Nurses' perceptions about the nurse's social role in Greece

Dimitriadou-Panteka A,1 Lavdaniti M,1 Sapountzi-Krapia D,1 Psychogiou M,2 Konstadinidou-Stafkou A,1,3 Benos A4

1Department of Nursing, Alexander Technological Educational Institute of Thessaloniki, Thessaloniki, Greece
2Department of Nursing Science, Kuopio University, Finland
3“Bodosakio” Hospital of Ptolemais, Ptolemais Greece
4School of Medicine, Aristotle University of Thessaloniki, Thessaloniki, Greece

BACKGROUND: There is great evidence in nursing literature about the nurses' perceptions on their role. Most studies are focused on nursing practice and the actual role in hospitals, and other skills on basic-, intermediate- and advanced-level patient care. In Greece, there are no studies examining the social role of nurses and nurses' perceptions about it.

AIM: To assess how nurses in Greece perceive their social role and investigate the factors influencing their social role.

MATERIAL-METHOD: 342 nurses working in hospitals in the wider area of Thessaloniki were recruited in this study. Data collection was carried out through one self-completed questionnaire developed by the researchers.

RESULTS: 47.5% (n=162) agreed that society expects from nurses a particular behaviour, and almost half of the participants [51.8% (n=176)] totally agreed that nurses are practicing a ‘litourgima’. 49.1% (n=165) agreed that nurses are health educators in society and another 46.3% (n=157) totally agreed that nurses undertake actions in order to eliminate patient discrimination. 47.6% (n=160) of the participants totally agreed that nurses should be dedicated to quality improvement and 40.9% of the sample (n=138) agreed that nurses should provide care during an epidemic while 41.3% totally agreed that nurses execute duties of other professionals. 45.7% (n=155) totally agreed that nurses shouldn't deny care for patients with infectious diseases. A high percentage of nurses (60.1%, n=197) agreed that a part of the nursing role is patient advocacy.

CONCLUSIONS: The findings of the present study indicate the importance of nurses’ social role, which may allow them to empower patients to further recognize the role of nursing during hospitalization.

KEY-WORDS: Nursing, social role, perceptions, Greece

BACKGROUND

Nurses are responsible for the well-being and the quality of life of many people in hospitals and in their homes. Therefore they must meet high standards of technical and communication techniques competence. The World Health Organization (1997) stated that “there are many roles in nursing. The nurse cares for the patient, collaborates with the members of the health care team, protects and teaches the patient and speaks for him if it is necessary”. In Greece, according to the “Code of Nursing Deontology” nurses care for the patient as a biopsychosocial and spiritual entity (FEK 216/25-7-2001). There is a priority in sectors such as prevention, patient education, patient participation in decisions, as well as the need for holistic care, which strengthen the foundation and growth of a new role for nurses (Deltisidou et al 2000).

The issue of nurses’ perception about the nursing profession and the nursing professionals’ self-assessment has been extensively studied (Clancy 2007, Takase et al 2005,
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Tzeng 2006, Buerhaus et al 2005, Sousa & Hortense 2006). Studies investigating the nurses’ perceptions about their role are primarily focused on nursing practice and their actual role in hospitals (Lu et al 2007, Nikbaht et al 2006, Siebens et al 2006, Tzeng 2004). Nurses reported different role perceptions across educational groups and these roles are in the domain of the patient’s physical care, psychosocial care, and communication (Lu et al 2007). Other nurses stated that their role focused on their skills on basic-, intermediate- and advanced-level patient care (Tzeng 2004). Nursing students and other health professionals attribute to nurses the characteristics of neat, responsible, clean, careful and efficacious (Sousa & Hortense 2006). Also, it is reported that nursing is perceived by an institutional and socio-cultural perspective, and alternates between a routine medical-technical approach and a caring approach (Nikbaht et al 2006).

In some studies, nurses were proud about their job, considered that they are competent health professionals having great responsibility (Siebens et al 2006), and felt that they are respected and trusted professionals (Clancy 2007).

In one qualitative study, nurses described their daily work situation as highly stressful and as a scale of balance that oscillated between strain and stimulation (Hallin & Danielson 2007). Also, they suggested that there is a mismatch between the desired nursing role and the actual role in practice. This mismatch is about participation in decision making, professional recognition, and opportunity to earn a higher income (Takasse et al 2005).

There are studies on the perceptions of nursing students (Sousa 2000, Sousa & Hortense 2006, Peary & Draper 2008), on perceptions that the role of community psychiatric nurses involves taking a relationship-based, person-centred approach (Barlow 2006), and on the role of support staff in a paediatric palliative care clinic (Swinney et al 2007). Moreover, some studies address the fact that the nurses’ professional role in the spiritual care of patients is essential (Balacchino DR 2006, Lundmark M. 2006, van Leeuven R et al 2006) and different factors (such as personal, cultural, and educational factors) play a role in providing this care (van Leeuven et al 2006).


In Greece, nursing is rooted in the past (Sapountzi-Kreopia 2004, Sapountzi-Kreopia 2002). Sapountzi-Kreopia et al (2007) stated that “the adoption of an international definition of nursing from the Hellenic Nurses Association combined with the nursing shortage and the lack of a systemic informing of citizens about nursing and nursing’s contribution does not help the Greek society to comprehend the nurses’ exact professional and social role”. In the same qualitative study, nurses and nursing students define nursing as: an occupation or service, a science or art, an offering of care, a physical or psychological support, in relation to the recipients of nursing care and in relation to prevention and health promotion (Sapountzi-Kreopia et al 2007). Lanara’s statement in 1989 that “in Greek hospitals, shortage of graduate nurses, inadequate organization of nursing service, and lack of nurses participation in decision making, lead to nursing problem and to the under-recognition of the nursing professional” is still in effect.

Although the body of evidence regarding perceptions about the nursing role is growing, the existing literature in Greece is mainly focused on the definition of nursing, the nursing shortage and satisfaction from hospital care (Sapounzizi-Kreopia et al 2006, 2007). To our knowledge there is no prior study in Greece in relation to perceptions about the nurses’ social role, so we decided to investigate the nurses’ perceptions about their social role.

AIM

The aims of the study were to assess: (a) how nurses in Greece perceive their social role and (b) the factors that influence their social role.

MATERIAL-METHOD

Sample and setting

The study was non-experimental and descriptive in design. The convenience sample consisted of 336 nurses working in hospitals in the wider area of Thessaloniki, Greece. The sample included registered bachelor’s and associate degree nurses, as well as assistant nurses serving as registered nurses due to the nursing staff shortage. Inclusion criteria for participation in a study were: (1) willingness to participate, (2) minimum of 6 months experience, (3) having the ability to speak and read Greek and (4) employment in clinical area.

All potential participants were approached by a member of the research team and were given written information
about the purpose of the study, including confidentiality issues. They were asked to give their informed consent in order to take part in the study. Then, 600 questionnaires were distributed to the nurses who agreed to participate in the study. Finally, a total of 342 nurses returned completed questionnaires (response rate of 57%).

**Ethical approval of the study**

The study was approved by the Nursing Specialties Sector of the Alexander Technical Education Institute of Thessaloniki, which acted as an ethics committee.

**Instrument**

Data collection was carried out through a self-completed questionnaire. This questionnaire was developed by the researchers and was divided into two parts: (1) the first part included questions for eliciting information about demographic characteristics and (2) the second part included items about the participants’ understanding of the perceived social status of nursing in the Greek society.

The internal consistency of this questionnaire was checked by Cronbach’s alpha and proved to be good (Cronbach’s alpha=0.75).

**Data analysis**

Data were analyzed using the Statistical Package for Social Scientists (SPSS 11.0) for Windows. Descriptive statistics were used for the analysis and presentation of demographic data. For data not normally distributed, non-parametric tests (Spearman correlation-Coefficient) were used. Correlations were calculated using the Spearman correlation-Coefficient.

**RESULTS**

The sample consisted of 342 members of nursing staff working in hospitals. The participants were predominately female (n=295, 86.3%), with a mean age of 41.2 years. The vast majority of participants were married (n=239, 72.2%), most were graduates of a Technological Educational Institute (n=239, 69.9%), and head-nurses (n=204, 61.8%). Table 1 presents the demographic and educational characteristics of the sample.

Table 2 shows the nursing staff’s opinions about the nurses’ social role. Many participants 47.5% (n=162) agree that society is expecting a particular behaviour from nurses, and about half of the participants (51.8%, n=176) totally agreed that nurses are practicing a ‘lito-urgima’ (service). Almost half of the respondents (49.1%, n=165) agreed that nurses are health educators in society, and 46.3% (n=157) totally agreed with the statement that nurses undertake actions in order to eliminate patient discrimination. 47.6% (n=160) totally agreed that nurses should be dedicated to quality improvement. Moreover 40.9% of the sample (n=138) agreed that nurses should provide care during epidemics, while 41.3% totally agreed that nurses execute duties of other professionals. 45.7% (n=155) totally agreed that nurses shouldn’t deny care to patients with infectious disease. Furthermore a high percentage of nurses (60.1%, n=197) agreed that part of the nursing role is patient advocacy.

The first five variables that investigate perceptions for the social role have significant cross-correlation (P<0.001). Their sum created a new variable that constitutes the indicator of the sample’s perceptions about the nurses’ social role. Table 3 presents the correlations between variables.

Table 4 presents factors that influenced the nurses’ perceptions. Statistically significantly factors are: postgraduate education (P=0.015), sufficient material resources (P=0.007), and number of night shifts (P=0.043).
DISCUSSION

The results show that the vast majority of participants were graduates of Technological Educational Institutes. This was expected because nursing tertiary education in Greece is based primarily on Technological Educational Institutes, with only 1 university (Nursing Department of the University of Athens) offering nursing degrees, and only since the late 1980's (Sapountzi-Krepi 2004).

An interesting result is the fact that 47.5% of nurses believe that society expects of them a particular behaviour. This means that nurses recognize that they have a role with ethical codes which determine their behaviour as professionals. It is stated that ethical codes have been developed to guide nursing practice and improve their professional status (Verpeet et al 2005).

Interestingly, a considerable percentage of the sample (51.8%) totally agreed that nurses perform a ‘litourgima’ (service). In Greece, the term ‘litourgima’ means “the total duties of the ‘litourgos’ who is the person engaged in a service beneficial for society” (Tegopoulos & Fytrakis 1997). This finding is explained by the fact that until recently nursing was connected with religion and was presented as an offer towards fellow human beings, so this influenced the nurses’ perceptions. In addition, Sapountzi-Krepi et al (2007) stated that “in social speeches many government officers and professors use the term ‘litourgima’ when referring to nursing as an honour for the nursing profession, while the term is also used sometimes by lay-people, even though the nursing profession has not yet achieved a high social status in Greece”.

Almost half of the participants (49.1%) stated that society expects nurses to consider themselves educators for health topics. In Greece, according to the law, registered nurses have the duty to educate and help the patient to provide self-care, and to educate family caregivers about how to care for their patients at home (Law 351/89). It has been reported that health education by nurses is important to patients (Oerman et al 2001) and a nurse teaching about an illness is one of the most important indicators of high quality nursing care for patients (Oerman & Templin 2000).

A quite significant percentage states that nurses should care for patients during epidemics and execute other professionals’ duties for the patient’s better health. This finding means that nurses have a role characterized as offering care. This can be attributed to the roots of Greek nursing through its historical development (Sapountzi-Krepi 2002, 2004, Sapountzi-Krepi et al 2007) and to the influence of Christian virtue in the content of nursing practice (Sapountzi-Krepi et al 2007, Lanara 1976).
A high percentage of subjects (47.6%) reported that nurses should be dedicated to quality improvement of care. This was an expected outcome because patients have connected nurses with quality of care in hospitals, since they were with them and cared for them continuously 24 hours a day. The World Health Organization (WHO) stated that the nurse has the final responsibility for the quality of care that patients receive during their hospital stay (WHO, 1997). Moreover, the literature provides evidence that the quality of nursing-care processes affects health-related patient outcomes during and after hospitalization (Lee et al, 1999).

A high percentage of the sample (60.1%) agreed that nurses are advocates for patients in health care settings. Advocacy is universally considered a moral obligation in nursing practice (McDonald 2007) and gives nursing a very special place in health care (WHO 1997). Moreover, the literature provides evidence that the quality of nursing-care processes affects health-related patient outcomes during and after hospitalization (Lee et al 1999).

Perceptions of the nursing role were related to postgraduate education, to the sufficiency of material resources, and the number of night shifts (P<0.005). The relation of postgraduate education is consistent with another study (Lu et al 2005) in which different role perceptions were reported across educational groups. Also, the results are explained by the fact that the educational level influences and changes perceptions about the nursing role. Moreover, shift work influences perceptions about nursing role, especially in Greece, since the nurses’ life is related to it and changes all their social and family activities.

CONCLUSIONS

The present study is the first one in Greece investigating the issue of perceptions about the nurses’ social roles. The findings of this study will enable nurses to consider the importance of their social role, which may allow them to empower patients to further recognize the role of nursing during hospitalization. In the light of the present study findings, nurses should find ways to extend their social role in the Greek society.

Furthermore, we believe that our findings may be of interest to nursing educators and authorities, who could introduce specific policies to nursing education in order for nurses to conceive their social role during their basic nursing education.

REFERENCES


Table 3. Correlations between the 5 questions of the scale

<table>
<thead>
<tr>
<th>Question</th>
<th>Behaviour</th>
<th>&quot;Litourgima&quot; (service)</th>
<th>Social teachers</th>
<th>Personal actions</th>
<th>Quality improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not only practice but behaviour</td>
<td>1</td>
<td>0.310*</td>
<td>0.279*</td>
<td>0.254*</td>
<td>0.249*</td>
</tr>
<tr>
<td>&quot;Litourgima&quot; (service)</td>
<td>0.310*</td>
<td>1</td>
<td>0.379*</td>
<td>0.377*</td>
<td>0.414*</td>
</tr>
<tr>
<td>Social teachers</td>
<td>0.279*</td>
<td>0.379*</td>
<td>1</td>
<td>0.533*</td>
<td>0.453*</td>
</tr>
<tr>
<td>Personal actions</td>
<td>0.254*</td>
<td>0.377*</td>
<td>0.533*</td>
<td>1</td>
<td>0.717*</td>
</tr>
<tr>
<td>Quality improvement</td>
<td>0.249*</td>
<td>0.414*</td>
<td>0.453*</td>
<td>0.717*</td>
<td>1</td>
</tr>
</tbody>
</table>

*Correlation is significant at the 0.01 level (2-tailed).

Table 4. Factors that influenced perceptions of nursing staff

<table>
<thead>
<tr>
<th>Factors</th>
<th>Spearman rho</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>-0.100</td>
<td>0.072</td>
</tr>
<tr>
<td>Post graduate education</td>
<td>-0.226</td>
<td>0.015</td>
</tr>
<tr>
<td>Perceptions about sufficient material resources</td>
<td>-0.149</td>
<td>0.007</td>
</tr>
<tr>
<td>Number of night shifts</td>
<td>-0.143</td>
<td>0.043</td>
</tr>
<tr>
<td>Work experience</td>
<td>-0.100</td>
<td>0.077</td>
</tr>
<tr>
<td>Place of work</td>
<td>-0.100</td>
<td>0.097</td>
</tr>
</tbody>
</table>
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