Research Article

Health Professionals' Perceptions of the Status and Image of Nursing

Mohammad Khatib

R.N., Ph.D and Salam Hadid, R.N., Ph.D, Shivnath Singh College, Gwalior.
DOI: https://doi.org/10.24321/2348.2133.202305

I N F O

A B S T R A C T

Background: The image of nursing as a profession can be defined as its perception in the eyes of the nursing staff, the multidisciplinary team, the patients and their families. The perception of professionalism in nursing can influence the profession in several ways. Cooperation between nursing and other health professionals includes direct and open communication when most functions are performed by a multidisciplinary team. This collaboration affects the well-being of patients, and the satisfaction of medical and para-medical staff. This study examines the status and image of the nursing profession in the eyes of medical and para-medical professionals and the relationship between selected characteristics of these professionals and their perceptions of nursing.

Method: The study was a quantitative, descriptive study, based on data collected from 234 interviewees working in different health care settings who filled in a structured questionnaire and took part in a face-to-face interview.

Findings: Attitudes of health care professionals to the nursing profession are generally positive. However there is still reluctance to acknowledge the contribution of academic studies to professional development.

Conclusion: Despite the general consensus among health professionals about the importance of professionalization of nursing, the role of nursing personnel is still seen as focused mainly on the satisfaction of the physical needs of patients and far less as involved in treatment decision-making processes, organizational policy and health promotion

Keywords: Nursing, Health Care Professionals, Multidisciplinary Team, Profession, Patients, Health Authorities

Introduction

One of the most important challenges facing the nursing profession and the people engaged in it revolves around the way it is perceived by the public in general and by health professionals and the health system in particular. Since the 19th century, the issue of the perception of the nurse and the role of nursing personnel has been a central challenge to the profession.[1] The image of the nursing profession is defined as the perception of the profession in the eyes of nursing staff, multidisciplinary teams, patients and their families.[2] The image of nursing is dynamic, multi-dimensional, paradoxical and complex.

Khatib M
Ind. J. Holist. Nurs. 2023; 14(2)

16

It is dynamic in that it changes over the years under the influence of time and environment, and is also associated with changes people go through in time which bring about changes in the perceived image of the nursing profession.[1] The concept is also multi-dimensional when one dimension is the public's perception of nursing. A further dimension is the perception of the nursing profession in the eyes of those who practice it (nurses and students) and in the eyes of other health professionals. In addition, the image of the profession is both paradoxical and complex is that it varies between being based on a stereotype and being viewed as a profession, and there are many factors that affect the formation of these views. The image of the nursing profession over the years has been affected by political, socio-economic, cultural, technological and educational factors.[3]

The professional perception of nursing can influence the nursing profession on various levels, including those of performance, new staff recruitment, staff shortages, contact with additional health staff, violence against staff, layman education, remuneration rates, staff attrition and job satisfaction.[1,4] In addition, the behavior of the nurse in role fulfilment may be affected.[5] The image of the profession affects the decision to choose to study nursing, since the more positive the image of nursing, the more likely people are to choose it as a profession.[6] The image of the profession affects the decision to adopt nursing as a career, to remain in the profession and to recommend it to others as a career choice.[7,8] In view of the relationship between the image of the profession and the readiness or lack thereof of people to engage in it, health authorities around the world have set up teams to investigate this connection in depth. Based on their findings, they have taken steps to improve nursing's professional image in order to raise awareness of the profession and to encourage recruits to join it.[2] In recent decades, nursing as a therapeutic profession has made great strides in its nature, areas of expertise and especially in academization, reflected in the development of a variety of education and vocational training programs, with plans for further graduate academic studies on the one hand, and the expansion of the boundaries of the role, the authority and the responsibility of those in the profession on the other. Expanding the boundaries of the role is reflected in the redefinition of actions that were considered "medical practice" as "nursing practice". This change has given nurses more power and has added responsibilities to nursing staff as patient caregivers. In this way, the relationship between responsibility and authority has become more balanced, and the commitment of the nursing staff to decision making has grown.[9] Yet despite the impressive development of the profession, there is still a large discrepancy between the perceptions and attitudes of the public towards the profession and its

practitioners and the essence of the true role of nursing as expressed in the Code of Ethics and the professional definitions of nursing. On the one hand, the nursing profession has been able to develop independently and build a wide body of knowledge which includes treatment protocols and guidelines as part of the major development of professionalism, but on the other, research has shown that nursing activities are still insufficiently recognized by the public at large.[10] Many studies have dealt with the image of the nursing profession in the eyes of the general public, patients, nursing professionals, nursing students and other health professionals.[2,11,12] However, fewer studies have dealt with medical and other health care professionals' perceptions of nursing and nurse practitioners. The image of nursing in the public view is not compatible with the developments that have occurred in the profession and its job description,[10] areas of practice, financial compensation, degree of independence in decision making and opportunities for development and promotion.[2] The image of the nursing profession among the general public is based on a variety of stereotypes. It is usually considered a female profession, highly valued and even heroic, but not rewarding in terms of appropriate pay; moreover, nurses are seen as overworked but also passive, and as having to deal with stressful mental processes and situations that require both empathy and expertise or education.[2] The literature also suggests that the image of the nursing profession among the general public is also influenced by information that reaches the public through the media. Other characteristics such as prestige and honor granted to the profession as well as the independence of practitioners and their perception as workers in a profession based on the values of humanism and leadership are affected by the dominant culture of the general public.[10] In a study done in Argentina which examined the image of nursing seen through the eyes of nurses, doctors and other health workers, the provision of physical care was seen as the primary purview of nursing personnel. Doctors believed more than others that the central role of the nurse was to comply with any treatment prescribed by the doctor. The same study showed that the majority of nurses felt themselves capable of making decisions and carrying out treatments without a doctor's orders, a finding which was at odds with the opinions of doctors and other health care professionals.[13] Cooperation between nursing and other health professionals, especially doctors, based on direct and open communication and respect for various viewpoints and shared responsibility for problem solving is essential for achieving therapeutic goals where most functions are performed by a multidisciplinary team. This collaboration affects the patient's condition positively and leads to a greater sense of fulfillment and satisfaction for medical staff, higher medical productivity and reduced treatment

17

Khatib M
Ind. J. Holist. Nurs. 2023; 14(2)

costs.[14,15] The present study examined the status and image of the nursing profession in the eyes of health professionals (medical and paramedical). It examined the perceptions by health professionals of nursing as a profession; its academic development; the degree of difficulty of nursing practice, and whether the nurse acts as a source of information for health professionals and for their patients. In addition, the study examined the perceptions of health professionals of the roles and areas of involvement of nurses during the course of their work, and whether there is a relationship between the personal and professional characteristics of members of the health professions (gender, ethnicity, place of employment, occupation, level of education, exposure to therapy, therapeutic framework) on the one hand, and their attitudes towards, and perceptions of, nursing and nursing practitioners on the other. Method This was a quantitative, descriptive study, based on data collected directly from respondents working in different health care settings. 234 randomly selected medical and paramedical professionals (medicine, social work, occupational therapy, physiotherapy, clinical psychology, speech therapy, nutrition, pharmacology) participated.

Instrument: Data were collected by third year nursing students in face-to-face interviews using a structured questionnaire prepared by the researchers for this study. The questionnaire included 19 questions, with 8 dealing with demographics and exposure to medical treatment. One question asked whether the respondent considered nursing to be a profession where "profession" was defined as "involving advanced learning, specialized knowledge, expertise, independence, research and ethics". Three questions dealt with the level of contribution of the process of academization to the nursing profession; the degree of difficulty of the profession; and whether the nurse is seen as a source of information for other professionals and for patients. Each of these three areas was graded by the average score given by the respondents (the average ranged from 1 to 4 where 1=very little or not at all and 4=very much). Seven questions examined perceptions of the role of nursing practitioners' degree of involvement in various fields of work. Respondents were asked to indicate their answer on a Likert scale of 1-5 where 1=very little or no involvement and 5=very much involved). The standing of all areas of nursing practice as evaluated by health professionals was measured by calculating the average score given by all respondents for the degree of nurse involvement in that area. The average ranged from 1 (very little or no involvement) to 5 (very much involved). Data analysis Data were coded and entered for the purpose of statistical analysis and included a description of the study population (distribution by selected demographic characteristics and degree of exposure to treatment in the past); distribution analysis; and calculating the averages

(ranking) given by respondents to each of the questions. In addition, a comparison of selected average background data was made and data were further analyzed by appropriate statistical tests (correlation (x^2), t-test and ANOVA). Findings The participants The study population consisted of 234 health professionals, men and women, Jews and Arabs (Muslims, Christians and Druze). Their health professions were medicine, physiotherapy, occupational therapy, speech therapy, social work, nutrition, pharmacy and clinical psychology. The mean age of the participants was 37.1 years (SD=11.2). Mean number of working years was 10.0 (SD=9.4). Table 1 shows population distribution by demographic and background characteristics and exposure to medical treatment.

Table 1.Distribution of participants by background characteristics, delivery of medical care and place of work

		N(%)
Gender	Males	111(47.4)
	Females	123(52.6)
Ethnicity	Jews	82(35.0)
	Arabs	152(65.0)
Education	Diploma	5(2.1)
	B.A	111(47.4)
	M.A	51(21.8)
	Ph.D.	10(4.3)
	M.D.	57(24.4)
Profession	Physician(MD)	74 (31.6)
	Social worker	37 (15.8)
	Physiotherapist	31 (13.2)
	Nutritionist	26 (11.1)
	Pharmacist	20 (8.5)
	Occupational therapist	18 (7.7)
	Speech therapist	13 (5.6)
	Psychologist	4 (1.7)
	Other	11 (4.7)
Work place	Hospital	133 (56.8)
	Community clinic	70 (29.9)
	Other (private sector)	31 (13.2)

Khatib M
Ind. J. Holist. Nurs. 2023; 14(2)

18

Exposure to medical care	Yes	169 (72.2)
	No	65 (27.8)
Care setting	Hospital	85 (51.2)
	Community clinic	54 (32.5)
	Both	26 (15.7)

Perceptions of Nursing Among Health Professionals

Most health professionals (87.6%) see the nursing profession as a profession and 93.6% consider it to be a difficult or very difficult one. 91.9% of respondents believe that academic studies for nursing have strengthened the profession to a large or very large extent. No significant differences were found for the contribution of academization of nursing by gender, ethnicity, exposure to medical care or care setting. Significant differences were found for perceived difficulty of the profession, where women (M=3.72, SD=0.50) rate it as more difficult than do men (M=3.40, SD=0.70), (t=-3.90, df=196.2, p<.01).

Occupational spheres and responsibilities of nursing personnel The primary task of the nurse, with an 89.3% rating of high or very high, is considered to be fulfilling the physical needs of the patient, while caring for the emotional needs is only rated at 62.0%. About two thirds of respondents consider the nurse to be very much involved in medication management. Barely half the respondents see the nurse as a source of information for patients and their families and for health promotion (50.9% and 48.3% respectively). Only 18% rate the nurse as being involved in determining treatment and just 27.8% see the nurse as involved in determining organizational policymaking. The findings show that health care professionals consider fulfilling physical and emotional needs, providing information to the patient and family and managing patient medication as the nurse's major occupational spheres with means ranging between 3.51 to 4.46. In contrast, the other spheres of determining patient care, involvement in organizational policymaking and health promotion are not perceived as within the nursing purview, with means ranging from 2.5 to 3.4. As for the perception that fulfilling the physical needs of the patient is the primary nursing role, no significant differences by background characteristics of health professionals was found except for the difference between Jews (M=4.71, SD =0.50) and Arabs (M=4.32, SD=0.81), t(227.48)=4.50, p <0.001). Jewish health professionals (M=4.11, SD=0.86) and professionals who work within the hospital framework (M=4.02, SD=1.04) see pharmacological treatment management as part of the nurse's role more than do Arab health professionals (M=3.73, SD=1.01) and those who work in the community (M=3.54, SD=0.91) or in the private sector (M=3.90, SD=0.99), t(199)=2.88, p< 0.005) for ethnicity, (F(2,231)=5.33, p<0.005) for work place.

With regard to fulfilling the patient's emotional needs as part of the nurse's role, differences were noted in the perception of the nurse's role among doctors, psychologists and speech pathologists compared to other professions, but these differences were not significant. While health professionals did not consider nurses to be involved in determining patient care, significant differences on this measure were found among women and men, as women view the nurse to be significantly more involved in determining treatment (M=2.76, SD=1.02) than do men (M=2.40, SD=1.03) (t=-2.65, df=228.87, p< 0.01), as do hospital workers (M=2.69, SD=1.10) compared to community workers (M=2.60, SD=1.01) and others (M=2.19, SD=0.67) (F(2,231)=3.83, p< 0.01). For the nurse's involvement in workplace organizational policy-making, health professionals consider this involvement to be minor to moderate.

(means ranged from 2:00 to 3:08) and a significant difference was found only among professionals who work in hospitals (M=3.03, SD=1.07) compared to community workers (M=2.82, SD=1.15) and to others (M=2.49, SD=0.84) (F(2,2312)=4.24, p< 0.01).

The nurse's involvement in health promotion activities was perceived to be only moderate in the eyes of health professionals (means ranged between 2.4 and 3.69). No significant differenceswere found between the groups for background characteristics except for the differences between men (M=3.24, SD=1.08) and women (M=3.52, SD=0.97) (t=-2.04, df=222.25) and level of education, F(1,232)=4.20, p<0.05). Table 2 shows perceived occupational spheres and responsibilities of nursing by selected characteristics of health personnel.

19

et al.
Ind. J. Holist. Nurs. 2023; 14(2)

Table 2. Perceptions of occupational spheres and areas of responsibilit of the nurse by selected characteristics of health professionals

		Gender		Ethnicity		Work setting			Education				
		M	F	Jews	Arabs	Hospital	Community	Private Sector	Dip.	BA	MA	PhD	MD
Physical needs	mean	4.38	4.53	4.71	4.32	4.57	4.25	4.48	4.60	4.43	4.60	4.50	4.38
	sd	0.97	0.68	0.50	0.81	0.73	0.71	0.77	0.89	0.69	0.60	0.84	0.90
	t (df)	-1.52	(217.21)	4.53	(227.48)	$F_{(1,231)}=4.24$			$F_{(4,231)}=0.73$				
	Sig.	1.25		0.000		0.016			0.57				
Managing medication care	mean	3.74	3.97	4.10	3.73	4.02	3.54	3.93	4.40	3.88	4.05	3.20	3.73
	sd	1.10	0.92	0.86	1.07	1.04	0.90	0.998	0.89	1.01	0.80	1.23	114
	t (df)	-1.69	(215.46)	2.88	(199.46)	$F_{(2,231)}=5.33$			$F_{(4,231)}=2.14$				
	Sig.	0.09		0.007		0.005			0.07				
Psych. needs	mean	3.80	3.78	3.81	3.77	3.87	3.67	3.70	3.80	3.71	3.84	3.20	4.00
	sd	0.97	1.02	1.05	0.97	0.90	1.01	1.10	1.09	1.08	0.85	1.22	0.88
	t (df)	0.16	(231.30)	0.28	(155.48)	$F_{(2,231)}=1.03$			$F_{(4,231)}=1.71$				
	Sig.	0.87		0.768		0.357			0.15				
Providing information	mean	3.51	3.52	3.56	3.49	3.56	3.40	3.58	3.20	3.68	3.45	3.10	3.35
	sd	0.98	0.97	1.00	0.97	1.02	0.91	0.92	1.09	1.09	0.75	0.87	1.04
	t (df)	-0.50	(229.44)	0.50	(159.07)	$F_{(2,231)}=0.72$			$F_{(4,231)}=1.90$				
	Sig.	0.96		0.615		0.488			0.111				
Determining treatment	mean	2.40	2.76	2.67	2.55	2.69	2.6	2.12	2.80	2.54	2.82	1.9	2.57
	sd	1.03	1.02	1.01	1.10	1.10	1.01	0.67	1.30	1.08	0.88	0.87	1.06
	t (df)	-2.65	(228.87)	0.80	154.90))	$F_{(2,231)}=4.24$			$F_{(4,231)}=1.84$				
	Sig.	0.008		0.411		0.02			0.121				
Influencing policy	mean	2.80	2.96	3.07	3.78	3.03	2.82	2.41	3.40	2.79	2.82	2.90	3.08
	sd	1.15	1.01	1.09	1.07	1.07	1.15	0.84	0.89	1.03	1.01	1.49	1.18
	t (df)	-1.15	220.06	1.90	(162.60)	$F_{(2,231)}=4.24$			$F_{4,231)}=1.02$				
	Sig.	0.245				0.02			0.39				
Promoting health	mean	3.24	3.52	3.31	3.42	3.32	3.52	3.35	3.00	3.47	3.43	2.40	3.38
	sd	1.88	0.97	1.00	1.05	1.07	0.98	0.98	1	0.97	1.04	1.17	1.08
	t (df)	-2.04	(222.25)	-0.78	(173.66)	$F_{(2,231)}=0.91$			$F_{(4,231)}=2.74$				
	Sig.	0.041		0.439		0.40			0.029				

Khatib M
Ind. J. Holist. Nurs. 2023; 14(2)

20

Discussion

The purpose of this study was to examine the status and image of the nursing profession in the eyes of other health professionals through their perception of nursing as a profession and as an academic field. Also examined were perceptions of difficulty of practice, academic development, the status of nurses as sources of information and nurse involvement in different roles associated with delivery of health care. In general, health professionals view the nursing profession in a positive light. However there is still reluctance to acknowledge the contribution of academic studies to professional development, and negative attitudes persist to the involvement of nursing personnel in the various spheres that are part of modern nursing, such as health promotion, advocacy and policy change and participation in determining patient care [16]. The lack of consensus about the various roles of nursing reflects the broad definition of the profession, practitioners and current training levels globally in both developed and developing countries [17]. Currie and CarHill point out the need for standardization of the definitions of the profession and its areas of practice such as those presented by the ICN, OECD and WHO. This would help reduce variance in the provision of nursing care and promote the understanding of its impact on patient health and quality of care. Most health professionals consider nursing a profession when it combines higher education, its own body of knowledge, expertise, independence, research and professional ethics [18]. This view is consistent with the broad development of the profession in recent decades in Israel [19]. In contrast to the image of nursing in the eyes of the general public that is fed by prejudices, ignorance and stereotypes [2]. We can say that the perceptions of health professionals are based on close acquaintance, knowledge and cooperation with the nursing personnel. Hence, we can assume that these views are stable, based on knowledge and professional partnership. Although health professionals generally disagree that a nurse can serve as a source of information for them, the findings show that women hold more positive and complimentary views of nursing and its practitioners than men do. Moreover, women, more so than men, consider nursing a profession and a nurse a source of information for them. The findings also show that women working in the health professions believe, more than do men, that academization strengthens the nursing profession and raises it to the status of a profession and that the nurse can be a good source of information for them; and at the same they consider the nursing profession to be difficult. These findings are consistent with the findings of a preliminary study carried out among the general public where it was found that women value nursing more highly and view it as more difficult than do men in the health professions [11]. Although we expected that male health professionals would indicate more positive perceptions about nursing practitioners than men in the general public, professional socialization process still seems not to have affect these views, and it is possible that other cultural and gender factors trump knowledge and professional experience in the field. The findings show that the working framework in which health professionals meet with nurses affects their perception of the role of the nurse as a source of information. Thus professionals working in a hospital setting see the nurse as a source of information more than do professionals working in the community. The hospital provides a framework for more opportunities to meet with and be exposed to the full range of nursing roles and tasks that fall under the responsibility of nursing. On the other hand, the framework (hospital or community) does not affect the perception of the level of difficulty of nursing. A comparison between professionals from different origins shows that Arab professionals have less positive attitudes than their Jewish counterparts about the nurse as a source of information. This may be linked to a cultural perception that still gives special status to doctors and sees them as the sole authority and source of information. In conclusion, despite the general consensus about the importance of academic studies and professionalization of nursing, as well as its perceived level of difficulty, medical and para-medical professionals still see the task of the nurse as focused mainly on satisfying the physical needs of patients and less as involved in decision making for treatment, determining organizational policies and health promotion. These findings point to the need for diverse activities to improve the image of the profession among professional colleagues and to change prevailing attitudes and perceptions about it. It is also important to develop and promote clinical discussions and meetings between the various health profession students and nursing personnel regarding patient management and treatment, in order to expose students to the various facets of the nursing role. A limitation of this study is that it was based on convenience sampling of a variety of randomly selected health professions. This can limit the generalization of the findings, and hence it is important that further research be based on a wider sample which should include clear indices for taking into account the size of the professional groups in the health system, their deployment in the various treatment frameworks and the degree of their contact with nurses in the course of their work. It is important to continue to develop this research on a national scale including intervention studies in order to improve the image of the nursing profession within the health system and society in general.

References

1. Rezaei-Adaryani M, Salsali M, Mohammadi E. Nursing image: An evolutionary concept analysis. Contemporary Nurse. 2012; 43: 81-89.

21

Khatib M
Ind. J. Holist. Nurs. 2023; 14(2)

2. Morris-Thompson T, Shepherd J, Plata R, et al. Diversity, fulfilment and privilege: The image of nursing. Journal of Nursing Management. 2011; 19: 683-692.

3. Lesolang E. Help clean up the image of nursing. Nursing

4. Update. 2001; 40-41.

5. Seago JA, Spetz J, Alvarado A, et al. The nursing shortage: Is it really about image? Journal of Health Care Management. 2006; 51: 96-108.

6. Takase M, Maude P, Manias E. Impact of the perceived public image of nursing on nurses' work behaviour. Journal of Advanced Nursing. 2006; 53: 333-343.

7. Ben Natan M, Backer F. Israelis' perceived motivation for choosing a nursing career. Nurse Education Today. 2010; 30: 308-3013.

8. Emeghebo LE. Nurses perceptions of the image of the profession of nursing. Unpublished M.Ed. dissertation. Colombia University, New-York. 2006.

9. Zarea K, Negarandeh R, Dehghan-Nayeri N, et al. Nursing staff shortages and job satisfaction in Iran: Issues and challenges. Nursing & Health Sciences. 2009; 11: 326-331.

10. Rabia S. Transfer of activities from doctors to nurses: An imperative for regulating registration procedures among the health professions. Siud Vemishpat – sefer hayovel. 2001; 386-398.

11. Hoever Y, Jansen G, Roodbol P. The nursing profession: Public image, self-concept and professional identity. A discussion paper. Journal of Advanced Nursing. 2013.

12. Hadid S, Khatib M. The public's perception of the status and the image of the nursing profession. Siyud Vemishpat. 2015; 34: 69-90.

13. Baykal U, Altuntas S. Perceptions of nursing students' parents regarding the profession and their college. International Nursing Review. 2010; 58: 211-217.

14. Samaniego VC. Cárcamo S. The nursing image and professional identity. The future of a construction. Invest Educ Enferm. 2013; 31: 54-62.

15. Parker J, Coiera E. Improving clinical communication: A view from psychology. Journal of American Medical Information Association. 2000; 7: 453-461.

16. Tjia J, Mazor KM, Field T, et al. Nurse-physician communication in the long-term care setting: Perceived barriers and impact on patient safety. Journal of Patient Safety. 2009; 5: 145-152.

17. International Council of Nursing (ICN). Nursing care continuum framework and competencies, Geneva. 2008.

18. Currie EJ, Carr-Hill RA. What is a nurse? Is there an international consensus? International Nursing Review. 2012; 60: 67-74.

19. Hall RH. Professionalization and bureaucratization. American Sociological Review. 1968; 33: 92-104.

20. Goldman A, Tabak N. Nursing: Past, present and future: The nurse in Israel. Israeli Nurses Union Quarterly. 2009; 179: 47-50.