

NURSES' CARING BEHAVIORS FROM THE PERSPECTIVE OF PATIENTS ADMITTED TO COVID 19 WARDS IN EDUCATIONAL HOSPITALS OF SHAHID BEHESHTI UNIVERSITY OF MEDICAL SCIENCES

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Abstract:-Introduction: Nursing care and caring behaviors can be adjusted based on patients' needs through detecting and understanding the nurses' caring behaviors from patients' viewpoints while taking into account the factors affecting caring behaviors. Nurses' caring behaviors in Covid-19 wards in Teaching Hospitals of Shahid Beheshti University of Medical Sciences in 2020 were examined.

Method: The participants were selected through convenience sampling. Nurses' Caring Behavior Questionnaire and Demographic Questionnaire were used.

Results: The obtained data were analyzed by SPSS software version 20 according to the objectives of the research. The results showed that the mean area of respectful communication was 33.57

(minimum 11 and maximum 41 points), the average range of professional knowledge and skills was 15.35 (minimum 5 and maximum 21 points) and the average total score of the questionnaire was 43.92.

Discussion and conclusion: The respectful relationship from the patient's viewpoint was higher than that of the questionnaire, and this aspect of nurses' practice was at a relatively good status from the patient's viewpoint. The mean score for professional knowledge and skills was higher than the actual mean score, which was at a desirable level. The total score of the questionnaire was higher than the mean total score of the questionnaire. Overall, nurses' caring behaviors were at a good level according to the patients.

Keywords—*Nurse, Caring behavior, Covid-19*

INTRODUCTION

Nursing is a set of actions taken to help a particular individual or group to improve their living conditions or save their lives, and the nurse is the person who provides knowledge-based care (Chen et al., 2018). Caring is the essence and axis of nurses' performance, and it is considered a fundamental part of providing health services (Najafabad, 2020). The nurses play a major role in the continuation of caring, and the enhancement and preservation of the help-seekers' health at different levels of the healthcare system (Zabolypour et al., 2016). The theoretical foundations of nursing are based on understanding caring and caring behaviors. Caring is a basic part of nursing as a profession. This concept is a typical example of feeling, thought, and action that provides physical and mental comfort (Asadi et al., 2020). Caring behaviors are an ethical guide in the field of nursing that leads to support, promotion, and preservation of human virtues. The constructs making up caring behaviors are very extensive, and it is not possible to provide a single definition of them. Nevertheless, any definition aiming at defining caring should include two key components (Hosseinzadeh et al., 2019). Overall, the caring provided by nurses includes two aspects, namely technical and emotional aspects (Seyedoshohae et al., 2015). The technical aspect emphasizes meeting patients' physical and treatment needs through some means like treatment methods, monitoring physical environment, education, informing, and problem solving, while the emotional caring includes awareness-raising behaviors in the field of psychosocial affairs like emotional support, empathy, being sensitive to needs and respect for patients' privacy (Seyedoshohae et al., 2015). Caring behaviors are a combination of targeted nursing performances and attitudes that relieve patients' suffering and meet their predicted needs (Mahmoodzadeh et al., 2018). The researchers in the field of nursing have defined caring quality as caring behaviors to measure it

(Tarbiyat Nazloo et al., 2019). The caring behaviors are the main essence of the nursing actions. Thus, detecting the factors affecting and predicting nurses' caring behaviors are of considerable importance in the hospitals as service-oriented organizations (Saif and Farhadpour, 2017). The caring behaviors include the actions and behaviors shown by the nurses to provide physical, emotional, moral, social, and mental caring to patients which provide the patients with feeling secure and satisfied and also shorten the treatment process (Tarbiyat Nazloo et al., 2019). The nurses are in charge of taking care of patients directly, and they spend greater time with patients compared to other healthcare employees. Therefore, this entails showing behaviors to calm the patients. These behaviors should be planned based on patients' wants, needs, and wishes in order to achieve their satisfaction and convenience (Saif and Farhadpour, 2017). Any factor affecting nurses' working processes can have a great effect on their efficiency and performance quality (Shahgholian et al., 2017). Ehlers has maintained that taking good care of patients is contingent upon nurses and patients' understanding of the concept of caring, and also the cultural background and nature of the treatment center (Asadi et al., 2020). Despite the importance of caring and caring behaviors, there is much difference in prioritizing the caring behaviors that could affect caring (Asadi et al., 2020). Caring behavior has been defined as the actions taken to provide welfare and peace to the patients that include some features like sensitivity, calmness, empathic listening, honesty, and being receptive without making judgements (Barkhordari-Sharifabad et al., 2020). The results of studies indicate that nurses' caring behaviors contribute to patients' peace of mind that will naturally improve the performance of the organizations providing healthcare services (Barkhordari-Sharifabad et al., 2020). The caring behavior includes all performance, recognitions, feelings, thoughts, imaginations, movements, gestures, looks, and actions through which the help-seeker is taken care of and this caring behavior should be based on ethics, and patients' needs and expectations (Mahmoodzadeh et al., 2018). Nurses' caring behaviors vary in different conditions and it is influenced by different factors (Tarbiyat Nazloo et al., 2019). In this regard, the results of the study by L.ENNS in 2018 showed that the heavy workload, shortage of time, the limited number of nurses, lack of adequate management and proper support, lack of trust, and commitment to patients and families are some of the factors affecting nurses' caring behaviors (Karlou et al., 2015; Kaakinen et al., 2018). Moreover, the results of the study by Taghavi et al. (2019), Investigation of Patients' Satisfaction with Nurses' Caring and Services, showed that the level of patients' satisfaction increases along with the improvement in caring behaviors and quality of nurses' services, which recommended that the policymakers should address this issue more seriously (Taghavi Larijani and Najafi, 2019; Safavi, 2018).

One of the new global challenges in managing infectious diseases is the fight against the novel virus known as Covid-19 (Wang et al., 2020). This disease creates distrust and confusion in patients and also imposes intolerable mental pressures including stress, anxiety, depression, unresolved grief, and post-traumatic stress disorder (PTSD) in patients and nurses as well as physical problems. All these call for an increase in awareness, knowledge, and exhibition of particular caring behaviors by the treatment team members, especially nurses (Adhikari et al., 2020). On the other hand, the results of studies have shown that the nurses are also exposed to mental problems resulting from Covid-19 which affects their caregiving and caring behaviors (Jackson et al., 2020; Organization WH, 2020). The negative psychological experiences imposed by Covid-19 on nurses including fatigue, sadness, desperation resulting from overwork, anxiety, and worry about the involvement of their family members, are important points that could affect nurses' caring quality and in general their caring behavior (Farnoosh et al., 2020; Shi et al., 2020; and Saadeh et al., 2020).

Therefore, we can plan to provide nursing caring and to show caring behaviors based on the patients' needs and find solutions to the probable challenges while comparing and reporting nurses' caring behaviors in different healthcare centers, itself preparing the ground for providing high-quality nursing services in these centers by detecting and understanding nurses' caring behaviors from patients' viewpoints (Nasirzadeh et al., 2020; Aziziaran and Basharpour, 2020).

Although some studies have been conducted on caring behaviors and the factors affecting them, none of them has investigated nurses' caring behaviors in Covid-19 wards from the patients' viewpoint, and this necessitates the research into this issue. Thus, this study aimed at investigating nurses' caring behaviors in Covid-19 wards from patients' viewpoint in Teaching Hospitals of Shahid Beheshti University of Medical Sciences in 2020.

Method

This is a descriptive and cross-sectional study. The study population consisted of the Covid-19 patients hospitalized in teaching hospitals of Shahid Beheshti University of Medical Sciences. The sampling was performed using convenience sampling method. After obtaining the required permits and visiting the relevant hospitals, the researcher selected the samples from among the patients who met the inclusion criteria and were willing to attend the study who were also about to be released from the hospital. Additionally, he explained the study goals and their results to patients and their families, obtained their informed consent before selecting them. It should be noted that a certain ratio was given to each one of the given hospitals according to the sample size and considering the hospital capacity and the number of hospitalized Covid-19 patients at the hospitals that were

identified in advance in terms of having a Covid-19 ward. The hospitals were Imam Hossein Hospital, Ayatollah Taleghani Hospital, Akhtar Hospital, Masih Daneshvari Hospital, Loghman Hakim Hospital, Shahid Modarres, Shohadaye Tajrish Hospital, and Labbafinejad Hospital. The number of patients attending the study from the selected hospitals varied due to their willingness and consent, and they were replaced by another patient in case they did not complete the questionnaire. The samples completed the electronic Demographic Information Questionnaire and Nurses' Caring Behavior Questionnaire almost after about two months from receiving the necessary instructions for completing the questionnaires and the relevant link from the researcher.

In the current study, the sample size was calculated as 300 using the following formula.

$$n = \frac{z_{\alpha/2}^2 \sigma^2}{d^2}$$

In the present study, nurses' caring behavior questionnaire as well as a demographic questionnaire that evaluates some information such as age, gender, job, education, duration of hospitalization etc., were used to collect data.

Intercultural translation and validation of this tool were performed by Atashzadehshoorideh et al. in Iran in 2019-2020 (Atashzadeh et al., 2015). This questionnaire includes 16 items and covered two aspects of respectful relationships, and professional knowledge and skill that are scored on Likert scale from *always* (6) to *never* (1). Concerning this tool, the total scores of the questionnaire range from 16 to 96. The higher scores indicate better caring behaviors.

To examine the questionnaire reliability in the current study, Cronbach's alpha was calculated as 0.91. Considering that alpha index is 0.7 indicating good reliability, this questionnaire was evaluated as having a good reliability. Furthermore, the intraclass correlation index in the repeated-measure section was 0.88, and the significance level was calculated as $p=0.000$. Therefore, nurses' caring behaviors questionnaire had very good reliability.

The data were analyzed in accordance with the specific goals of the study using SPSS20. The descriptive statistics (frequency, percentage, mean, standard deviation) was used to determine samples' characteristics, and the analytical tests (independent t-test, variance analysis) were used to examine the relationship between different components.

Results

A summary of the results has been presented in the following table.

Table 1: Absolute and relative frequency of the demographic variables in patients hospitalized in Covid-19 wards at teaching hospitals of Shahid Beheshti University of Medical Sciences in 2020

| Demographic variables | Frequency | Percentage |
|-----------------------------------|------------------|-------------------|
| Age | | |
| 15-25 years | 16 | 5.3 |
| 26-35 years | 102 | 34 |
| 36-45 years | 89 | 29.7 |
| Above 45 years | 93 | 31 |
| Gender | | |
| Woman | 125 | 41.7 |
| Man | 175 | 58.3 |
| Education | | |
| High school diploma and lower | 165 | 55 |
| Academic | 135 | 45 |
| Marital status | | |
| Single | 91 | 30.3 |
| Married | 201 | 67 |
| Divorced | 8 | 2.7 |
| Residency | | |
| City | 253 | 84.3 |
| Village | 47 | 15.7 |
| Job | | |
| Self-employed | 79 | 26.3 |
| Housemaker | 58 | 19.3 |
| Retiree | 27 | 9 |
| Clerk | 75 | 25 |
| Worker | 40 | 13.3 |
| Unemployed | 21 | 7 |
| History of hospitalization | | |
| No | 242 | 80.7 |
| Yes | 58 | 19.3 |
| Length of stay | | |
| Less than one week | 42 | 14 |

| | | |
|-----------------------------------|-----|------|
| One week | 168 | 56 |
| More than one week | 90 | 30 |
| Hospitalized in | | |
| Taleghani Hospital | 17 | 5.7 |
| Imam Hossein Hospital | 58 | 19.3 |
| Masih Daneshvari Hospital | 47 | 15.7 |
| Moddarres Hospital | 25 | 8.3 |
| Loghman Hakim Hospital | 34 | 11.3 |
| Labbafinejad Hospital | 30 | 10 |
| Shohadaye Tajrish Hospital | 43 | 14.3 |
| Akhtar Hospital | 46 | 15.3 |
| Total | 300 | 100 |

According to the results presented in the above table, 34% of patients were in the 26-34 age group. Additionally, 31% and 29.7% of the patients were in the above 45 age group and 36-45 age group respectively. The least frequency was observed in the 15-25 age group (5.3%).

58.3% of patients were male and 41.7% of patients were female. As for the education criterion, 55% of the patients held high school diplomas and lower degrees, and 45% held academic degrees. Concerning marital status, 67% of the participants were married, 30.3% were single, and 2.7% were divorced. The patients living in cities made up 84.3% of the total number of patients, and those living in villages accounted for 15.7%. In terms of employment status, 26.3% of patients were self-employed, 25% were clerks, 19.3% were housemakers, and 13.3% were workers. The retirees and unemployed were the least frequent participants with a frequency of nine and seven individuals in the sample respectively. In addition, 80.7% of the participants had no history of hospitalization for Covid-19, and 19.3% had a history of being hospitalized for Covid-19. As for the length of stay, 56% of patients were hospitalized for one week, 30% were hospitalized for more than one week, and 14% were hospitalized for less than one week. The greatest number of Covid-19 patients (19.3%) was in Imam Hossein Hospital, and the lowest number (5.6%) was in Taleghani Hospital.

Table 2. Descriptive statistics of different fields of Nurses' Caring Behaviors Questionnaire from the viewpoint of patients with Covid-19 hospitalized in Hospitals of Shahid Beheshti University of Medical Sciences in 2020

| Fields | Number | Mean | Standard deviation | Median | Minimum | Maximum |
|---|---------------|-------------|---------------------------|---------------|----------------|----------------|
| Respectful relationship | 300 | 33.57 | 5.02 | 30 | 11 | 41 |
| Knowledge and professional skill | 300 | 15.35 | 2.03 | 14 | 5 | 21 |
| Total score of questionnaire | 300 | 48.92 | 6.37 | 44 | 16 | 62 |

According to the above table, the mean scores of respectful relationship, professional knowledge and skill, and mean total score of questionnaires were 33.57, (minimum 11, maximum 41), 15.35 (minimum 5 and maximum 21) and 48.92 respectively.

Since the mean score of the questionnaire in the field of respectful relationship was 33 (minimum 11 and maximum 66), the mean score of the respectful relationship variable from patients' viewpoint with a mean score of 33.57 was higher than the mean score of the questionnaire which indicates that this aspect of nurses' performance enjoyed a relatively good status from Covid-19 patients' viewpoint. Furthermore, the mean score of the questionnaire in terms of professional knowledge and skill was 15 (minimum 5 and maximum 30) where the mean score of this variable according to patients hospitalized in the Covid-19 ward (15.35) was higher than the mean score indicating a relatively good status. The total score of the questionnaire was higher than the mean total score of the questionnaire (48) according to the above table (48.92). Overall, it could be stated that nurses' caring behaviors from the viewpoint of patients hospitalized in Covid-19 wards were good.

Table 3. Comparison of mean scores in different fields of nurses' caring behaviors in Hospitals of Shahid Beheshti University of Medical Sciences in 2020

| Hospital | Fields | Respectful relationship | Professional knowledge and skill | Total score of questionnaire |
|------------------|--------------------|--------------------------------|---|-------------------------------------|
| Taleghani | Mean | 34.82 | 15.53 | 50.35 |
| | Standard deviation | 2.94 | 1.46 | 3.63 |

| | | | | |
|--------------------------|--------------------|--------|--------|--------|
| Imam Hossein | Mean | 28.07 | 13.77 | 41.84 |
| | Standard deviation | 5.06 | 2.28 | 6.61 |
| Masih Daneshvari | Mean | 29.27 | 15.15 | 44.42 |
| | Standard deviation | 5.37 | 2.26 | 6.48 |
| Shahid Modarres | Mean | 32.32 | 14.92 | 47.24 |
| | Standard deviation | 4.93 | 1.41 | 6 |
| Loghman Hakim | Mean | 33.70 | 15.05 | 48.75 |
| | Standard deviation | 4.41 | 2.06 | 5.70 |
| Labbafinejad | Mean | 30.40 | 15 | 45.40 |
| | Standard deviation | 3.69 | 1.78 | 4.65 |
| Shohadaye Tajrish | Mean | 28.48 | 14.86 | 43.34 |
| | Standard deviation | 4.85 | 1.62 | 5.91 |
| Akhtar | Mean | 28.56 | 14.19 | 42.75 |
| | Standard deviation | 4.20 | 2.05 | 5.58 |
| | P-value | 0.001* | 0.004* | 0.001* |

There was a statistically significant difference between the p-values in teaching hospitals of the university and Covid-19 patients' viewpoint. This is the case such that the mean score of respectful relationship was 34.82 and that of the professional knowledge and skill was 15.53 in Taleghani Hospital and Imam Hossein Hospital as the maximum and minimum scores respectively. There was statistically significant difference between mean total scores of questionnaires in teaching hospitals (P-value=0.001<0.05).

Discussion and conclusion

Concerning caregiving, patients' consent is achieved when the patients' expectations and the care they receive are compatible, and the care is provided completely concerning patients' physical, mental and social needs (Asadi et al., 2020). The results of the present study have shown that the

patients attending the study viewed nurses' caring behaviors favorably. In this study, though nurses' caring behaviors in two aspects of professional knowledge and skill, and respectful relationship have been evaluated as medium and acceptable, there is a long gap to bridge to achieve the ideal caring behaviors and achieving complete patients' satisfaction. Considering the results of the studies, it has been determined that there is an overall positive correlation between the mean total scores of nurses' caring behaviors, and Covid-19 patients' satisfaction (Seyedoshohadaee et al., 2015; Azizi-Fini et al., 2012). These results indicate that it is possible to achieve ideal caring and full patients' satisfaction by planning and considering future outlook in order to educate and empower nurses in terms of correct caring behaviors, and to provide quality caretaking. Furthermore, we can enhance patients' satisfaction and help to improve the patients' views on this issue by enhancing their understanding and knowledge of nurses' correct caring behaviors in respectful relationship aspects. Some limitations of the present study are as follows:

- Time-consuming nature of explaining and teaching patients about electronic questionnaire completion created a further problem due to special conditions of patients, risk of disease transmission, and the necessity of complying with the health protocols. The problem was eliminated to a large extent by taking some special measures and providing the necessary explanation through other messengers including WhatsApp messenger in case of necessity, and the patients and their families were briefed on this issue.

- Noncooperation on the part of some teaching hospitals of the university with the researcher to collect data. To rationalize the noncooperation, they argued that the results of the research could be conveyed to the treatment deputy of the university and even to the relevant ministry by the researcher, thus having a negative effect on their evaluation of the hospital. However, the problem was resolved to some extent by discussing the problems and providing the study goals to the hospital authorities.

- Since the number of samples in different hospitals varied widely due to each hospital's particular conditions, the results of the data analysis presented in table 19 are not reliable enough, and it is necessary to conduct further studies to compare the hospitals in terms of nurses' caring behaviors from patients' viewpoints.

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The authors declare that they have no competing interests.

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