



EVALUATION OF NURSES' ATTITUDE AND THEIR QUALITY OF NURSING CARE FOR PATIENTS ATTEMPTED SUICIDE

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ABSTRACT

Background: Desire to suicide attempt and its increasing growth due to various social, cultural and economic consequences is one of the important problems of today's societies that impose a lot financial burden to health and psychiatric systems. The current research was performed to determine relation of nurses' attitude and their quality of nursing care for patients attempted suicide in selected hospitals of medical university in Tehran, Iran.

Methods and materials: This descriptive-analytical study was conducted on 182 nurses working in emergency, ICU, surgery, burning and poisoning wards from selected hospitals of medical university in Tehran city using convenience sampling method. The data were collected using questionnaires of demographic information, attitude towards suicide commitment and quality of nursing care in psychological-social. Data were analyzed using SPSS software v.20, descriptive statistics, independent T-test, ANOVA and Pearson correlation test.

Results: In this study, 72% of nurses had positive attitude towards patients attempted suicide and 28% had negative attitude. Also, 41.8% of nurses had reported that nursing care is favorable in psychological aspects and 57.1% had reported it approximately favorable and 1.1% had reported it unfavorable. There was no statistically significant relationship among nurses' attitude toward patients attempted suicide and quality of nursing in psychological-social aspects ($P= 0/39$, $r= -0/06$) and quality in communicational aspect ($P= 0/08$, $r= -0/12$).

Conclusion: According to results, there was no relationship between nurses' attitude toward patients attempted suicide and quality of nursing care in psychological-social and communicational aspects.

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Introduction

Suicide is defined as an intentional act that leads to death. Suicide mainly occurs among young people due to social failures, physical changes at puberty, feeling of loneliness and issues related to identity and personality crisis (1). Approximately, 90% of suicides are attributed to a psychological disorders such as depression (2, 3). Suicide is one of the important problems of societies due to the creation of various social, cultural and economic consequences that annually impose a lot financial burden to health and psychiatric systems (1).

Statistics related to suicide in Iran has indicated that Iran had 91 rank in the world in 1991, this rank became 58 in 2003 (4). Suicide is one of the causes of referring and hospitalizing patients in emergency wards of hospitals (1). Physicians and nurses are the first people in the society who communicate with patients after suicide and therefore have important role in creating different reactions with these patient (5). In fact, nurse is responsible for creating a positive attitude with health-therapeutic

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services (6). Nowadays, suicide is increasing globally and there are some evidences regarding failure of healthcare professionals to meet the needs of a person who has attempted suicide which may be effective in repeating suicide attempt (7). In some cases, there is unfavorable attitude among physicians and nurses towards patients who have attempted suicide and these attitude have negative effect on the quality of general cares (7) so that such that led to early discharge by physician (8). One of the reasons for these attitude is pressure caused by primary cares which are imposed on physicians and nurses (8), especially among personnel of emergency wards who have initial contact with patient and leads to intensification of this attitude (9). Some researchers have expressed this attitude as the result of unawareness and uncertainty to hostile attitude (6). Solutions provided to reduce negative attitudes of nurses towards patients attempted suicide have been different but most researches have suggested training and increase of knowledge to communicate with patients attempted suicide (2, 3, 6). In another research, psychiatric counseling services are other known solution (9). Due to increase in suicide rate in Iran, it is necessary to evaluate nurses' attitude as first people who contact with these patient, manner of providing nursing care and the relationship between their attitude and quality of nursing care.

Method and materials

This study was descriptive-analytical conducted in 2016 on 182 nurses working in surgery, poisoning, ICU, burning and emergency wards of Loghman Hakim, Baharloo and Motahhari hospitals in Tehran city of Iran. Inclusion criteria for nurses were desire to participate in the research, having at least a bachelor's degree in nursing and having experience of caring for patients attempted suicide. Exclusion criteria included unwillingness to participate in the research, having no experience of caring for patients attempted suicide. Sample size was determined as 200 people using the formula for determining the volume of sample size; eventually it was reduced to 182 people. Sampling was done through convenience sampling method. Questionnaires were distributed to nurses related to each ward and each hospital which was consistent with inclusion criteria in several working shifts (morning, afternoon and evening), emergency, surgery, poisoning, burning and ICU wards.

The data were collected using nurses' demographic information, questionnaire of attitude towards patients attempted suicide and QUALPAC questionnaire of quality of nursing care. Questionnaire of demographic information contained 11 questions regarding nurse's individual and job details which were prepared considering goals of the research and studying related articles. Questionnaire of attitude towards patients attempted suicide was designed by McLaughlin (1994). This questionnaire includes 15 questions regarding person's attitude towards suicide and patients attempted suicide; this part of the questionnaire has been adjusted based on Likert's five- parts spectrum (from one: strongly disagree to five: strongly agree). After validating the questionnaire, question 15 was removed due to lack of consistency with Iranian culture. The lowest score of this questionnaire was 14 and the highest score was 70. The score higher than 42 indicated favorable attitude (positive) and the score lower than 42 indicated unfavorable attitude (negative). The QUALPAC questionnaire of quality of nursing care is one of the most valid tools of measuring quality of nursing cares and was provided in 1972 by Vandilt and Auger from Faculty of Nursing in Michigan State. It has been reviewed several times and is in psychological, social and communicational aspects and has been used in the research of Neishaboori et al. (10).

This tool has been used since 1975 in the United States of America, the United of Kingdom and Nigeria in order to evaluate process of care and quality of nursing care and it has been used in Tabriz in 2003 and has been adjusted with Iranian culture. This questionnaire includes 41 items that evaluates quality of nursing care in two psychological- social aspects (28 questions) and communicational aspect (13 questions) and has been scored based on three places Likert scale (rarely, sometimes, and often). The lowest score of this questionnaire was 41 and the highest score was 123. Whenever the obtained score is higher, it indicates better quality of care. Both questionnaires were evaluated through validity and reliability. The content validity method was used in order to determine validity which was confirmed by 15 Faculty members of Nursing and Midwifery Department in Shahid Beheshti University of Medical Sciences. Cronbach's alpha coefficient and test-retest were used to determine stability of tools. Results of the test conducted twice through Pearson correlation coefficient were calculated in this manner: 0.72 for all three questionnaires' demographic information, 0.91 for attitude towards patients attempted suicide and 0.81 for quality of nursing care in psychological, social and communicational aspects. Also, Cronbach's alpha coefficients of all three questionnaires were calculated as 0.67, 0.89 and 0.87, respectively.

The collected data were analyzed using SPSS software version 20, Pearson, independent T-test and ANOVA tests were used in order to analyze descriptive and inferential statistics. Also, statistical indexes were used to summarize and describe data, mean and standard deviation were used for quantitative data, and frequency and percentage were used for qualitative data. The results were interpreted at significance level $p < 0.05$.

Ethical Considerations

This study was approved by the Ethics Committee of Shahid Beheshti University of Medical Science (ID code: IR.SBMU.RAM.REC.1395.105), and the objectives of the study were explained to all participants and all of them accepted to participate and were assured of the confidentiality of their individual information as well as the voluntary nature of participating in the study.

Results

This study was conducted on 182 nurses in three Loghman Hakim, Motahhari and Baharloo hospitals in Tehran, Iran. In these three hospitals, 80, 70 and 32 nurses were selected, respectively. Based on collected data, 76.4% of participants were female and 23.6% were male. The mean age of participants was 32 years old; the minimum age was 22 years old and the maximum age was 52 years old. Among participants in this research, 39.6% had work experience lower than five years and 32% had work experience between five and ten years and the rest had work experience higher than 10 years. The minimum work experience was 6 months and the maximum experience was 28.5 years. Among nurses participating in the research; 31.3% mentioned experience of having patients attempted suicide in their relatives, friends and acquaintances. Other demographic information are mentioned in Table 1.

Table 1. Nurses' demographic information in selected hospitals of medical universities in Tehran 2016

Variable		Nurses	
		Frequency	Per-cent
Gender	Female	139	76.4
	Male	43	23.6
Work region	Surgery	15	8.2
	Poisoning	20	11
	ICU	79	43.4
	Emergency	33	18.1
	Burning	35	19.2
Education	Bachelor	167	91.8
	Master	14	7.7
	PhD	1	0.5
Employment Status	Official	78	42.9
	Contractual	25	13.7
	Contractual	37	20.3
	Project	42	23.1
marital status	Single	61	33.5
	Married	119	65.4
	Widow/ divorced	2	1.1
Shift	Morning	32	17.6
	Afternoon	1	0.5
	Night	14	7.7
	Circulate	135	74.2

Findings about nurses' attitude towards patients attempted suicide indicated that 72% of participants had favorable attitude (positive) and 28% had unfavorable attitude (negative). Mean score of the attitude was 46.11 with standard deviation of 5.7. In conducted evaluations, nurses have acknowledged that most people who attempt suicide do not want to die especially in the first action and believe that life is not valuable to live anymore but they try to gain sympathy from others. Also, they believed that people who failed in suicide should be obligated for treatment to specify their motivations for suicide. Nurses believe that people who attempt suicide in public places are trying to attract attention of others and when these people threaten to attempt suicide, they conduct this action slowly. They also stated that most people who attempt suicide don't have family or family relationships.

The obtained results indicated that personnel of emergency ward had lower attitude towards patients who attempted to commit suicide but compared with various wards; there was no statistically significant difference among nurses' attitude towards patients attempted suicide in surgery, poisoning, ICU, emergency and burning wards, as mentioned in Table 2.

Table2. The comparison of nurses' attitudes with respect to suicide patients in Hospitalization region.

Ward	Desirable	Undesirable	Total	Mean	Standard Deviation	P- Value
Surgery	12(80%)	3(20%)	15(100%)	45	5.9	0.75
Poisoning	13(65%)	7(35%)	20(100%)	46.1	5.8	
ICU	61(77.21%)	18(22.78%)	79(100%)	46.2	4.4	
Emer-gency	19(57.57%)	14(42.42%)	33(100%)	45.3	5.9	
Burning	26(74.28%)	9(25.71%)	35 (100%)	46.9	7.6	

Also in conducted evaluations (according to Table 3), 57.1% of nurses have reported the quality of nursing care approximately favorable in social-psychological aspects, 41.8% have reported it favorable while 1.1% of them have reported it unfavorable. These values in evaluating quality of nursing care in communicational aspect are presented in this manner: 54.4% favorable, 44% approximately favorable and 1.6% unfavorable. In total, evaluation of quality of nursing care in psychological-social and communicational aspects of nurses are presented as follows: 62.1% favorable, 35.2% approximately favorable and 2.7% unfavorable.

In terms of psychological- social aspect, nurses acknowledged interventions such as "introducing patient to other patients" and "familiarizing patient with patients who have similar problems" as examples of actions given less consideration. While actions such as "calling patient with name and family name, not with number of bed", "avoiding to become angry and using rude words in contact with the patients" and "paying attention to patient's speeches" are given more consideration by nurses.

Also, about quality of nursing care in communicational aspect, nurses paid more attention to cases such as "suitable communication with other therapeutic personnel" and "insuring patient to keep their information secret" and they paid less attention to cases such as "sharing patient's emotions easily with nurse", "finding enough time for patient's family to ask their questions" and "introducing referrals resources and organizations to patient". Compared with various wards; there was no statistically significant difference among nurses' attitude towards patients attempted suicide in surgery, poisoning, ICU, emergency and burning wards, as presented in Table 4.

Table3. Distribution of quality nursing care in psychological-social and communication aspect in attempted suicide patients .

Aspect		Frequency	Percent
psychological-social	Undesirable	2.2	1.1
	Relatively desirable	104	57.1
	Desirable	76	41.8
Communication	Undesirable	3	1.6
	Relatively desirable	80	44
	Desirable	99	54.4

Table4. The comparison of quality of nursing care towards patients attempted suicide in hospitalized ward.

Quality of nursing care	Ward									
	Surgery		Poisoning		ICU		Emergency		Burning	
	No.	%	No.	%	No.	%	No.	%	No.	%
Desirable	0	0	2	10	2	2.5	1	3	0	0
Relatively desirable	5	33.3	8	40	26	32.9	11	33.3	14	40
Undesirable	10	66.7	10	50	51	64.6	21	63.6	21	60
total	15	100	20	100	79	100	33	100	35	100
mean	2.66		2.4		2.62		2.6		2.6	
Standard deviation	0.48		0.68		0.53		0.55		0.49	
P-value	0.75									

The obtained results indicated that there was no statistically significant relationship between nurses' attitude towards patients attempted suicide and quality of nursing care in psychological-social ($p=0.39$) and communicational ($p=0.08$) aspects.

Table 5. The comparison of nurses' attitudes with respect to patients attempted suicide with quality of nursing

Quality of nursing care	Attitude	
	correlation coefficients	P-value
The quality of nursing care in psychological-social aspect	-0.06	0.39
The quality of nursing care in communication aspect	-0.12	0.08

Discussion

Results of this research indicated that nurses had positive attitude towards patients attempted suicide.

In a research, Schmidt et al., (11) evaluated nurses' attitude towards care of patients attempted suicide. In his research, nurses' attitude were positive towards care of these patients. Also in prioritizing patients, nurses did not differentiate between patients attempted suicide and other nurses; this issue indicate positive attitude of nurses towards these patients which is consistent with the results of the present study. Patel et al., (8) reported attitude towards self-poisoning patients unfavorable and indicated pressure caused by working burden as a main reason for physicians and nurses' unfavorable attitude and expressed that they agree to refer these patients to psychiatrist and hospitalize them in the psych ward.

Results of Samuelson et al., (6) showed that nurses working in psychiatric wards had higher understanding of attitude towards patients attempted suicide and more than other nurses, they were willing to care for these patients. He also stated that high-experienced personnel are those who have more contact with these patients and they had more positive attitude towards these patients. The research showed that unawareness is the cause of the negative attitude of nursing personnel towards these patients and the need assessment of understanding suicide should be conducted among nurses in public hospitals to motivate nurses to provide professional cares of these patients. Regarding this issue, researches of McLaughlin et al., (12), Patel et al., (8), Ramon et al., (5), Samuelson et al., (6), Kawanishi et al., (13) and Suokas et al., (9) had indicated negative attitude of nurses towards patients attempted suicide and Schmidt et al., (11) had indicated positive attitude and understanding towards these patients. Difference between various researches may be caused by difference in culture, geographical location, time, religion or beliefs that has led to difference in attitude.

Most of the nurses had reported the quality of nursing care favorable in psychological-social and communicational aspects. Thus, most of the nurses had reported the quality of nursing care approximately favorable in psychological-social aspect and favorable in communicational aspect. In Neishaboori et al., (10) about evaluating the quality of nursing care from nurses' perspective in general wards, the results showed that quality of nursing care was favorable in psychological-social and communicational aspects. In the study of Haghighi Khoshkhou et al., (14) the quality of nursing care had reported favorable in psychological-social and communicational aspects. Shannon et al., (15) had also indicated favorability of quality of nursing care among nurses. In analysis of results related to our research, it can be concluded that cares provided to patients that attempted suicide had lower quality than patients with other physical problems. This result can be related to reduction of nurses' sympathy towards these patients which have effect on quality of their care.

In evaluating the relationship between attitudes and nursing care of patients attempted suicide, findings indicated that there was no statistically significant relationship between attitude towards these patients and quality of nursing care. Regarding this issue, it can be concluded that due to positive and negative attitude in the obtained results, nurses' attitudes in Iran will not affect the quality of their nursing care of patients attempted suicide and despite the fact that 28% of nurses did not have favorable attitude towards these patients, they still perform their nursing care. Also results of this research indicated that nurses' positive attitude towards patients attempted suicide can be attributed to various reasons, thus nurses do not involve their attitude in performing their duties. It was not possible to compare the mentioned finding with results of other researches due the absence of other researches in the field of evaluating the relationship between attitude and quality of nursing care in these patients.

Limitation of study

The small sample size of include studies are potential limitation of this study. There is still need to further studies to access additional information about the mentioned issue. Another limitations of the current study, were low of the same study in this field.

Conclusion

According to the results obtained; nurses' attitude have no effect on quality of nursing care of patients attempted suicide. It is recommended to conclude a qualitative research to evaluate the effect of attitude on nursing care by interviewing and observing their manner with patients. Also, final decision can be attained by asking the patients about the quality of nursing care.

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