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Sciences; Economics & Business; Social, Politics & Humanities;
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Factors Associated with Nurses Perception About Nurse Caring Behaviors

(Case at Hospitals of Harar Town, Eastern Ethiopia)

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Abstract:

Introduction: Introduction: Nurses spend considerable time in the act of caring, so perspectives of nurses about nurse caring behaviors impact on provision of nurse caring, health services and patients. High work load of nurses affect quality of care, which leads to patient dissatisfaction. However, little is known about factors associated with nurses' perception about nurse caring behaviors in developing countries including Ethiopia. The aim of this study was to assess the factors associated with nurses' perception about nurse caring behaviors at hospitals of Harar town, Eastern Ethiopia.

Methods: Hospital based cross sectional study design was employed among 474 randomly selected nurses from January 1-30, 2018. A six point Likert scale nurse caring behaviors(CBI-24) questionnaire was self-administered to participants. Data entry and analysis was carried out using SPSS 22 version software. Binary logistic regression was used in bivariate and multivariable analysis. Associated factors was presented with crude and adjusted odds ratio with 95% CI. Statistical significance was set at $P \leq 0.05$.

Results: This study revealed that 85.8% of nurses have positive perception towards nurse caring behaviors. Five factors were independently associated with nurses' perception about nurse caring behaviors. Nurses who did not have satisfaction with profession were 3.51 times more likely to had negative perception (AOR=3.51, 95% CI: 1.54-7.97). Nurses with bad relation with doctors were 4.56 more likely to had negative perception (AOR= 4.56, 95% CI: 2.15-9.67). Nurses who had conflict with supervisor were 2.44 times more likely to had negative perception (AOR=2.44, 95% CI: 1.13-5.25). Nurses with diploma and less education were 2.65 times more likely to had negative perception (AOR=2.65,95% CI: 1.06-6.62). The odds of having positive perception about nurse caring behaviors was 3.56 times higher in married nurses (AOR=3.56, 95% CI:1.28-9.88).

Conclusions: It was concluded that 399 (85.8%) respondents have positive perception towards nurse caring behaviors. Educational status, marital status, conflict with supervisor, relation with doctors and satisfaction with profession showed statistical significant association with nurses' perception towards nurse caring behaviors

Keywords: Nursing Care, Nurses' Perception, Behaviors, Factors, East Ethiopia.

1. Introduction

Historically, the description nurse caring has been defined from different perspectives, from the very meaning and essence of nursing to everyday direct care of patients. The factual basis for the conceptualization of caring in the field of nursing was laid down by theorists such as Lininger, Watson, Ray, Gait and others in the 1970s and 1980s[1]. Nurse caring behavior is nursing care behavior which includes building of trustable, close relationship and considered as key provision of health service to the patients[2]. Nurse caring is the essence of nursing and considered as basic factor that distinguishes between nurses and other health professions [3].

The key roles of nurses in sub Saharan countries are providing physical and psycho-social care for patients in hospitals in an ethical and professional manner (taking care of patients), providing health education to communities, clients and patients; managing health care environment and optimize care delivery; advocating on behalf of patients to ensure that health needs are addressed properly; providing emergency care and collaborate with stakeholders to deliver quality of care[4]. Other major role of nurse as making a diagnosis, prescribing treatment in an ethical and professional manner[4].

Evidence from different studies revealed that the nurses' perception about nurse caring behaviors has been related with different factors like socio-demographic characteristics, educational background, workload, job satisfaction, positive relationship with doctors, satisfaction with profession, working place and work experience [5,6,7,8]. Moreover, job satisfaction was another factor which influence nurses' perception about nurse caring behaviors [6,9,10] while low job satisfaction was associated with absence of education and upgrading in nursing career[11].

Many studies concerning factors associated with nurses' perception about nurse caring behaviors was undertaken in developed world while very few research was done in developing countries. No research was done so far on factors associated with nurses' perception about nurse caring behaviors using validated tools in Ethiopia. From empirical knowledge, one can note that there is no proper implementation of nurse caring behaviors during hospitalization. This in turn creates patient dissatisfaction and poor nurse caring delivery which result in poor prognosis. Thus; this study is aimed to assess factors associated with nurses' perception about nurse caring behaviors at hospitals of Harar town, Eastern Ethiopia.

2. Materials and methods

Study area and period

The study area is Harar town, situated 525 km east of Addis Ababa. Its geographical coordinates are 9⁰20 N and 42⁰10 E. The town has six urban and three rural districts. According to Harari statistical abstract report, population of Harar town was 123294, (54.2%) of the regional population in 2016[12].

Harar town has two military, two public, two private and one non-governmental (Fistula) hospitals. There were 493 staff nurses in the Hospitals of Harar town in 2018.

Study design and population

Hospital based cross sectional study design was used. The source population was all nurse employed in hospitals at Harar town while the study population were all nurses who fulfill inclusion criteria and those nurses who were on work during data collection period.

Inclusion and exclusion criteria

Nurses who are permanent employee (who have > 6 month working experience) of hospitals in Harar town, active in duty during data collection period were included in the study. Nurses who are working in non-clinical areas, who were in contract job and who were on leave during data collection were excluded from this study.

Sample size determination and procedure

In determining sample size, the outcome variable and associated factors should be rigorously examined. Thus; comparison of sample size for each specific objective was made in detail using single population as well as single proportion formula and large sample size was selected to be used for this study[6,11,15].

Table 1 Sample size comparison for Nurses perception about nurse caring behaviors and associated factors in hospitals of Harar town, Eastern Ethiopia, 2018

Perception/ Risk factors	Standard deviation/ Proportion	Sample size	Formula	Reference
Nurse caring behaviors (1 st objective)	0.45	311	Single pop. Mean	Kilic M <i>etal</i> , 2015 (Turkey)
Nurse caring behaviors (1 st objective)	0.53	431	Single Pop. Mean	Papastavrou E <i>etal</i> ,2011 (Cyprus)
Satisfaction with profession (2 nd objective)	0.69	329	Single pop. Proportion	Asehanfi TD <i>etal</i> , 2015 (North West Ethiopia)
Work load (2 nd objective)	0.78	264	Single pop. Proportion	Asehanfi TD <i>etal</i> ,2015 (North West Ethiopia)
Positive relation with Doctors(2 nd objective)	0.75	288	Single pop. Proportion	Asehanfi TD <i>etal</i> ,2015 (North West Ethiopia)
Gender (2 nd objective)	0.43	376	Single pop. Proportion	Asehanfi TD <i>etal</i> ,2015 (North West Ethiopia)

Single population mean formula was used to find the final sample size.

$$n = \frac{z^2 \frac{\alpha^2}{2} \times s^2}{d^2}$$

$$z^2 \frac{\alpha^2}{2} = 95\% \text{ CI} = (1.96)^2$$

s=Standard deviation of sample(0.53)

d= Margin of error(0.05)

According to the comparison result, large sample size (431) is taken. Thus; after adding 10% non-response rate, the final sample size was 474. All hospitals in Harar town were included in this study. Proportionate sample size allocation was applied for each hospital and ward. Simple random sampling was used to select the study subject from the list of nurses who fulfill the inclusion and exclusion criteria. Lists of nurses obtained from each hospital and ward was taken as sampling frame.

Variables

The dependent variable was nurses' perception about nurse caring behaviors while the independent variables were age, gender, marital status, education, income, experience, work load, job satisfaction,

satisfaction with profession, relation with doctors, conflict with supervisor, type of institution, resignation desire, uncertainty about treatment and type of department.

Operational definition

Perception: Is the organization, identification, and interpretation of sensory information in order to represent and understand the caring environment.

Nurses' perception: Is perception towards nursing action, conduct and manner which contribute in building, maintaining trust and safeguard patient in Hospital [15].

Caring behavior: Actions characteristic of concern for the well-being of a patient, such as sensitivity, comforting, attentive listening, honesty, and nonjudgmental acceptance.

Negative/ bad perception: Grouping of answer which includes never, almost never and occasionally.

Positive/ good perceptions: Grouping of answer which includes usually, almost always and always.

Work load: Work that a person is expected to do in a specified time.

Job Satisfaction: The contentment one feels when one has fulfilled a job desire, need or expectation.

Nursing care: - Type of service to promote, prevent and control individual health compliant and is done by nurses.

Nurse: Health professional responsible to nursing care service.

Data collection and analysis

The tool employed in this research was nurse caring behaviors (CBI-24) standardized questionnaire. The instrument was designed to assess nurses' perception about nurse caring behaviors with internal consistency ($\alpha=.96$), convergent validity ($r=.62$), good test-retest reliability ($r=.82$) and considered taken as stand alone instrument administered to the new sample (16). Two days training on the content of questionnaire and procedures of data collection was provided for two BSC nurse supervisors. Pretest on 5% (24 participant) of sample size was carried out in another Hospital (Bisidimo general hospital) and ambiguous questions were clarified and corrected. During data collection, supervisors as well as principal investigator carried out daily supervision and checkup of filled questionnaire completeness.

Data entry and analysis was done using SPSS 20th edition. Ordinal data (Likert-type scale) was combined into two categories. The outcome variable has dichotomized in to negative and positive perception. The first category, negative perception, incorporated the options never, almost never and occasionally whereas the second category which was positive perception, incorporated the options usually, almost always and always [17].

Model fit and multicollinearity tests were carried out while bivariate and multivariate analysis were executed using logistic regression model to identify associated factors with nurse perception about nurse caring behaviors. Measures of association were reported by crude and adjusted odds ratios whereas $P \leq 0.05$ was taken as statistical significance cutoff point in all analysis.

3. Results

A total of 474 nurses were enrolled after fulfilling the inclusion criteria. Complete data were obtained from 465 nurses, making response rate of 98.1%. The result showed that 85.8% of the respondents have positive perception towards nurse caring behaviors.

Socioeconomic characteristics of nurses

The result of this study showed that 237 (51%) of nurses had age of 20-30 years while 119 (25.6%) of them had age of 31-40 years, 83 (17.8%) of participant had age of 41-50 years and 26 (5.6%) of nurses had age of 51-60 years. Two hundred thirty seven (50.1%) of nurses whom participated in this study were males. Two hundred twenty six (48.6%) of nurses were married, 200 (43%) of study subject were single, 39 (8.4%) of participant were divorced or widowed. A total of 374 (80.4%) of nurses earned above 3000 birr while 91 (19.6%) of nurse earned less than 3000 birr per month. 302 (64.9%) of nurses held degree

whereas the rest 147(31.6%) held diploma, 10 (2.2%) had certificate and 6 (1.3%) had masters degree (Table 2)

Table 2 Background, socioeconomic and educational level characteristics of nurses in Harar town hospitals, Eastern Ethiopia,2018.

Variable	Category	Frequency	Percent
Age N = 465	20-30	237	51.0
	31-40	119	25.6
	41-50	83	17.8
	51-60	26	5.6
Sex N= 465	Male	233	50.1
	Female	232	49.9
Marital status N=465	Married	226	48.6
	Single	200	43.0
	Divorced/ Widowed	39	8.4
Monthly income n= 465	Less than 3000	91	19.6
	Above 3000	374	80.4
Education N=465	Certificate	10	2.2
	Diploma	147	31.6
	Degree	302	64.9
	Masters	6	1.3

Bivariate analysis of socioeconomic factors associated with nurses' perception about nurse caring behaviors

The result of this study showed that monthly income (COR=3.6,95% CI:2.0-6.3), education (COR=4.0,95% CI:2.3-6.8), age 20-30 years (COR=0.7, 95% CI:0.4-1.2) and marriage (COR=3.5 ,95% CI:1.6-7.9) showed statistically significance association with nurses' perception about nurse caring behaviors (Table 3). However; no statistically significance association was observed between sex and age (31-40 years) with nurse perception about nurse caring behaviors (Table 3).

Table 3 Bivariate analysis of socioeconomic factors associated with nurses' perception about nurse caring behaviors in hospitals of Harar town, Eastern Ethiopia, 2018.

Variables	Category	Positive Perception (%)	Negative perception (%)	COR (95% CI)	P-value
Monthly income	3000 birr & less	64(16.0)	27(40.9)	3.6 (2.0-6.3)	0.000
	Above 3000	335(84.0)	39(69.1)	1	
Education	Diploma & less	116(29.1)	41(62.1)	4.0(2.3-6.8)	0.000
	Degree & above	283(70.9)	25(37.9)	1	
Age	20-30	212(53.1)	25(37.9)	2.0(1.0-3.8)	0.029
	31-40	99(24.8)	20(30.3)	1.1(0.6-2.3)	0.629
	Above 40	88(22.1)	21(31.8)	1	
Sex	Male	196(49.1)	37(56.1)	1	
	Female	203(50.9)	29(43.9)	0.7 (0.4-1.2)	0.297
Marriage	Married	201(50.4)	25(37.9)	3.5 (1.6-7.9)	0.002
	Single	171(42.9)	29(43.9)	2.6 (1.1-5.7)	0.016
	Divorced/Widowed	27(6.8)	12(18.2)	1	

Bivariate analysis of work related factors associated with nurses' perception about nurse caring behaviors

According to the result of this research, work experience (COR=1.8,95% CI:1.0-3.2) , workload (COR=2.9, 95% CI:1.4-6.2), job satisfaction (COR=3.2,95% CI:1.8-5.5) , satisfaction with profession (COR= 3.6, 95% CI: 2.0-6.2), relation with doctors (COR= 9.9, 95% CI:5.6-17.6), conflict with supervisor (COR=5.3, 95%CI 2.8-9.9), resignation desire (COR=3.0, 95% CI:1.7-5.3) and institution type (COR=1.9, 95% CI:1.0-3.6) were found to be statistically significant association with nurses' perception about nurse caring behaviors. On the other hand; uncertainty about treatment and type of department did not show statistically significance association with nurses' perception about nurse caring behaviors (Table 4).

Table 4 Bivariate analysis of work related factors associated with nurses' perception about nurse caring behaviors in hospitals of Harar town, Eastern Ethiopia,2018.

Variables	Category	Positive Perception(%)	Negative perception(%)	COR (95% CI)	P-value
Experience	10yrs and less	306(76.7)	42(63.6)	1	
	Above 10	93(23.3)	24(36.4)	1.8 (1.0-3.2)	0.025
Work load	Yes	271(67.9)	57(86.4)	2.9 (1.4-6.2)	0.003
	No	128(32.1)	66(13.6)	1	
Job satisfaction	Yes	276(69.2)	27(40.9)	1	
	No	123(30.8)	39(59.1)	3.2 (1.8-5.5)	0.000
Satisfaction with profession	Yes	328(82.2)	37(56.1)	1	
	No	71(17.8)	29(43.9)	3.6 (2.0-6.2)	0.000
Relation with doctors	Good	336(84.2)	23(34.8)	1	
	Bad	63(15.8)	43(65.2)	9.9 (5.6-17.6)	0.000
Conflict with supervisor	Yes	164(41.1)	52(78.8)	5.3 (2.8-9.9)	0.000
	No	235(58.9)	14(21.2)	1	
Resignation desire	Yes	172(43.1)	46(69.7)	3.0(1.7-5.3)	0.000
	No	227(56.9)	20(30.3)	1	
Uncertainty about treatment	Yes	128(32.1)	27(40.9)	1.4(0.8-2.5)	0.160
	No	271(67.9)	39(59.1)	1	
Department	Medical/surgical	147(36.8)	27(40.9)	1.1 (0.6-2.0)	0.527
	Other	252(63.2)	39(59.1)	1	
Institution type	Public	342(85.7)	50(75.8)	1	
	Private/NGO	57(14.3)	16(24.2)	1.9(1.0-3.6)	0.042

Factors independently associated with nurses' perception about nurse caring behaviors

All variables which showed statistical significance association with nurses' perception about nurse caring behaviors ($P \leq 0.05$) in the crude analysis were entered in to final logistic regression to avoid an excessive number of variables and unstable estimates in the subsequent model. Accordingly, only five factors were independently associated with nurses' perception about nurse caring behaviors (Table 5).

Nurses who were not satisfied with profession were 3.51 times more likely to have negative perception about nurse caring behaviors than those nurse who were satisfied with the profession(AOR=3.51,95% CI: 1.54-7.97) (Table 5).

Nurses who were in poor relation with doctors were 4.56 times more likely to have negative perception about nurse caring behaviors than nurses who were in good relation with doctors (AOR=4.56,95% CI: 2.15-9.67) (Table 5).

Those nurses who had conflict with supervisor were 2.44 times more likely to had negative perception about nurse caring behaviors than nurses who had not conflict with supervisor(AOR=2.44,95% CI: 1.13-5.25) (Table 5).

Nurses with diploma and less education were 2.65 times more likely to have negative perception about nurse caring behaviors than nurses with BSC and above education(AOR=2.65,95% CI: 1.06-6.62) (Table 5).

The odds of having positive perception about nurse caring behaviors was 3.56 times higher in married nurse compared to divorced/widowed nurses(AOR=3.56,95% CI:1.28-9.88) (Table 5).

Table 5 Multivariate analysis of factors associated with nurses' perception about nurse caring behaviors in hospitals of Harar town, Eastern Ethiopia,2018.

Variables	Category	COR (95% CI)	AOR (95% CI)	P-value
Experience	10yrs and less	1	1	
	Above 10	1.880 (1.082-3.267)	1.40 (0.57-3.42)	0.457
Work load	Yes	2.991(1.436-6.231)	1.28(0.514-3.20)	0.593
	No	1	1	
Job satisfaction	Yes	1	1	
	No	3.241 (1.899-5.533)	0.92 (0.42-1.99)	0.829
Satisfaction with profession	Yes	1	1	
	No	3.621(2.090-6.274)	3.51 (1.54-7.97)	0.003
Relation with doctors	Good	1	1	
	Bad	9.971 (5.620-17.691)	4.56(2.150-9.67)	0.000
Conflict with supervisor	Yes	5.322 (2.855-9.923)	2.44(1.13-5.25)	0.023
	No	1	1	
Resignation desire	Yes	3.035 (1.732-5.320)	2.01 (0.99-4.07)	0.053
	No	1	1	
Institution type	Public	1	1	
	Private/NGO	1.920 (1.024-3.601)	1.60(0.68-3.76)	0.285
Monthly income	3000 birr & less	3.624 (2.072-6.337)	0.67 (0.26-1.74)	0.405
	Above 3000	1	1	
Education	Diploma & less	4.001 (2.326-6.881)	2.65(1.06-6.62)	0.036
	Degree & above	1	1	
Age	20-30	2.024(1.077-3.804)	2.55(0.85-7.60)	0.094
	31-40	1.184(0.601-2.323)	1.12(0.43-2.96)	0.815
	Above 40	1	1	
Marriage	Married	3.573 (1.610-7.929)	3.56 (1.28-9.88)	0.015
	Single	2.621 (1.195-5.750)	2.46(0.79-7.64)	0.121
	Divorced/Widowed	1	1	

4. Discussion

The finding of this study revealed that nurses who did not have satisfaction with profession were 3.5 times more likely to had negative perception about nurse caring behaviors than those nurse who were satisfied with the profession. This finding was in line with the study conducted in North West Ethiopia which indicated that nurses who had professional satisfaction were almost three times more likely to perceived caring behaviors compare to nurses unsatisfied with their profession[6].The reason could be due to socioeconomic, work environment and cultural similarities among study subject.

According to the finding of this study, nurses who had bad relation with doctors and conflict with supervisors were 4.5 and 2.4 times more likely to had negative perception about nurse caring behaviors than their counterparts respectively. This was in agreement with Greek study findings where significantly negative correlations were observed between perception of nurses about nurse caring behaviors with bad relation with doctors and conflict with supervisor[18].The Ethiopian study also disclosed that nurses who have positive relationship and team work with physicians in Hospital were three times more likely to perceive nurse caring behaviors compare to their counterparts [6].The reason could be due to the fact that Nurse will not be motivated, satisfied which in turn leads to depression and negative perception about Nurse caring behaviors.

The finding of this study depicted that nurses with diploma and less education were 2.6 times more likely to had negative perception about nurse caring behaviors than nurses with BSC and above education. This finding was supported by research done in Turkish which indicated positive correlation between educational level and perception about nurse caring behaviors [11].This may be because of the fact that lower educational level was correlated with less career prospects that affect mediating variables for occupational stress like work ability [19].In addition, it might be due to better knowledge and skill acquisition through higher education.

The study finding also depicted that the odds of having positive perception about nurse caring behaviors was 3.5 times higher in married nurse compared to divorced/widowed nurses. This finding was in line with the finding of Greek study which revealed that marital status had significance association with nurses' perception about nurse caring behaviors[20].The reason might be the married persons take/feel more responsibility, more stable in life, motivated and happy so that they concentrate on their profession and job.

5. Conclusions

The findings of this study revealed that 85.8% of the respondents had positive perception. Educational level, marital status, conflict with supervisor, relation with doctors and satisfaction with profession were found to be the predictors of nurses' perception about nursing caring behaviors.

Availability of data and materials: The data sets used to support the findings of this study are available from the corresponding author upon request.

Conflict of interest: The authors declare that there is no conflict of interest concerning this research.

Acknowledgments: Haramaya University was acknowledged for funding of this research. Gratitude also goes to study participants, supervisors and Hospital managers for their support in data collection period.

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