

**EFFECTIVENESS OF CARING EDUCATION IN IMPROVING  
THE CARING BEHAVIORS OF NURSING STUDENTS**

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**ABSTRACT**

*This study aimed to determine the effectiveness of caring education to the caring behavior of nursing students in providing nursing care. The research design was pretest-posttest nonequivalent control group design with simple random sampling technique. Caring Behavior Inventory measured the caring behaviors of the student nurses. Nonparametric analyses were performed using the Wilcoxon test and the Mann-Whitney test. Results showed that in the intervention group before the treatment, all participants showed good caring behavior on the component of respect and positive relationship; 85% showed good in the attendance component; 90% showed good in the knowledge and skills component, and 10% showed good in the attention component. The caring behavior of the intervention group after being given the treatment showed very good on the component of respect (75%), attendance (85%), positive relationship (95%), knowledge and skill (90%), and attention (80%). Wilcoxon test showed that there are significant differences in caring behavior before and after being given caring education. Mann-Whitney test also indicated that there is significant difference in caring behavior between intervention and control group after the treatment. Thus, the caring education was effective in improving the caring behavior of the students.*

**Keywords:** *caring, education, caring behavior*

## INTRODUCTION

Nurses are among the vital elements in the hospital or health service. Because nurses are health workers who foster the first and longest relationship with the patient, nursing service being given lasts continuously for 24 hours a day. Nurses provide professional, quality and empathetic care for patients. Caring is a phenomenon that affects the way humans think, feel, and have relationships with others (Potter & Perry, 2005). Watson (2013) views caring as the essence of nursing practice based on human values, attention, and compassion for oneself and others.

Caring behavior on the nurse is given through caring education during the learning process of the nursing practice students in the lecture and applied, that is, while giving nursing care to the patient. Nursing education has been known to produce graduates who are disciplined among students compared to other programs. Caring is part of the student performance that becomes the focus of nursing education. Caring education is the basis of the character formation of nursing student behavior which is a reflection when becoming a nurse in providing professional nursing services.

### **Purpose and Statement of the Problem**

This study aimed to determine the effect of the caring education to the caring behavior of second-grade students of Nursing Academy Dirgahayu Samarinda in providing nursing care. Specifically, the study sought to answer the following questions:

1. What is the caring behavior of the intervention and control groups before and after the intervention in terms of respect, presence, positive relationship, knowledge and skill, and attention?
2. Is there a significant difference in the caring behaviors of the nursing students in the intervention and control groups before the intervention?
3. Is there a significant difference in the caring behaviors of the nursing students in the intervention and control groups after the intervention?

## METHODOLOGY

### Research Design

This study utilized a quasi-experiment that aimed to reveal the influence of caring education on the caring behavior of second-grade students of Nursing Academy Dirgahayu Samarinda. The study design was pretest-posttest nonequivalent control group. The intervention group was given an education on caring before the practice of nursing clinics. Measurement of student behavior is done before and after student practice in a nursing clinic. Independent variable is the caring education, and dependent variable is student behavior.

The research was conducted at Nursing Academy of Dirgahayu Samarinda and Dirgahayu Hospital of Samarinda as the student clinic field to practice, where the Caring Behavior Inventory (CBI) questionnaire was filled before and after the students conducted the nursing exposure in a clinic. The study was conducted from February to August 2017.

### Participants of the Study

The research population consists of all students in the second year of Nursing Academy Dirgahayu Samarinda who are doing nursing clinic practice totaling to 142 students. For sampling population, the selection was performed based on the following inclusion criteria: a). Second-grader of the Nursing Academy of Dirgahayu Samarinda; b). Following the practice of nursing clinics; c). Willing to be the participant. While the exclusion criterion is a). Students did not attend the caring education, and b). Students who did not finish following the practice of nursing clinics. The number of samples used in this study was 40 students consisting of 20 people in the intervention group and 20 controls. Sampling in this research used probability sampling technique with simple randomized sampling approach. In the implementation of the study, all participants followed all the research procedures, so that no one is declared void.

## Instrumentation

The data gathering tool was adapted and modified from the Caring Behavior Inventory (CBI) (Wolf, 1994) using the Likert scale with four distributions of descriptive interpretation, i.e., never, sometimes, often, and always. The instrument measures the five dimensions of caring identified to include respectful deference to others, assurance of human presence, positive connectedness, professional knowledge and skill, and attentiveness to the experiences of others. The instrument has an internal consistency ( $\alpha = 0.96$ ) and convergent validity ( $r = 0.62$ ), good test-retest reliability ( $r = 0.88$  for patients and  $r = 0.82$  for nurses) and has a high internal consistency ( $\alpha > 0.95$ ) as a stand-alone instrument (Wu et al., 2006).

## Data Analysis

Data analysis was performed using statistical test with SPSS 22 program. Univariate analysis was used to present descriptive statistical data analysis for each variable showing caring behavior regarding the subscale: respect, presence, positive relationship, knowledge and skill, and attention. These variables were categorized into ordinal scales consisting of four categories: less, enough, good, and very good. Different pairs of nonparametric analyses were performed with the Wilcoxon test and the Mann-Whitney test.

## RESULTS AND DISCUSSION

**Table 1**

*Distribution of Caring Behavior Regarding Respect Before and After Treatment*

Group	Amount	Respect							
		Before Intervention				After Intervention			
		Less	Enough	Good	Very Good	Less	Enough	Good	Very Good
Intervention	F	0	0	20	0	0	0	5	15
	%	0	0	100	0	0	0	25	75
Control	F	0	2	11	7	0	0	7	13
	%	0	10	55	35	0	0	35	65

Based on the results of the research before the treatment, all treatment groups showed good caring behavior (100%) on the

component of respect, while in the control group only 55% showed good in terms of respect. After treatment, 75% of the participants in the intervention group showed very good, caring behavior, while in the control group only 65% of the participants showed very good, caring behavior. This, therefore, means that there was an improvement in the caring behaviors in terms of respect after the treatment.

**Table 2**

*Distribution of Caring on Behavior Presence Before and After Treatment*

Group	Amount	Attendance							
		Before				After			
		Less	Enough	Good	Very Good	Less	Enough	Good	Very Good
Intervention	F	0	0	17	3	0	0	3	17
	%	0	0	85	5	0	0	5	85
Control	F	0	0	12	8	0	0	4	16
	%	0	10	60	40	0	0	16	80

Based on the results of the research before the treatment, 85% of participants in the intervention group showed caring behavior good attendance, whereas in the control group, only 60% of participants showed caring behavior good on attendance. After treatment, as many as 85% of the intervention group participants showed caring behavior very good on presence, while in the control group only 80% showed caring behavior as very good on presence. This indicates that there is minimal improvement in the caring presence after the treatment.

Potter and Perry (2005) explained that caring nurse behavior in providing nursing services to patients is his/her presence, touch, service and understanding to the patient. Respect is needed by a nurse in serving the patient. The nurse must be able to be a good listener, and more importantly, a nurse should regard the patient as his own family. Also, nurses should be able to make patients feel comfortable both physically and emotionally. The patient's expectation is that the nurse is always present and beside him/her, especially when the patient needs it. The patient also demanded a quick response from the nurse to reduce the pain. The presence of a nurse may provide an opportunity for the patient to express his or her feelings about his/her disease and its treatment so that he/she feels appreciated as a human being.

**Table 3**

*Distribution of Caring Behavior on Positive Relationships Before and After Treatment*

Group	Amount	Positive Relationships							
		Before				After			
		Less	Enough	Good	Very Good	Less	Enough	Good	Very Good
Intervention	F	0	0	20	0	0	0	1	19
	%	0	0	100	0	0	0	5	95
Control	F	0	0	13	7	0	0	7	13
	%	0	0	65	35	0	0	35	65

Based on the result of the research before the treatment, all the participants of the treatment group showed caring behavior on a good positive relationship, whereas in the control group only 65% of participants showed caring behavior on a good positive relationship.

After the treatment, 95% of participants in the intervention group showed caring behavior with a very good positive relationship, while in the control group, only 65% showed caring behavior with a very positive relationship.

The nurse-patient relationship is a professional relationship because the presence of a nurse is hope for the patient to recover from his/her illness. Nurses who are patient, gentle, polite, friendly, and cheerful can provide a sense of comfort to the patient. Caring nurse behavior correlates to patient satisfaction as the result of research by Azizi et al. (2012) found that there is a significant positive relationship between caring nurse behavior toward patient satisfaction.

**Table 4**

*Distribution of Professional Knowledge and Skills Before and After Treatment*

Group	Amount	Knowledge and Skill							
		Before				After			
		Less	Enough	Good	Very Good	Less	Enough	Good	Very Good
Intervention	F	0	2	18	0	0	0	2	18
	%	0	10	90	0	0	0	10	90
Control	F	0	3	13	4	0	0	9	11
	%	0	15	65	20	0	0	45	55

Based on the results of the study before the treatment, the responses show that 90% of the intervention group participants showed good professional knowledge and skills, while in the control group, only 65% showed good professional knowledge and skills. After treatment, 90% of the intervention group participants showed very good professional knowledge and skills, while in the control group, only 45% showed very good professional knowledge and skills.

**Table 5**

*Distribution of Attentiveness to the Experience of Others Before and After Treatment*

Group	Amount	Attention							
		Before				After			
		Less	Enough	Good	Very Good	Less	Enough	Good	Very Good
Intervention	F	0	0	20	0	0	0	4	16
	%	0	0	10	0	0	0	20	80
Control	F	0	2	9	8	0	1	6	13
	%	0	10	45	40	0	5	30	65

Based on the results before the treatment, all participants of the intervention group showed good attentiveness to the experience of others, whereas in the control group, only 45% showed good attentiveness to the experience of others. After treatment, as many as 80% of the intervention group participants showed very good attentiveness to the experience of others, while in the control group only 65% showed very good attentiveness to the experience of others.

### **Results of Bivariate Analysis (T-Test)**

The results of the pairs differentiation analysis before and after treatment, Wilcoxon test shows that  $p = 0.00 (<0.05)$ . It can be inferred that there is a significant difference of caring behaviors before and after the given caring education in the intervention group.

Independent samples test results (intervention group and control group), using Mann-Whitney test shows that  $p = 0.038 (<0.05)$ . It can be concluded that there is a significant difference in the caring behaviors of the intervention group and control group.

Caring behavior nurse should be implanted during the entire nursing education. Research by Loke et al. (2015) showed that caring behavior level decreased in first and third-year students so that more effort is needed in nursing education to improve the caring behavior of students until they become professional nurses. The study was also supported by Murphy et al. (2009) when they found that there are statistical differences in the caring behaviors of the first and third year nursing students. Wherein, the third year has scored lower than the first years. Caring is the core of nursing values and is the basis of behavior in nursing students, but the education process reduces their caring behavior. Students are expected to tend to be caring through nursing education and develop it into professional, caring behavior. But some evidences suggest that it is only a habit and does not develop that behavior. Special education on caring needs to be developed specifically on the learning method to cultivate and develop a sense of caring that can be owned by students to transform it into caring professional behavior.

In contrast to previous research, research by Mlinar (2010) showed that caring behavior of third-grade students was significantly better than second-grade students. Nurse educators can prepare how the students behave properly through practicum about caring behaviors. The development of the right learning method can make the students have a learning experience that is easily understood and applied to real life.

### **CONCLUSION**

This study has proven that caring education can improve students' caring behaviors on all components of caring that is respect, presence, positive relationship, knowledge and skill, and attention. Caring must be established since this is the essence of caring in nursing.

### **RECOMMENDATIONS**

It is therefore recommended that:

Nursing schools may develop a caring education program that



can be implemented during the practicum of the students so that their caring behaviors will continue to be nurtured.

Clinical Instructors need to nurture the caring behaviors exhibited by the student nurses.

Student nurses may continue the caring behavior regardless of the area where they are assigned.

Future researchers may replicate the study every year to check on the consistency of the results across different participants, and to include professional nurses as participants in the study.

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