NURSES’ BEHAVIORS, PERCEIVED AS CARING BEHAVIORS BY THE PATIENTS

Mr. Anil H. Mandalia*
Mr. Priyesh Bhanwara**
Ms. Kavita Kelkar**

Introduction:

The affinity of caring to nursing is shown in following quote “Caring is nursing and Nursing is Caring”. It is not modern notion, but can be dated back to the time of Florence Nightingale. Instead of strong association between nursing and caring, relative little attention has been directed toward the study of the care. The environments in which nurses render the services are one, which suffers from scarcity of the nursing staffs, over workload and limited resources in the ward to perform various nursing activity in the ward. These all affects on quality nursing services. Today most of the economically affordable patients prefer private hospital because they give one of the reasons of non-caring behavior of the nursing staffs in Government hospitals. In order for the profession of nursing to meet its social obligation to provide a “Caring relationship” in which our services are given, we must explore what constitutes a caring relationship for our patient. So there must be need to explore the which kind of nurses’ behavior perceived as caring behavior by the patients

* GOVERNMENT COLLEGE OF NURSING, SIR T. GENERAL HOSPITAL, BHAVNAGAR, GUJARAT.
** COLLEGE OF NURSING, DR. D. Y. PATIL UNIVERSITY, PIMPRI, PUNE-18.
OBJECTIVES:

Objectives of study were …

1. To identify the nurses’ behaviors perceived as most important caring behaviors by the patients.
2. To identify the nurses’ behaviors perceived as least important caring behaviors by the patients.
3. To determine does gender makes difference in perception of caring behavior?

ASSUMPTIONS:

1. Nurses behaviors related to health teaching and advocacy are to be perceived as most important caring behaviors by the patients.
2. Nurses behaviors related to professional knowledge and skill are to be perceived as least important caring behaviors by the patients.
3. There is no gender difference in perception of caring behavior of the nurses.

METHODOLOGY:

The research approach adopted in the study was exploratory survey. This approach was considered as appropriate at this study aimed at identifying patients’ perception of most important and least important caring behaviors of the nurses.

The present study was conducted in medical and surgical wards of selected medical college attached and district hospital of Gujarat state. By using non-probability sampling technique i.e. Purposive sampling technique, 300 samples were selected from three selected medical college attached and three district hospitals of Gujarat state. Samples were from the medical and surgical wards of the selected hospitals. There were 180 male and 120 female in the study. A tool was developed and validated it by the experts from nursing science, psychologist and social science. The pilot study was conducted on 40 samples to find out the reliability and practicability of the tool. Final data collection was undertaken. The data were tabulated, analyzed
and interpreted in terms of the objectives of the study. A descriptive statistical method was used to analyze data.

DESCRIPTION OF TOOL:

The structured rating scale has two sections.

Section – A: consist of items related to Identification data related to patients admitted in medical and surgical wards of selected hospitals. It includes Name of the patients, gender, name of hospital, code number etc.

Section – B: It consist of listed nurse caring behavior prepared by the investigator through deep study of different types of Caring Behavior Inventories.

There were total 40 caring behaviors of the nurses categories under main 5 topics named

1) Nurses’ behavior during patient’s approach
2) Nurses behaviors related to maintaining human dignity and privacy
3) Health teaching and advocating behaviors
4) Behaviors related to providing safe and protective environment
5) Nurses behaviors related to professional knowledge and skill.

These behaviors were rated in 5 scales range from most important caring behavior to not important caring behavior. Patients should put tick marks in the appropriate scale according to his / her perception regarding that particular behavior of the nurse.

Analysis, Interpretation and Findings:

The Collected data was analyzed in terms of frequency, percentage and presented in the form of tables and graphs. Major findings of the study were…

1. There were majority of the male patients i.e. 180 (60 %) than female patients i.e. 120 (40 %).
2. Behavior related to give respect while talking, inject skillfully & safely, addressing by name, prevent infection while treating and take vital measurements are considered as most important behaviors as perceived by the patients.

3. Behaviors related to expose only necessary organ, present during clinical procedure, involve in decision-making, explain discomfort while treating and obtain written consent are considered as least important behaviors as perceived by the patients.

4. Behaviors like addressing the patients with name, give injection skillfully, give respect during talking, prevent cross infection and provide clean and protective environment in the ward are perceived as most important caring behaviors of the nurses by the male patients.

5. Behaviors like expose only necessary body part during examination, involve in decision making, present during clinical procedures, explain about anticipate discomfort during treatment and obtain written consent are perceived as least important caring behaviors by the male patients.

6. Behaviors like give respect while talking, taking vital signs, give injection skillfully, prevent cross infection and addressing the patients by name are perceived as most important caring behaviors of the nurses by the female patients.
7. Behaviors like accept feeling, maintain confidentiality, involve in decision making, explain anticipate discomfort during treatment and obtain written consent are perceived as least important caring behaviors of the nurses by the female patients.

8. As a whole behaviors related to health teaching and advocating are perceived as most important caring behaviors (Mean = 4.42, S.D = 0.42) and behaviors related to human dignity and privacy are considered as least important caring behaviors (Mean = 4.08, S.D = 0.32) as perceived by the patients.

9. As a whole behaviors related to health teaching and advocating are perceived as most important caring behaviors (Mean = 4.37, S.D = 0.46) and behaviors related to human dignity and privacy are considered as least important caring behaviors (Mean = 4.06, S.D = 0.32) as perceived by the male patients.
Mean and standard deviation of each nurses’ behavior perceived as caring behavior by the patients. [N=300]

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Behaviors perceived by the patients</th>
<th>Mean</th>
<th>S.D</th>
<th>Sr. No.</th>
<th>Behaviors perceived by the patients</th>
<th>Mean</th>
<th>S.D</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Give Respect While Talking</td>
<td>4.85</td>
<td>.609</td>
<td>21</td>
<td>Take Precautionary Measures</td>
<td>4.24</td>
<td>.906</td>
</tr>
<tr>
<td>2</td>
<td>Inject Skillfully &amp; Safely</td>
<td>4.84</td>
<td>.437</td>
<td>22</td>
<td>Call-bell Orientation</td>
<td>4.23</td>
<td>.959</td>
</tr>
<tr>
<td>3</td>
<td>Addressing by Name</td>
<td>4.83</td>
<td>.596</td>
<td>23</td>
<td>Record Accurately</td>
<td>4.22</td>
<td>.747</td>
</tr>
<tr>
<td>4</td>
<td>Prevent Infection While Treating</td>
<td>4.77</td>
<td>.583</td>
<td>24</td>
<td>Know All About Disease</td>
<td>4.22</td>
<td>.836</td>
</tr>
<tr>
<td>5</td>
<td>Take Vital Measurements</td>
<td>4.76</td>
<td>.564</td>
<td>25</td>
<td>Put Curtain near Bed</td>
<td>4.16</td>
<td>.911</td>
</tr>
<tr>
<td>6</td>
<td>Provide Clean Environment</td>
<td>4.74</td>
<td>.570</td>
<td>26</td>
<td>Same Sex Person at Procedure</td>
<td>4.16</td>
<td>.768</td>
</tr>
<tr>
<td>7</td>
<td>Aseptic Precaution in Injecting</td>
<td>4.74</td>
<td>.589</td>
<td>27</td>
<td>Immediate Response</td>
<td>4.15</td>
<td>1.025</td>
</tr>
<tr>
<td>8</td>
<td>Isolate Infected Cases</td>
<td>4.68</td>
<td>.652</td>
<td>28</td>
<td>Initiate Prompt Action on Problems</td>
<td>4.11</td>
<td>1.277</td>
</tr>
<tr>
<td>9</td>
<td>Answer Queries</td>
<td>4.66</td>
<td>.658</td>
<td>29</td>
<td>Be Competent in Nursing</td>
<td>4.05</td>
<td>.744</td>
</tr>
<tr>
<td>10</td>
<td>Provide Explanation in Crisis</td>
<td>4.64</td>
<td>.686</td>
<td>30</td>
<td>Explain Disease &amp; Outcome</td>
<td>4.02</td>
<td>.801</td>
</tr>
<tr>
<td>11</td>
<td>Encourage Queries on Disease</td>
<td>4.61</td>
<td>.693</td>
<td>31</td>
<td>Procedure with Least Discomfort</td>
<td>3.91</td>
<td>.982</td>
</tr>
<tr>
<td>12</td>
<td>Quick Response</td>
<td>4.59</td>
<td>.598</td>
<td>32</td>
<td>Use Advanced Equipment Skillfully</td>
<td>3.89</td>
<td>1.133</td>
</tr>
<tr>
<td>No.</td>
<td>Action</td>
<td>Mean</td>
<td>SD</td>
<td>No.</td>
<td>Action</td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>-----</td>
<td>--------------------------------------------</td>
<td>------</td>
<td>-----</td>
<td>-----</td>
<td>--------------------------------------------</td>
<td>------</td>
<td>-----</td>
</tr>
<tr>
<td>13</td>
<td>Check Your Disease Knowledge</td>
<td>4.57</td>
<td>.757</td>
<td>33</td>
<td>Discuss With Concerned ones</td>
<td>3.89</td>
<td>.846</td>
</tr>
<tr>
<td>14</td>
<td>Understand Psych. Problems</td>
<td>4.52</td>
<td>.747</td>
<td>34</td>
<td>Accept Feelings</td>
<td>3.83</td>
<td>.992</td>
</tr>
<tr>
<td>15</td>
<td>Prevent Physical Injury</td>
<td>4.51</td>
<td>.677</td>
<td>35</td>
<td>Maintain Confidentiality</td>
<td>3.82</td>
<td>.895</td>
</tr>
<tr>
<td>16</td>
<td>Ask Purpose</td>
<td>4.49</td>
<td>.864</td>
<td>36</td>
<td>Expose Only Necessary Organ</td>
<td>3.80</td>
<td>.805</td>
</tr>
<tr>
<td>17</td>
<td>Explain Risk in Treatment</td>
<td>4.49</td>
<td>.587</td>
<td>37</td>
<td>Present During Clinical Procedure</td>
<td>3.68</td>
<td>1.168</td>
</tr>
<tr>
<td>18</td>
<td>Encourage Anytime Call</td>
<td>4.41</td>
<td>.807</td>
<td>38</td>
<td>Involve in Decision-making</td>
<td>3.54</td>
<td>1.026</td>
</tr>
<tr>
<td>19</td>
<td>Listen Attentively</td>
<td>4.36</td>
<td>.605</td>
<td>39</td>
<td>Explain Discomfort While Treating</td>
<td>3.35</td>
<td>1.162</td>
</tr>
<tr>
<td>20</td>
<td>Explain Procedure</td>
<td>4.25</td>
<td>.869</td>
<td>40</td>
<td>Obtain Written Consent</td>
<td>3.08</td>
<td>1.004</td>
</tr>
</tbody>
</table>
From the above findings it was concluded that nurses’ behavior related to health teaching and advocacy are most important according to patients’ perception because majority of the patients want that nurse will provide health education and guidance to them.

Recommendation:

Based on findings, the following Recommendations are proposed for the future Nursing Research:

1. A similar study may be replicated on a large sample covering the different departments of the hospitals and comparing their perception of caring.
2. A study may be replicated on patients suffering from different disease conditions and comparing their perception of caring.
3. A study can be done by taking nursing staff as sample and find out their perception of caring.
4. A study can be done by taking nursing staff as well as patients as sample and find out their perception of caring and make comparison of their result.
5. A study can be done by taking nursing students as sample and find out their perception of caring.
6. A study can be done by taking caregiver as sample and find out their perception of caring.
7. A study can be done by taking patients as sample irrespective of their age, sex and educational background.
8. A study can be done by taking patients from different specialty hospitals and comparing their perception of caring.
CONCLUSIONS:

Based on following findings, it was concluded that demonstration of caring behaviors is important to provide the satisfaction to the patients from nursing services and by knowing the caring behaviors which patients most wants from the nurses during their hospital stay, administrator of the hospitals can formulate caring behavior standards or policy regarding behavior for the nurses.

REFERENCES:

5. Benner P. From Novice to expert, Addison-Wesley, California
• Cohen M.Z and others: Knowledge and Presence: accountability as describe by nurses and surgical patient, Professional Nursing, 3:177, 1994.


• Fredriksson L: Modes of relating in a caring conversation; a research

• Freed A; The experience of reassurance: patients' perspectives, Journals of advanced Nursing 23:272, 1996.


• Holzemer's nursing systems framework of quality of care, Paper presentation, funded by Government. Paper presentation at Sigma Theta Tau International Conference .


June 2012

- Leininger M: Care: the essence of nursing and health , Detroit, 1988, Wayne State University Press.
- Patients' Perception of Nurses Caring and Uncaring Behaviors in Japan: From a Perspective of Motivation to Help Theory on Sunday”, November 4, 2007.


• Weiss C.J, Model to discover, validate and use care in nursing wayne state university press, Detroit, p.p. 139-149.

