views on the definition of health. The Western World considers the body a complex

machine, which must be kept tuned to be healthy; any ailment is considered a flaw in the machine.

Health can also be defined using a theory or model of health. Models of health are conceptual frameworks which provide varied ways to define health and illness (Bartley 2016). The most influential framework is the biomedical model of health, with those who accept this ideal placing emphasis on the biological foundations of health. Primitive beliefs suggest the human body is a machine, constructed by different and divisible parts; any malfunction/disease, is considered to be caused by an engineering problem (Giddens 2009). 'Health' is considered to be the absence of disease. The social model, however, defines health as more than an absence of illness (Nettleton 2013). It incorporates social, economic, environmental and personal factors when determining an individual's health. Potential responsibility for ill-health is assigned to a range of causes, along a broader continuum. The alternative model of health can be considered as an incorporation of the biomedical and social models of health, focusing on individual use of complementary therapies, such as homeopathy, acupuncture and hypnosis (alongside traditional treatments, or as stand-alone therapies) to enhance health and well-being and manage health problems. For example, stress can be relieved through the use of yoga (Lindquist et al. 2018). The social model focuses on treating a human as an organic whole; the mind and body cannot be separated. In early developments, the medical profession viewed this concept as antagonistic, without scientific or rational basis, however, opinions are changing. Recent data (Ochsner 2012) reveals an increase in complementary therapy usage from 5%, to 74.8% between 1990 and 2006.

Functionalism is a framework that addresses society as a whole in terms of the function of its integral elements, including traditions, norms, customs and institutions, comparable to the networking organs within the human body (Trevino 2014). The functionalist structure views society to be a complex system, with the parts working concurrently to develop stability and solidarity. As a result of this, the perception is societal interdependence which creates an affirmative social order (Trevino 2014). In relation to the organs of the human body, if an element of society is flawed or withdrawn the system will no longer function effectively. Functionalism, in the context of my analysis, refers to the interdependence between home life, university life and student nurse life, where an imbalance in one area impacts on the others.

Health models have some areas of similarity. The biomedical model places emphasis on biological and physical components of illness and disease only, whereas a broad range of determinants are incorporated into the social and alternative models of health (Giddens 2009). Whilst the biomedical model is exclusive to the practice of doctors and health professionals, the social model of health, the alternative model of health, and the functionalism framework are perspectives that can be practiced by an extensively larger group of people (Nettleton 2013). The biomedical model dismisses the concept of holism and draws all weight upon biological influences (Gross and Kinnison 2013; Trevino 2016). Hogg and Vaughan (2017) argue that the biomedical model of health, focusing attention only on diagnosis, cure and treatment, proves to be a significant burden on the healthcare system.   The social model focuses on broad determinants of health, but also considers prevention; which benefits the population and reduces the burden on the healthcare system. By incorporating prevention, the social model reflects a holistic view of health. The

alternative model adopts a holistic view in supporting health and wellbeing through the use of complementary therapies.

My own perspective of health reflects a holistic view. I believe health is an all-encompassing concept determined by both internal and external aspects. These include physical, psychological, cognitive, social, financial, environmental and spiritual factors. If each is not within regulation and sharing a positive balance, all will be impacted and, health and wellbeing are affected as a result of this.

Personal reflection.

Since starting university, I have learned much about myself and about my health. My holistic view of health enables analysis of the many factors that have impacted my health. Largely, my health has been impacted by stress, which has affected me in numerous ways. I faced stress earlier in the year, when I experienced some difficulties at home. This has resolved and that aspect of my life is positive again, however, during the challenging period everything seemed unbearable. The problems occurred during my first clinical placement, which added significant pressure to an already stressful period of university. I was experiencing a great deal of tiredness due to the long hours of work, shift patterns and the balance of university assignments. Throughout my teenage years and progressing into my adult life, I have suffered with challenging mental ill-health. Whenever my stress levels increase, the disorders I experience can be exacerbated. During my first year of university I became so overwhelmed by everything happening around me, I relapsed mentally, which furthermore, resulted in physical illness. Consequently, I required time off to recover. This in turn, increased my stress further, as I began to worry about making up the sufficient

number of placement hours in order to meet the required total and getting back on track with academic deadlines.

Additionally, I have faced stress and anxiety regarding the worry of failure. My life-long dream is to become a nurse. Now that I am at university and on the final journey to achieving this dream, the pressure has dramatically increased. My fear of failing assignments has intensified as the jump to academic writing has been more challenging than I anticipated. I also worry about finances. I live at home with my parents, who are incredibly supportive, however, their income determines my lower settlement of the student loan. Having been employed since I was 15, I have been used to a regular income. Starting university and no longer having this money to rely on has added further stress. Additionally, I have struggled to find a balance between my university demands and the social part of my life away from university. Missing out on time spent with my family and friends, at times, has made me feel alone and anxious. As a result of this stress and anxiety, I have found the last year challenging, and I have found it difficult to relax. Consequently, my physical health has been affected. I become run down very quickly, so have experienced several episodes of physical ill-health over the year.

Focused analysis.

Fink (2009) defines stress as a negative mental, physical or emotional response to a situation that challenges desired feelings of peace and wellbeing. Stressors can include internal events, such as illness, or external events, such as physiological, social or environmental situations (Gellman and Turner 2013). There have been numerous events throughout the academic year which have caused me to experience stress and, this in turn

has affected my health. The analysis is framed in the context of Higgins' (1987) self-discrepancy theory, which is still in wide use. The self-discrepancy theory has recently been endorsed by Hogg and Vaughan (2017) as a means of developing coping strategies and resilience. The theory links three concepts, the actual self, the ideal self and the ought self, enabling analysis and understanding of the relationship between varying types of discrepancies amongst self-state portrayals and emotional vulnerabilities. The actual self refers to a person at the current moment, the ideal self refers to the person the individual wishes to be, and the ought self refers to our understanding of how others want us to be (Higgins 1987; Hogg and Vaughan 2017).

Since nursing is my life-long dream, I put a lot of pressure on myself to succeed. With this comes a great fear of failure. Since starting university, I have felt the fear of failure increase, causing me significant stress. Singh et al (2012) studied how the stress of examinations and assessments affects students, measuring mood parameters of subjects when relaxed and when stressed. They concluded that during a stressful period, the student's mood was lower, whilst their cortisol levels were significantly increased. Due to my fear of failure, the time approaching results and feedback of assignments becomes very stressful. This impacts my health as I find it difficult to clear my mind and sleep proves difficult. I feel very nauseous, which impacts on my diet, both factors that affect my concentration and mood. As a result of the discrepancy between my actual self (who feels stressed) and my ideal self (who would not feel stressed), I am left feeling disappointed and unhappy with myself (Higgins 1987; Hogg and Vaughan 2017), this creating stress.

A further challenge was the stress I experienced whilst on my first clinical placement. Adjusting to the shift patterns and hours, was initially quite a challenge, whilst also learning to manage the free time I had to find a balance between study, socialising with family and friends, free time and time to work my employed job. Ferri et al. (2016) highlight how the shift patterns and hours can increase nurses' stress, reduce job satisfaction and increase undesirable health effects. Whilst on placement, my home life difficulties created further stress. With several factors accumulating, I become overwhelmed with stress and began neglecting myself physically. I recognised signs of my mental ill-health resurfacing and felt a need to regain control.

Since starting university, I have recognised that whenever I become stressed and feel out of control in a situation, my attempt at regaining some control is to allow negative behaviours of my illness to take over. The cycle of emotional control, combined with exhaustion, led to me becoming unwell on placement, leading to time off in order to regain health. This exacerbated my stress, as I became worried about completing my placement hours. This situation impacted negatively on my physical health and my psychological health. By restricting my diet and not gaining sufficient rest, I was depriving myself of basic needs. Maslow's (2013) hierarchy of needs suggests there are five stages to progress through in order for a person to achieve self-actualisation. Food and water are underlined as basic, physiological needs. Without the basic needs being met, a person cannot achieve full potential (Gross and Kinnison 2013). Reflecting, I am able to recognise Maslow's propositions in the context of my personal health and well-being. The dietary restrictions impacted me severely as I became physically unwell and was not able to reach my full potential as I could not function properly for several days.

The experience of stress on placement made me worried about assignment grades and feedback. Grobecker (2016), highlights how stress faced by student nurses on clinical placements can negatively impact learning, motivation and confidence. There is a discrepancy between my actual self (who cannot handle a grand amount of stress effectively) and my ideal self (somebody who can use stress positively as motivation, not affected by environmental stimuli) (Higgins 1987; Hogg and Vaughan 2017). Stress can have serious negative impacts on health and well-being in all aspects. When I become stressed about assignments and university deadlines, fear of failure, or demands on placement, I not only adversely neglect my physical and psychological health, but also my social and spiritual health. Black and Lobo (2008), correlate the important activity of spending time with family and loved ones, with increased feelings of security, financial management and a positive outlook on life. Encountering stress, can cause me to withdraw myself from social situations and from my family and friends, which in turn negatively affects my emotional needs.

Like many professions, nursing requires the ability to cope effectively with stress. Por et al. (2011) suggest this can be aided by a developed understanding of emotional intelligence and self-awareness. Nursing is considered a highly stressful profession; therefore, coping mechanisms are essential. Strategies to manage stress have a clear link with emotional intelligence, and facilitating emotional intelligence can increase subjective well-being. Emotional intelligence, described as the power, skill and capacity to establish, consider, and conduct one's emotional self, aids individuals to better cope positively with perceived stress, feelings of control and problem – focused coping amongst other aspects (Por et al. 2011). In order to be self-aware, it is necessary to recognise positive and negative aspects of

health and how these can be changed for the better. A hugely influential and renowned model for coping with stress is Lazarus and Folkman's (1984) transactional theory of stress and coping. This model acknowledges the stressful event or situation, and then focuses on primary appraisal, considering personal involvement in the encounter. After this secondary appraisal is explored, where internal and external coping options are evaluated, with the incorporation of emotional and problem-based coping considered (Lazarus and Folkman 1984; Cooper and Campbell-Quick 2017). Challenging as it has been, I have had to learn and develop coping strategies in order to enhance my health and well-being. Whilst utilising some aspects of transactional theory, I have also developed other coping strategies. Time management has played a significant role in reducing my stress as it allows me to have control over situations. Mirzaei et al. (2012) highlight how effective time management can improve decision making ability, reduce stress, encourage self-discipline and promote better work ethic. By effectively planning my deadlines I can give myself the opportunity to put all of my efforts into assignments, which reduces my fear of failure as I know I have tried my best.

In order to reduce my stress, I have learned several techniques to help myself. I have started practicing mindfulness meditation, a technique that allows attention to be drawn upon and focused toward the internal and external present moment. This technique assists me in a holistic way. Whilst helping me mentally and spiritually cleanse any negative or unhelpful thoughts, mindfulness meditation physically enables me to relax my body and calms my mind. Eberth and Sedlmeier's (2012) study concluded that mindfulness has a powerful impact on psychological well-being. It vastly reduced stress in all participants. When I feel myself becoming stressed, I utilise mindfulness and channel all negative

emotion into it, which reduces the symptoms of stress that I experience. Additionally, the art of mindfulness has assisted me in becoming more self-aware and emotionally intelligent. As my stress levels are reduced on a whole, I feel I do not become stressed as easily and I can handle challenging situations more positively, indicating developing resilience. Whilst this is not always the case, I am now able to recognise that I am becoming overwhelmed and take actions to avoid anything serious occurring as a result.

In conclusion, studying lay and theoretical perspectives of health has reinforced my own belief that health and wellbeing are holistic and multifaceted. The self-discrepancy theory offers a clear basis on which to identify factors that have a negative impact on health and wellbeing, through exploration of discrepancies between the actual, ideal and ought self. Understanding the challenges to health and wellbeing enables me to find solutions to take control, with the aim of enhancing health and wellbeing. In this case, the use of the model has supported me to develop my self-awareness and emotional intelligence. I have learned more about my own health, as this academic year has been stressful and challenging in many ways, but I now try to view this stress in a positive way, with the focus that my health is of utmost importance. I have learned new coping mechanisms, particularly mindfulness meditation, which impacts on my health in a holistic way. This learning is key for my own health and wellbeing, but the understanding that I have developed of myself allows for a deeper understanding of others, which is key in supporting them through my nursing practice.

Reflective questions:

How could you use the self-discrepancy theory to identify impacts on your own health and wellbeing?

What benefits can you identify, of understanding impacts on your own health and wellbeing?

How do you think understanding the impacts on your own health and wellbeing can help to enhance your professional practice?

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