Emergency Room Nurses Caring Behaviour Based on Characteristic a Cross- sectional Study

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Abstract

The nurses caring behaviour in the Emergency Room (ER) in Indonesia is still relatively low. Several studies state that factors that influence nurses caring behavior are age, marital status, work experience, and educational level. This study contributed to determining whether the differences in the ER nurse characteristics affected the caring behavior of the ER nurses. This study used a cross-sectional design. A total of 14 ER nurses and 28 ER patients were involved. The instrument uses the Gadar Caring Scale in the behavioral domain. Analysis used independent T-test and ANOVA. The results show that most of the respondents were women (78.6%), aged between 31-40 years (50%), had a D3 degree in nursing (92.9%), married (85.7%), and had worked for 10 to 20 years (50%). There was no difference between the characteristics of gender (p=0.36), age (p=0.53), education (p=0.31), marital status (p=0.94), and length of work in the hospital (p=0.24) in ER nurses caring behavior. The conclusion of this study was that the different characteristics of the ER nurses did not affect the caring behavior of the ER nurses. It was hoped that the nurse's caring behavior would always be optimal because it's important in the patient's recovery.

Keywords: Characteristic; Caring Behaviour; Emergency Nursing

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1. Introduction

Excellent service is the most important thing that is done in a hospital. Hospitals are required to be able to provide quality health services to patients. The emergency room (ER) is the most challenging part of the hospital in terms of improving the quality of care. Patients in the emergency department have special needs compared to patients on the ward. Emergency patients experience unstable conditions and require special treatment from nurses (Fusi-Schmidhauser et al., 2020). One of the caring dimensions is a humanistic principle that the management of patients during emergencies should consider humanistic principles (Lecocq et al., 2021). During the covid-19 pandemic, several factors, such as the increasing number of patients, led to an increase in the workload of nurses, the lack of personal protective equipment, and the need for special treatment techniques caused mental pressure on the ER nurses, which had an impact on caring behavior toward ER patients (Babapour et al., 2022).

The nurse's caring behavior is very important in the patient's healing process. Caring behavior are actions that are concerned with the well-being of a patient, such as sensitivity, comforting, listening and nonjudgmental acceptance of the patient. The ability of the nurses to "care" may affect their own personal

expressions of caring (Azimirad et al., 2022). However, some studies found that nurses caring behavior in Indonesia is relatively low. Based on caring behavior research data obtained from total of 65 nurses, found that nurses' caring behavior bad and average category is occupied by 52.3% (Ramadhan et al., 2019). Other research showed that most of the nurses were less caring behavior, which had an impact on dissatisfaction of services felt by patients (Mau et al., 2020) Research investigating the ER nurses' caring behavior was found to be low. According to the (Kibret et al., 2022) study, only 51.67% of the nurses had good caring behavior. Also stated that only 59.3% of nurses are mostly caring high, and 37% of nurses are moderately caring. Other research also states that several things must be considered to improve service quality, such as therapeutic communication and PBI experience in relation to improving service quality (Ardhiasti A et al., 2022).

Based on the results of several studies, it found many factors that influence nurses caring behavior. Age, marital status, sex, length of work and education level of nurses are the factors that can affected nurses caring behaviour (Tong et al., 2022; Wei et al., 2021). The importance of the effect of nurse caring behaviour on the quality of care becomes very important to know the nurse characteristics (Hutabarat et al., 2022). The

research contribution to identifying the characteristics of ER nurses and analyzing the effect of differences in the characteristics of ER nurses on caring behaviour at Tugu Ibu Hospital, Depok, Indonesia.

2. Method

This study was a quantitative study using a cross-sectional design. This research was conducted in the emergency room at Tugu Ibu Hospital, Depok in September 2022. The population sample of this research was all nurses who served in ER at Tugu Ibu Hospital. Total sample involved in this study was 14 nurses. The dependent variable in this study is the caring behaviour of the ER nurses, while the independent variables are the characteristics of the nurses including age, gender, length of work and education.

This study used the Gadar Caring Scale instrument in the behavioural domain to assess the caring behaviour of ER nurses. Gadar Caring Scale instrument data entry was carried out by patients or families with a total of 28 patients. The Gadar Caring Scale instrument has been tested for validity and reliability with valid and reliable results.

Data were analyzed using statistical software univariate analysis in proportion distribution on categorical variables. The analysis to determine the relationship between nurses's characteristic and caring behaviour was a bivariate analysis. The hypothesis test for the relationship between gender, education level and marital status used the independent T test. Hypothesis testing of the relationship between age and length of work with caring behaviour used the Oneway ANOVA test. This research was reviewed by the Ethic committee's of Akademi Keperawatan Yaspen Jakarta and Ethics committee's of Tugu Ibu Hospital and received ethical approval from with number 810/AA/01/SDM/IX/2022.

3. Results and Discussion

Based on Table 1, most of the nurses are female (78.6%) while males are (21.4%). The age of the ER nurses was found to be dominant in the range of 31 to 40 years (50%) and 41 to 50 years (35.7%), while those aged less than 30 years and more than 50 years were respectively 7.1%. Almost all respondents had Diploma 3 nursing education (92.9%) and only 1 respondent (7.1%) had S1 ners degree. Respondents with married status were more dominant (85.7%) compared to unmarried respondent (14.3%.). The characteristic results show that majority of the ER nueses have worked in the hospital for 10 to 20 years (50%). Meanwhile, the length of work in the hospital was between 5 to 10 years and more than 20 years by 21.4% and <5% years (7.1%).

Table 1. Analysis of the differences ER nurse characteristics and nurses' caring behaviour in Tugu Ibu Hospital (N=14)

Characteristics	Frequency (f)	Percentage (%)	Caring Score Mean (SD)		p-value
Gender					
Men	3	21.4	96	(3.6)	0.26
Women	11	78.6	100.5	(8)	0.36
Age					
<30 years	1	7.1	108	(0.1)	
31-40 years	7	50	99	(3.4)	0.53
41-50 years	5	35.7	97.4	(11.4)	
>50 years	1	7.1	106	(0.1)	
Education Level					
D3 nursing	13	92.9	100.19	(7.4)	0.31
S1 Ners	1	7.1	92	(0.1)	
Marital Status					
Married	12	85.7	99.5	(7.4)	0.94
Single	2	14.3	100	(11.3)	0.94
Length of Work					
<5 years	1	7.1	108	(1.25)	
5-10 years	3	21.4	100.1	(8)	0.24
>10–20 years	7	50	96	(7.1)	
>20 years	3	21.4	104.7	(7.4)	

Table 1 also shows the difference between the characteristics of the ER nurses and the ER nurses caring behaviour score. In terms of gender characteristics, there was no significant difference between male ER nurse caring scores and female ER nurse caring scores (p=0.36). The age characteristics of the ER nurses also showed no significant results between ER nurses aged <30 years, 31-49 years, 41-50 years and >50 years (p=0.53). Nurses educational level show no differences in caring behaviour between ER nurses with D3 and S1 ners degree (p=0.31). The marital status of ER nurses also found no significant difference in caring behaviour between married and unmarried ER nurses (p=0.94). The characteristics of length of work in the hospital showed insignificant results, so there was no significant difference in the caring behaviour of ER nurses between nurses who worked for <5 years, 5-10 years, 10-20 years or >20 years.

There was no difference in the caring behaviour of the ER nurses between male and female nurses. This result in line which shows that the gender of the nurse is not related to the nurse's caring behaviour (Yau et al., 2019). However, this is different from the theory which states that the female sex has maternal instincts, a loving soul and mother's affection for her family (Obeleniene et al., 2021).

Age characteristics also found no difference between the ER nurses and the caring behaviour. The same result was also shown in several other studies which stated that there was no significant difference between the age of the ER nurses and the caring behaviour (Salhi et al., 2019; Yau et al., 2019). Different findings were found in studies which stated that there was a relationship between age and the caring behaviour of practicing nurses (Alikari et al., 2022). The study also stated that increasing age will bring positive traits in carrying out their work (Handayani & Kuntarti, 2022).

The educational status of the ER nurses, both D3 and S1 ners degree also showed insignificant results in the caring behaviour of the ER nurses. This result is supported which stated that the educational level of nurses was not related to nurse caring behaviour (Yau et al., 2019). However, nurses with higher education have more mature considerations due to breader knowledge and perceptions when compared to nurses with lower education (Oluma & Abadiga, 2020)

In this study also found that there was no difference in caring behaviour toward patients between married and unmarried ER nurses. This is in accordance with (Kartini *et al.*, 2019) research which found that there was no relationship between marital status and caring behaviour. (Handayani & Kuntarti, 2022) mention that there are real differences in addressing a job between individuals who are married and not married. Marriage imposes increased responsibilities that made regular work more valuable and important (Alonzi *et al.*, 2020). Someone who is married feels safer with his

current job, because it's a guarentee for his future (Karimi et al., 2019).

The length of working status of ER nurse also did not show any difference in the behaviour of caring for the ER nurse. However, another study stated that there was influence of length of work with caring. Based on research, stated that a long working period tends to make an employee feel more comfortable at work (Handayani & Kuntarti, 2022). This is because they have adapted to the environment for quite a long time. Caring behaviour as values and experinces emerge from interactions with patients (Suprajitno et al., 2020).

The results of this study may be due to caring behaviour tendencies that become an accepted part of the work culture. Nurse may have received appropriate incentive. Some studies stated that there was directly correlated between nurse caring behaviour and incentive (Amirullah et al., 2022; Tong et al., 2022). However, nurses who have a good caring behaviour will not be influenced by incentives because they work according to the calling of the heart to serve patients as well as possible (Handayani & Kuntarti, 2022; Ramadhan et al., 2019).

4. Conclusions and Suggestions

There was no significant difference between the characteristics of the ER nurses and the caring behaviour of the ER nurses. Further research can be carried out with a larger number of respondents.

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