



How much is too much self-disclosure?

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Abstract

The rationale for this project stems from a class assignment that identified a gap in the literature. Research related to self-disclosure in health care settings was largely referred to in therapist/counselor contexts, rather than nursing. Findings from a comparison between psychoanalytical theory, and feminist theory were assumed to be applicable to nursing environments. These findings include: psychoanalytical theory opposes self-disclosure as it is believed to destroy the professional boundaries between client and therapist, whereas feminist theory utilizes self-disclosure to eliminate power asymmetries with clients, and foster therapeutic relationships. Because of the underlying philosophical inconsistencies of psychoanalytic theory and core principles of relational practice – which is seen as a foundation for ethical nursing practice, feminist theory was used to identify means of answering the clinical practice question: how much is too much sharing?

The objectives of this project are:

- 1) to answer the clinical practice question and subsequently gain a better understanding of professional self-disclosure, and
- 2) to identify a how nurses determine when self-disclosure would be helpful.

Interviews have been conducted to gather information from an audience of various nursing professionals, including: registered nurses, licensed practical nurses, health care aides, and students. It is hypothesized nursing professionals may assess the client's receptivity to self-disclosure by simply asking permission. This hypothesis is supported by literature as it matches the professional's intentions with the client's perceptions; nevertheless, this strategy can only be indirectly extrapolated as it is assumed the psychological and philosophical literature is directly applicable to a nursing context. Thus, this project has gone beyond what I have learned in class to support the development of evidence-informed relational practice.