

Original Article

Reflections on Posttraumatic Growth, Psychological Resilience and Patient Care in Nursing Students Experiencing Childhood Trauma: A Phenomenological Study

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Abstract

Background: Traumatic events affect individuals negatively in every period of life and can be quite traumatizing. Childhood traumas (CTC) are defined as abuse and neglect that individuals are exposed to in childhood, as well as accidents, loss of parents, witnessing violence and natural disasters

Aim: This research was conducted to evaluate posttraumatic growth, psychological resilience and its reflections on patient care in nursing students who experienced childhood trauma using a qualitative approach.

Methods: Phenomenological research design, which is a qualitative research design, was used in the study. This qualitative research was conducted with 40 nursing students. The data were analyzed using Colaizzi's phenomenological analysis method.

Results: In the analysis of the data, three categories (traumas experienced, effects of traumas and traumas and nursing profession) and eight sub-themes (physical traumas, psychological traumas, physical effects, psychological effects, social effects, coping, psychological resilience and posttraumatic growth and patient care) were identified.

Conclusions: This study was conducted to evaluate posttraumatic growth, psychological resilience and life experiences in nursing students who experienced childhood trauma using a qualitative phenomenological approach. As a result of the study, it was determined that nursing students were exposed to many different traumas. It was determined that nursing students were negatively affected physically, mentally and socially due to the traumas they experienced. In addition, it was determined that nursing students did not reflect this situation to their patients due to the traumas they experienced.

Keywords: Childhood traumas, posttraumatic growth, qualitative study

Introduction

Traumatic events affect individuals negatively in every period of life and can be quite traumatizing (Karal & Atak, 2022). Childhood traumas (CTC) are defined as abuse and neglect that individuals are exposed to in childhood, as well as accidents, loss of parents, witnessing violence and natural disasters (Ofiaz, 2015). Children may become disabled or lose their lives due to childhood traumas (Ozkan et al., 2022).

Unintentional injuries are generally defined as accidents and are very common in childhood. 25% of all traumas are seen in the childhood age group. Especially accidents such as injuries and injuries are experienced between the ages of 4-12 and predominantly in boys (Altan, 2020; Ozcan, 2022). Traumas can negatively affect individuals not only in childhood but also throughout their lives (Uzel & Inci, 2020). Especially abuse situations can negatively affect the whole life of the individual by causing a decrease in self-

esteem. In the study conducted by Yoyen (2017), it was determined that childhood abuse caused a decrease in self-esteem. It was also reported that childhood abuse may cause individuals to engage in behaviors such as self-harm and ending life in the future life (Yoyen, 2017). The history of abuse was found to be significantly high in individuals who attempted suicide. It shows that especially indifferent, inconsistent, parental attitudes can prepare the ground for various mental disorders in the whole life of individuals (Arabacioglu, 2022; Uzel & Inci, 2020).

Many studies have been conducted in the literature on childhood traumas (Berber Celik & Odaci, 2020; Hornor, 2010). Studies show that neglect and abuse experienced during childhood negatively affect many areas of children such as behavior, thought and attention (Tyler, Allison, & Winsler, 2006). It has been found that children exposed to physical abuse have lower academic achievement than other children (Egeland, Jacobvitz, & Sroufe, 1988). Childhood mental traumas can cause a decrease in self-esteem in individuals and cause hopelessness (Yoyen, 2017; Helvacı Celik & Hocaoglu, 2018). Mental problems such as depression and anxiety are more common in individuals who were exposed to sexual abuse during childhood (Nelson, Baldwin, & Taylor, 2012). It is suggested that childhood traumas cause psychiatric diseases in the future (Yoyen, 2017; Helvacı Celik & Hocaoglu, 2018). Taner and Gokler (2004) stated that individuals who experienced trauma in childhood may have different mental illnesses (Taner & Gokler, 2004). In a study conducted by Kessler et al. (2001), the relationship between childhood sexual abuse and psychiatric disorders was investigated. The results showed that 13.5% of girls and 2.5% of boys had a history of sexual abuse (Kessler et al., 2001).

The fact that childhood traumas cause mental problems and substance use in every period of human life is important in terms of identifying this problem and taking preventive mental health measures. Especially adolescents constitute a risk group in terms of substance use due to reasons such as belonging to a group in terms of substance use, efforts to develop identity, rebellion

against family and society, and high risk-taking behavior due to the characteristics of the period. Substance use disorder in adolescents is a social problem affecting the whole society. In this context, health professionals have important duties (Arabacioglu, 2022; Kivrak et al., 2015).

In the 2011 Nursing Regulation, the job descriptions of both the Alcohol and Substance Addiction Center Nurse and the Community Mental Health Center Nurse, which is under the Public Health Nursing, include the statement that "the nurse should carry out preventive interventions on risky behaviors that may occur during adolescence (smoking, alcohol and substance addiction, suicide, violent behavior, risky sexual behaviors, etc.) and should provide counseling to the adolescent, family and society to protect and improve mental health" (Nursing Regulation, 2011). Based on these statements, it is thought that nursing students who will provide counseling, education and treatment to individuals in the future may also identify with their patients due to the traumas they have experienced and reflect this situation to the individuals to whom they provide health services. In this context, this study aims to evaluate the experiences of posttraumatic growth, psychological resilience and reflection on patient care in nursing students who experienced childhood trauma using a qualitative phenomenological approach.

Method

Research Model: The phenomenological research model, which is a qualitative research design, was used to examine the experiences of posttraumatic growth, psychological resilience and reflection on patient care in nursing students who experienced childhood trauma. This model was chosen to examine the events deeply (Merriam, 2019; Morrow et al., 2015; Willing, 2013; Yildirim & Simsek, 2016).

Study Group- Universe Sample: The study was conducted at a university in a province in the north of the country between May 15 and June 15, 2023.

In the study, the sample was determined by criterion sampling method in which the sample was selected from people and situations related to the problem (Altunay et al., 2014). The sample of the study consisted

of students studying in the nursing department of a faculty of health sciences. The inclusion criteria in the sample were determined as experiencing any childhood trauma and being nursing students who voluntarily agreed to participate in the study. Exclusion criteria were not being an undergraduate student and having a problem that would prevent communication.

All students who met the criteria were invited to the interview and a total of 40 participants were interviewed and the interviews were terminated when data saturation was achieved (Yildirim & Simsek, 2016).

The study was reported and presented in accordance with the Consolidated Criteria for Qualitative Research Reporting (COREQ) guidelines (Baskaya & Demir, 2023; Tong et al., 2007).

Data Collection Tools: In the study, senior nursing students were interviewed using in-depth individual interview method. The interviews were conducted with a semi-structured interview form created by the researchers.

Questions in the interview form;

1. Which trauma were you exposed to in your childhood? What did you feel? What are your experiences?
2. Why are childhood traumas important? How did the traumas affect you? Explain.
3. What changes have you experienced after childhood trauma?
4. How do you see your own psychological resilience? What is the situation and degree of reflecting the trauma you experienced while nursing to the

profession?

5. Have you coped effectively with the trauma? What are your experiences?

Data Analysis: For the analysis in the study, the seven-stage analysis method for phenomenological research developed by Colaizzi (1978) was used (Morrow et al., 2015) and the interview texts were read independently by three researchers. Afterwards, the important statements in the interview texts were selected and then the data that were tried to be explained in the statements were determined. The researchers discussed the presentations until they reached a consensus and formulated and confirmed the meanings. The researchers then identified and organized the sub-themes and themes. The themes and sub-themes of the study were developed with clear statements. In addition, participants' statements were included to ensure the external reliability of the study (Ulutasdemir et al., 2022; Yildirim et al., 2021).

Ethical Aspects of the Research: This study was approved by the Gumushane University Scientific Research and Publication Ethics Committee (E-95674917-108.99-168927) and informed consent was obtained from the participants before starting the interview.

Results

Twenty-two of the participants were female and three of them had a mental illness. The mean age of the nursing students was calculated as 22.00±4.44 (min 20, max 29).

As a result of the analysis, categories, themes and sub-themes were identified and presented in the table (Table 2).

Table 2. Post -Traumatic Growth, Psychological Resilience, and Life Experiences in Nursing Students Who Experienced Childhood Trauma

Categories	Themes	Sub-themes
1. Experienced traumas	A. Physical traumas	A1. Electric shock A2. Domestic physical violence A3. Animal attack A4. Falling into the sea A5. Falling from height
	B. Psychological traumas	B1. Loss of a loved one B2. Domestic psychological violence

		<p>B3. Exposure to exhibitionism</p> <p>B4. Emotional trauma due to physical illness</p>
<p>2. Effects of trauma</p>	<p>A. Physical</p> <p>B. Spiritual</p> <p>C. Social</p>	<p>A1. Injury</p> <p>A2. Fractures/dislocations</p> <p>A3. Pain</p> <p>A4. Feeling of suffocation</p> <p>B1. Fear</p> <p>B2. Unhappiness</p> <p>B3. Anxiety</p> <p>C1. Being shy and not being social</p> <p>C2. Not communicating with people in society</p> <p>C3. Decreased sense of confidence</p>
<p>3. Traumas and the nursing profession</p>	<p>A. Coping</p> <p>B. Psychological resilience and post-traumatic growth</p> <p>C. Patient care</p>	<p>A1. Inability to cope effectively</p> <p>A2. Trying to forget the trauma by doing the opposite of the situation (being kind) to people</p> <p>B1. Occasional recall of trauma</p> <p>B2. Feeling empowered</p> <p>B3. I don't think I'm psychologically sound</p> <p>C1. I don't think it will reflect on my patients</p> <p>C2. Non-identification</p> <p>C3. Showing more empathy towards individuals who have experienced their own trauma</p>

Category 1. Traumas experienced Theme 1. Physical traumas

According to the data obtained from the interviews, students experienced physical traumas such as electric shocks, domestic physical violence, animal attacks, falling into the sea and being injured by falling from a height.

"When I was seven years old, I was attacked by a hunting dog in the village. This affected me a lot until I was a certain age and I could not approach dogs. I was very scared." (P18).

"One summer day when I was walking around Büyükçekmece beach in Istanbul, I wanted to go into the sea

to swim, and since I had my aunt with me and she knew how to swim, I didn't have any problem at first. The point where I entered the sea was above a certain height and I was trying to accustom myself to swimming when I couldn't maintain my balance and I fell into the water, I couldn't breathe and I panicked a lot." (P5).

"My brother and I went to our neighbor's house and while we were playing outside, he was electrocuted when he grabbed the electric pole, there was a leak in the electric pole, I grabbed it and pulled it, I was very scared and I was very worried about the reaction of my parents." (P1).

Theme 2. Psychological traumas

According to the data obtained from the interviews with nursing students, it was determined that students experienced emotional trauma due to the loss of a relative, domestic psychological violence, exposure to exhibitionism, and physical illness.

"They didn't tell us when my grandmother died when I was 7 years old. That day they took us to my aunt's house. When I went to our house on the day of the funeral, there was a huge crowd. The funeral was in our garden and I was trying to understand what was happening from the corner when my uncle called me to him and when I went to him, he showed me my grandmother's face. When my uncle showed me my grandmother's face, I was very scared because her face was swollen and bruised. After that moment, I started having a lot of nightmares and I could not attend the funerals." (P27).

"One day when I was 10,12 years old, I was going to school and a car stopped next to me and asked me about the nearest hospital, and I was about to raise my hand and describe it when I realized that the man was playing with his genitals with his hand, I was very scared, the man was saying something but I couldn't hear him, then I ran to school without looking back because there was no one around. I was very nauseous, I cried a lot, my teacher noticed and tried to talk to me but I couldn't talk because I was crying. And I realized that I didn't remember anything the man said." (P22).

Abuse, exploitation of vulnerability or neglect of the child by those who are obliged to meet the needs of the child throughout his/her life causes developmental, behavioral and psychological problems in the child (Unal, 2021). Traumatic events experienced during childhood are important risk factors for a person's psychological health in the future. Studies have shown that childhood traumas are associated with anger, mood disorders and obsessive-compulsive disorders (Altınbaş et al., 2016; Senkal & Isikli, 2015; Demirci,

2016; Spinhoven et al., 2014; Sacarcelik et al., 2013; Yargıç, Ersoy, & Batmaz Oflaz, 2012). In addition, childhood traumas were found to be associated with bipolar disorder (Kim et al., 2017). In a study conducted by Ozcevik and colleagues (2019), the mean childhood trauma scale score was found to be (34.86±9.22) (Ozcevik et al., 2019). In a study conducted in China, the mean childhood trauma scale score was found to be 38.32±9.41 (Li et al., 2014). In the studies, it can be said that childhood traumas in nursing students are at a low level. However, since the study was a qualitative study, it can be said that such a result cannot be determined.

Category 2. Effects of traumas Theme 1. Physical

As a result of the interviews with nursing students, it was determined that nursing students experienced injuries, fractures/dislocations, pain and suffocation as a result of the traumas they experienced.

"My brother and I went to our neighbor's house and while we were playing outside, he was electrocuted when he grabbed the lamppost, there was a leak in the lamppost, I grabbed it and pulled it, I was very scared and I had pain in my hand for a while and I was very worried about my parents' reaction." (P8).

"I had kidney disease when I was in the 6th grade. I was treated in Ankara for a long time and I had a lot of patient friends during the treatment process. I stayed in the hospital for 2 months. They constantly applied medication. After my illness, I did not want to use medication or go to the hospital for a long time. It was a very difficult period for me. It took a long time for me to get over this period and to integrate with my friends again." (P12).

"When I was little I loved cycling, my father bought me a blue bicycle. The first day I used my bicycle, I had a race with my friends. When we were racing and we let ourselves go down the slope, I couldn't stop my bicycle and I crashed and my bicycle was damaged and I felt very bad because

I couldn't take care of my father's gift because my bicycle was damaged. After that day, I never felt like riding a bicycle (P23).

"My biggest trauma was being chased by 3 dogs. I felt fear, excitement, anxiety." (18).

Theme 2. Psychological

According to the data obtained from the interviews with nursing students, it was determined that students experienced emotions such as fear, unhappiness and anxiety.

"When I was a child, I used to fall all the time because I was too careless. The scars from the fall would remain on my body for a long time and this would demoralize me. Sometimes my friends would make fun of me with words like "Are you a baby or did you fall again?" because of the scars. This would make me very sad." (P17).

"I had a lot of nightmares and even saw my grandmother in chains. I started the day badly because of these nightmares and I was constantly thinking about those moments during the day." (P34).

"I was exposed to domestic violence in my childhood. Domestic violence made me feel very bad and caused constant fear in my childhood (P40).

Theme 3. Social

According to the data obtained from the interviews, nursing students stated that they experienced being timid, not being social, not communicating with people in the society and having a decreased sense of trust.

"My thoughts changed, especially I couldn't think that men can never look at the opposite sex innocently for a while, the bad one was always in my mind, and most importantly, I can't remember the moments and details that I experienced emotionally at the extreme, can we attribute this to this event? I don't know, but I think this is the case (P19).

"Throughout my life, I have experienced some simple and some

difficult events. Sometimes I think I cope with them effectively, but not always." (P12)

Childhood trauma not only affects the psychopathological development of the individual, but also constitutes the source of many psychiatric disorders and is recognized as a risk factor for both mental and physical disorders. The negativities caused by childhood traumas cover a wide range from social relationships, emotion regulation, impulse problems, personality disorders and alcohol and substance use disorders (Celik & Hocaoglu, 2018). Childhood mental traumas are defined as bad experiences that individuals have experienced during childhood (Ozturk, 2011). It shows that especially indifferent, inconsistent, parental attitudes can prepare the ground for various mental disorders in the whole life of individuals (Arabacioglu, 2022; Uzel & Inci, 2020). Especially abuse situations can negatively affect the whole life of the individual by causing a decrease in self-esteem. Negative schemas acquired during childhood can cause individuals to experience various mental illnesses in the future.

Especially in families where mothers and fathers exhibit different attitudes and give double messages to the child, different consciousness schemas can form in children and negatively affect the mental health of individuals (Karal & Atak, 2022). In this study, it was determined that nursing students were physically, mentally and socially affected by the traumas they experienced.

Category 3. Traumas and the nursing profession Theme 1. Coping

It was determined that nursing students could not cope effectively with the childhood traumas they experienced, and it was also found that they coped by trying to forget the trauma by doing the opposite of the situation they experienced (by being kind).

"This experience I had affected my life negatively because I cannot go to the beach or the pool with my friends. I could not cope with my trauma effectively..." (P28).

"Because I had an illness as a child, I am now more caring and kind to the

children I see in the hospital. As for my traumas, I have not always coped effectively (P1).

"Unfortunately, I could not cope well enough. I try to calm myself down about it (P23).

"I realized that verbal violence in the family will not solve anything. I think I have coped with these traumas (P17).

Theme 2. Psychological resilience and posttraumatic growth

According to the interviews with the participants, it was determined that the students had different views such as remembering the trauma occasionally, feeling empowered and not thinking that they were psychologically strong.

"I had a lot of fear of heights because of my falls. I could not cope with this trauma (P17).

"When I had to attend funerals, I would always think of this event and I would cry. I think I coped with my trauma effectively (P11).

"I will not treat anyone the way I saw from my family and I will not raise my children with that mentality." (P17).

"In general, I feel good psychologically, but it is not always the same, sometimes I feel incomplete. (K29).

Theme 3. Patient care

According to the data obtained from the interviews with nursing students, students stated that they would not reflect the childhood traumas they experienced to patient care in general and that they would empathize more with individuals who experienced their own trauma.

"I am a person who is very affected both psychologically and physiologically by my environment, the negativities around me and the things I have experienced, so I don't think my psychology is very good, but I don't reflect this situation to my patients and I think I won't reflect it in clinical practice when I am

appointed in the future..." (P27).

"Sometimes I feel that people, especially men, have good intentions and I could not cope with this trauma effectively because it took away the goodwill in my mindset, but I don't think I will reflect this to my male patients... (P19).

"I think the trauma I experienced in my childhood made me grow up, I think I will never reflect this to my patients, especially ethical principles are very important to me anyway... (P27). "Because I had an illness as a child, I am now more caring and kind to the children I see in the hospital. As for my traumas, I have not always been able to cope effectively (P13).

Discussion

McCauley et al., (1997) found that "physical and sexual abuse in childhood is highly predisposed to depression and self-destruction, and individuals who are exposed to physical abuse in later periods are prone to violent behavior, aggressive attitudes and behaviors". Toptas and Eker (2018) found that there were significant differences between university students' reactions to anger and their exposure to domestic violence in childhood (Toptas & Eker, 2018). Karaaslan (2017) found a significant relationship between the levels of neglect, abuse and violent behaviors. In addition, it was determined that childhood traumas played a role in the level of violent behavior of the individual (Karal & Atak, 2022).

Arthur and Randle (2007) emphasized professional self-concept and reported that nurses with a healthy self-concept will provide quality care to patients. Professional self-concept is defined as a situation characterized by the fact that a member of a profession knows, adopts and reflects certain characteristics of the profession to his/her practices. According to Fagermoen, professional self is the nurse's awareness of her/his duties and responsibilities. In addition, professional self is defined as the value and belief system of nurses that directs their behaviors and interactions with patients (Erdogan et al., 2020).

A positive professional self-concept in nurses

may increase their commitment to ethical values (Parandavar et al., 2016). Professionalism and ethics in nursing are recognized as two inseparable parts (Kim et al., 2015). Professional self-perceptions of nursing students are evaluated and tried to be improved. Although there are studies showing that professional values are developed in the nursing education process (Leners et al., 2006; LeDuc & Kotzer, 2009; Lin et al., 2010), nurses may have problems in demonstrating professional behaviors due to various factors. Problems experienced by nurses in practicing professional values may negatively affect the quality of care of patients (Lacobucci et al., 2012). Nurses' perspective on ethical problems and their ability to solve problems can be affected by many different situations such as professional experience and competence (Cerit & Dinc, 2012). As a result of the study, it was determined that nursing students did not reflect their childhood traumas to their patients, which may be related to the formation of professional self-perception in students.

Conclusion and Recommendations: As a result of the study, it was determined that nursing students were exposed to many different traumas. It was determined that nursing students were negatively affected physically, mentally and socially due to the traumas they experienced. In addition, it was determined that nursing students did not reflect this situation to their patients due to the traumas they experienced. It is recommended to carry out improvement and support programs for students who are found to be exposed to trauma.

Limitations: One of the limitations of the study is that all participants were nursing students at a university in a city in northern Turkey. The results depend on the participants and the setting in which the research was conducted. The small group of participants is not representative of the nursing student population.

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