

KNOWLEDGE AND ATTITUDES AMONG NURSES RELATED TO PROFESSIONAL NURSES' ASSOCIATIONS IN SRI LANKA

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INTRODUCTION

Nursing is a science dealing with the care of human beings and has a core mission to provide knowledge, apply evidence based care processes and advocate for change that improves individuals and society. A professional nursing organization will be formed by gathering the above intentions (Blias & Frock, 2004). These organized associations are extremely effective as they can influence policies which protect members of large organizations (Deleskey, 2003). The major responsibility of professional organizations is to establish and implement "Standards of Practice" (Wind, 2003).

In Sri Lanka, Nursing became institutionalized as a profession after a long period of time (Jayasekara & McCutcheon, 2006). The Sri Lanka Nurses' Association (SLNA) is the only professional association which has the membership of the International Council of Nurses' (Carey & Dier, 1995). The general purpose of establishing The Sri Lanka Nurses' Association was to contribute to the advancement of the nursing profession in Sri Lanka and to draw attention to the public towards this compassionate service. Thus, an examination of nurse related factors that affect the professional nursing organizations is very essential (De Silva & Rolls, 2010).

Most Sri Lankan nurses do not have professional attitudes towards nursing and consider their work merely as employment (De Silva & Rolls, 2010). In addition, access to professional nursing associations is also limited in Sri Lanka (Hiscock & Kadawathage, 1999). Therefore, it is necessary to have a speedy change in attitudes through a professional association.

The purpose of this study was to examine the knowledge and attitude among nurses' regarding professional nursing associations. The study was also carried out with the specific objectives of identifying nurses' existing knowledge and attitudes about professional nurses' associations in Sri Lanka, to compare knowledge and attitude scores between members and non-members of professional nurses' associations and to identify the barriers for nurses' involvement with professional nurses' associations.

METHODOLOGY

Quantitative descriptive design was used for this study. The study was conducted in medical and surgical wards of the Colombo South Teaching Hospital. Nurses' who had more than two years experience in the area of medical and surgical nursing were included in the study.

Simple random sampling method was used to select 100 registered nurses to examine the knowledge, attitudes and barriers that affected their involvement in professional organizational activities. A pretested validated self-administered questionnaire was distributed to collect data. The response rate was 82%. The questionnaire was designed to collect information on demographic data, details of knowledge related to professional nursing associations, attitude towards professional nursing associations, current involvement with

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such associations and barriers for involvement in professional nursing associations. Data collection was done during September, 2011.

Ethical approval was obtained from the ethical committee of the Colombo South Teaching Hospital before commencing the data collection. Informed consent was obtained from participants. The data analysis was done by using descriptive and inferential statistics. The results were statistically evaluated by using 't' test.

RESULTS AND DISCUSSION

Majority of the study group were between 25- 30 years of age. About 98% of the participants were females. (Table 1)

Table1: Distribution of the respondents according to socio-demographic characteristics (N=82)

Characteristics	Number (N)	Percentage (%)
Age (years)		
25 – 30	44	53.6
30 – 35	17	20.7
35 – 40	11	13.4
40 – 45	04	4.8
45 – 50	04	5.1
50 – 55	02	2.4
Civil Status		
Married	41	50.0
Single	41	50.0
Sex		
Male	02	2.43
Female	80	97.56

Approximately 90% of respondents had heard about professional nursing associations. Majority (35.4%) of the study group were aware of the professional nursing associations from their nursing schools, while the lowest numbers were aware about such associations from internet sources (1.2%).

Both mean knowledge score (n=78, mean= 2.872) and mean attitude score (n=79, mean= 18.2) of the total study group has a statistically significant variation ($p < 0.0001$) than the expected maximum scores 5 and 30 respectively. That is the expected scores for the knowledge and attitude were not achieved by the study group. This finding has previously been proven by the ethnographic study by De Silva and Rolls (2010).

There is no statistically significant variation in knowledge and attitudes scores between the members and non- members of professional nursing associations. (Table 2 and Table 3)

Table 2: Comparison of knowledge score on nursing professional associations among members and non-members

Membership status	Number of participants	Knowledge score		'P' value
		Mean	SD	
Members	16	3.031	1.147	0.4066
Non members	65	2.777	1.079	

Table 3: Comparison of attitude score on nursing professional associations among members and non-members

Membership status	Number of participants	Attitude score		'P' value
		Mean	SD	
Members	14	19.86	8.529	0.3433
Non members	66	18.05	5.957	

Approximately 57% of the study group had membership on a trade union. While only 19% of the study group had membership in professional nurse's associations. About 11% of the participants had membership in both associations. Seventy five percent (75%) of members of the professional nurses associations had membership for more than 02 years. However, only 43.75% of members of professional nurses associations had participated in more than 02 annual meetings for the last three years. This result shows a similarity to the result shown by Blais and Frock (1987).

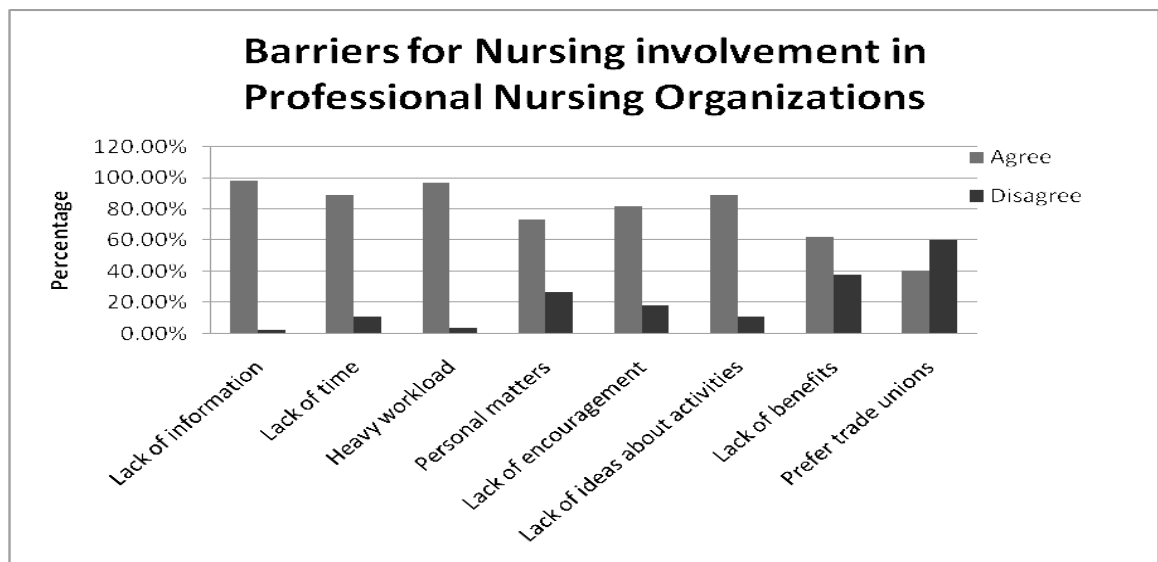


Figure 1: Barriers for Nursing involvement in Professional Nursing Organization

A majority of the study group considered lack of information, lack of time, heavy workload, personal matters, lack of encouragement and lack of benefits as the barriers for involvement in professional nursing associations. (Figure 1) A study by White and Olson (2004) indicated that the barriers for non-participation in professional associations were very similar to the present study. They had found family responsibilities, lack of information, and lack of time as the major barriers.

CONCLUSIONS/RECOMMENDATIONS

Although the Sri Lanka Nurses Association celebrates its 70th anniversary, nurses' knowledge, and attitudes regarding professional nursing associations is not at a satisfactory level. The level of knowledge and attitudes regarding professional nursing associations were not related to membership status. Barriers for nursing involvement with professional nurses' associations includes lack of information, lack of time, heavy workload, personal matters, lack of encouragement and lack of benefits.

The study recommends that the Sri Lanka Nurses' Association should implement programs to integrate the international trends related to professional nursing associations. Furthermore,

this study should be extended to other major hospitals to get a clear picture about nurses' involvement with professional nursing associations.

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