Altruism, the values dimension of caring self-efficacy concept in Iranian pediatric nurses

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ABSTRACT

Background: Self-efficacy is the most influential among factors affecting nurses' performance. Yet, understanding of the constituent elements of the caring self-efficacy concept was not considered. This study was to introduce altruism as one of the main aspects of caring self-efficacy in pediatric nurses. Materials and Methods: This is part of a larger study on the concept of caring self-efficacy conducted with qualitative content analysis approach in Iran. Participants included 27 clinical pediatric nurses and instructors, selected purposively. Data were collected using semi-structured interviews and analyzed using conventional content analysis method. Results: Theme "altruism" as one of the main themes extracted from the analysis of the interviews in this study. This theme includes two main categories of "humanistic care" and "caring attitude." Conclusions: This paper introduces altruism as one of the values aspects of caring self-efficacy in pediatric nurses. Efficient nurse with features Humanistic care, through the provision of maternal care and family-centered care and caring attitudes resulting from religious beliefs and loving children to care for the children.

Key words: Altruism, Caring, Iran, pediatric nurses, self-efficacy

INTRODUCTION

Self-efficacy is a functional concept in Bandura's social learning theory in relation to professional behavior. Self-efficacy reflects individual's beliefs about the ability to perform behaviors with specific outcomes. Bandura opened a new approach to human behavior in which individuals' trust is a key element in their control and action. [1,2] Self-efficacy is a personal and contextual concept. Specialized self-efficacy is concerned with particular areas of behavior and function (various aspects of health, academic success, professional success, and ...). [3] The concept of self-efficacy has been widely studied and used in different areas. In many studies, self-efficacy predicts the success in activities such as

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academic performance results, mathematics and professional practice in the clinical.^[4] Self-efficacy plays an important role in nurses' professional functioning, and it is an important predictor of their behavior.^[5,6] Self-efficacy is expected to be the most influential among factors affecting nurses' function. High level of self-efficacy improves the quality of care and ultimately leads to improved personal and organizational performance.^[7,8] Self-efficacy resembles a structure affecting one's motivation, learning, skill development, and professional progress. High self-efficacy leads to effective utilization of cognitive, metacognitive, and other performances in many areas.^[9] Nursing studies indicate that self-efficacy and acquisition of clinical skills are correlated, and an increase in self-efficacy decreases the gap between theory and practice.^[10]

With an estimated 1.8 million hospitalized children each year, it is essential to determine the efficacy of nurses with various roles in pediatric care. [11] Nurses are considered as

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the largest and most important human resource for health care organizations. [12,13] Many children in the hospital need of complex care. Children hospitalized due to the development of physical, mental and emotional, and their lack of power to control the functions for which they are very vulnerable. [14] Goals for resource nurse programs may include improving patient outcomes, developing nurse knowledge, skills, and confidence. To work and progress in the health care setting, nurses also need new skills to complex and need to feel empowered and proud of their abilities and their skills. Professional self-efficacy is the best structure that encompasses the feeling of satisfaction, benefit, and honor to the profession. [15]

In recent years, the need for attention to the issue of professional self-efficacy of nurses has increasingly been felt, and due to increased awareness and expectations of the community in relation to receiving quality services, inevitably, and healthcare providers have had to enhance professional efficacy of their employees. Human and thought assets are of prime importance in today's world. The individuals identify their capabilities by knowing more aspects of them and are considered a great help by overcoming psychological pressures by meeting individual and organizational objectives. Considering the fact that self-efficacy is a personal and context-based issue. The first step to improve the efficacy of Bandura's view is recognizing the concept of self-efficacy in the same position and forming a specialized task. [2] Therefore, understanding and explaining the concept of self-efficacy in specialty especially in the realm of pediatric care is valuable. Also according to the importance of the religious context of Iran, especially in the nursing profession, recognizing the value of this concept is necessary. Considering that benchmarking aspects of caring self-efficacy, especially in specialized areas such as pediatric care will be helpful in determining criteria and standards of self-efficacy assessment, and naturally in evaluation of pediatric nurses and quality of care they provide, this research was conducted to introduce altruism as one of the main aspects of caring self-efficacy from pediatric nurses' perspective in this paper.

MATERIALS AND METHODS

This paper is part of the nursing doctorate thesis conducted in the year 2013–2014 in Iran to clarify the caring self-efficiency concept in pediatric nurses. The study was conducted through qualitative content analysis. Considering the significance of detailed review of individuals' experiences, 27 pediatric nurses and clinical directors of Isfahan Hospital and clinical nursing professors of pediatric faculty of Nursing and Midwifery College of Isfahan were selected through purposive sampling. The inclusion criteria included having BS or a higher degree in nursing, having clinical experience for at least 1-year, and willingness to share one's experience. Data were collected through "semi-structured interviews" with individuals and field notes. The interviews commenced by the interviewer introducing himself/herself and a short description on the objectives of the study. Interviews lasted from 28 to 60 min.

Interviews were conducted in a peaceful place chosen by the participants. The interview manual contained several questions such as "what does self-efficacy means in caring for children?," at the beginning of every interview, before asking questions about self-efficacy, participants were asked to describe a day at work. Sampling continued up to data saturation.

Along with data collection, the data were analyzed through the conventional content analysis method. Content analysis is a systematic data categorization process that reveals codes and themes. The recorded interviews were transcribed verbatim. As an in-depth analysis is required in such qualitative research works, the researcher listened to the interviews several times and reviewed the transcripts word by word and line by line to extract the words containing the key concepts or units of meaning, and to extract the primary codes from statements made by the interviewees and participants. Then the codes were reviewed in a continuous process from the extraction to naming step. Then, the similar codes were merged and categorized. Then based on the ideas contained in the categories, the naming, and subcategories emerged. The extracted subcategories were then compared with one another. In case of similarity, they were merged if possible. The main themes were revealed ultimately. [16,17]

To ensure data accuracy, the researcher utilized long and in-depth engagement with the data. The interviews with the participants and analyzed simultaneously lasted about 14 months. Also, to increase the reliability of the study, adequate time was dedicated by the researcher for providing information to participants, maintaining contact with participants for gaining their trust, reviewing the data continuously, reviewing the extracted codes with some of the participants, peer-reviewing the findings, and using their views for amendments. Interviews and coding were conducted by the first researcher, and two expert professors of qualitative research supervised and audited the entire research procedure. Utilization of several data collection methods and consideration of maximal variation (with regard to age, work experience, different social, and economic status) in the selection of participants made data transferability possible. Immediate transcription of interviews and direct quotes made data entry possible.[18]

The study was confirmed by the ethical committee of Isfahan University of Medical Sciences. Explanations were provided to the participants with regard to the study objectives, interview method, data confidentiality, and optional participation in the study. Written consent was then obtained from participants. Participants' consent was obtained prior to interview commencement. The raw data including the interviews are stored in a safe place accessible only to the research team.

RESULTS

The demographic properties of participants were 27 participants, 19 pediatric nurses, 4 pediatric directors, one supervisor, and three pediatric nursing instructors aging

between 27 and 49-year-old and with a work experience of 3–25 years. Twenty-five of participants were female and the rest were male. Twenty-one of participants had BS degree, five had MS degree, and one had a PhD degree in nursing. The "altruism" theme was one of the main extracted themes in the recent study that was of two main categories: "Humanistic care" and "caring attitude."

Humanistic care

In participants' views, a self-efficient pediatric nurse tries to meet the child's and family's needs and to empathize and understand the suffering of children and their families with humanistic care. This theme comprised two subcategories of "maternal care," "family-centered care."

Maternal care

One of the important subcategories that emerged in interviews with children nurses, sympathetic tendencies, and humanistic care through the maternal care of the hospitalized child.

In this respect, participant four stated: "A nurse that has maternal feelings toward children she cares for feels every child is her own, and compares them with her own children, and talks to them the way she talks to her own children, and does what she should in nursing terms. I feel so sorry for sick children. Sometimes, I feel so sorry for some of them that I pray for them to get well. I am concerned about them and sympathize with them."

Participant 22 said: "I think, pediatric nurses should provide mother-like care, understand the child, understand suffering of mother whose child has fallen ill, to understand what the child is going through, be a mother to understand what the mother feels, be sympathetic and a good nurse, and care for children as her own."

In this area, participant 20 express: "...Innocent baby is who is now hospitalized, cannot take care of itself, do not need to tell, I pity for its powerless and helpless. In fact, like being captured. The pediatric nurse has to have this innocent child like her own children's care..."

Family-centered care

In participants' perspectives, understand the child hospitalized family problems and their participation in the process of child care, plays an important role in the acceptance of nurses and nurses self-efficacy in the care of children.

In this area, participant seven stated: "In pediatric ward, care does not end with the child, and it is not just medical care. In my view, it also involves emotional care. Alas, when a child is admitted, it is not just the child; it is his family and their problems as well. Concerns they have about their sick child, and what is going to happen to the family. All these are part of care, and care should be family-oriented, not individual."

In this respect, participant 23 argued: "A nurse should empathize with the child and his family. During care, the

child cannot defend himself, and is victimized. The nurse should encourage parental cooperation in caring for the child, and be able to calm the mother. For instance, when taking the intravenous (IV) line, most mothers are unhappy and frightened. Explanations should be given beforehand that nothing untoward will happen. We should train them and make them aware. Give them a peace of mind. When I explain, parents cooperate."

In this area, participant one stated: "Self-efficient nurse understands that in pediatric ward his account of the family and children. Really see the family's problems, for example, when taking IV line is never normal for us. However, the child families have the right to be discomfort and feel that his baby suffers. The self-efficient nurse understands the family's sense of discomfort and protest. Maybe call it empathy."

Caring attitude

According to the participants, a positive attitude for care played an important role in accepting the role of pediatric nurses and their self-efficacy in caring for children. This category includes the subcategories "loving child "and "religious beliefs."

Loving child

The participants explained that the children interest and loving child, made nurses attempt to become self-efficient in the area of child care.

In this regard, participant 17 pointed out: "Nurses that love children and are interested in caring for children, I think, have more self-confidence. Because the tasks related to children are more special. It's more stressful than other wards. The care given in pediatric wards is more special than that in other more general wards. Because the mother stands with her child and always worries and has much more expectations of nurses than other wards."

Participant 15 also explained: "...Some of my colleagues say we hate the pediatric ward, children's cries and screams, and this causes the feeling of inefficacy in caring for children. This affects nurses' self-efficacy negatively. Caring for children needs love and enthusiasm. If you love them, you act, you look at the kid, you care for him or her in time, and you enjoy all these."

Religious beliefs

In participants' views, having religious beliefs is one of the things that makes nurses motivated to do their work and trusted to their capability and resistance up to their problems. The nurse's statements showed that although they experience many difficulties in the workplace, but religious beliefs as a powerful force and internal control change their attitudes and finding meaning and value of the care work. Religious beliefs as a shield and protection against their problems and they maintain their mental energy to care.

Participant eight stated in this regard that: "I think nurses should be aware of the value of their profession and caring. Caring for children is of higher value than caring for adults.

It sometimes gets difficult; there are lots of pressures, but a mother's prayer or child's smile makes us forget all these difficulties and pressures. It is sweet to us and gives us the good feeling that we have done something positive for the kid. I trust myself more when I am aware of the value of my profession."

Participant 15 said in this regard that: "A self-efficient pediatric nurse would work with great passion, love, and enthusiasm. She does your duty accurate for God. There is no sense of obligation to work. The nurse would take care of the children without any pressure. To please God do his duty."

Participant 24 believes: "Unfortunately, in nursing, because of job dissatisfaction and low wages, many issues such as tiredness, heavy shifts, and dissatisfactions can affect function and attitude of nurses, and thus they do not feel very committed, which is very dangerous, especially in pediatric ward, it is a huge hazard. However, a self-efficient nurse is committed to her work, and it is highly important for her to do her job properly."

DISCUSSION

This is first study conducted in Iran on the concept of self-efficacy in nursing care, aiming to introduce altruism as one of the main aspects of caring self-efficacy from perspective of care providers (nurses) in specialized area of pediatrics. This article introduces "altruism" as value concept of pediatric nurses caring self-efficacy. This concept with the features of the humanistic care, maternal care by providing family-centered care and caring attitude of religious beliefs and loving children was introduced from the perspective of the participants in this study.

Altruism means supporting patients and nurses' concern about the well-being of patients within their professional capacity. ^[19] In fact, altruism is described as an engagement in caring acts toward others without expecting something in return. Altruistic behavior motivated by concern for others or by internalized values, goals, and self-rewards rather than by the expectation on concrete or social rewards or the desire to avoid punishment. ^[20]

Researches in other countries also report that, altruism is the most commonly reported motivation by people that have chosen nursing as their profession. It is often proposed that nursing has an altruistic nature, and people interested in helping patients are attracted to this profession. [21-23] Altruism is proposed as a dimension of care. [24] Humanistic care and altruism is related to empathy in that, after understanding another situation, one has a propensity to engage in an act to help the person and would experience happiness as a result. Empathy is necessary precursor to altruism. In other words, one must be able to empathize with another before engaging in a helpful action. [20] According to Watson (1988) caring is a moral ideal in nursing that in the end to preserve and promote the status and human dignity. In Watson's views, one of the carative factors is human values and altruistic motivation.

According to Watson, human care with regard to humanitarian values is a fit model for nursing care in children and neonatal wards. [25] Given participants' statements, expressing that children are among patients that are unable to state their care needs and cannot defend their own rights, it can be concluded that altruistic motivation is more emphasized in pediatric nurses, compared to other nurses. Furthermore, providing support for children and their families is an important aspect of pediatric nursing. Family-centered care defines the focus of pediatric care because it is not possible to care for children without accounting for the whole family as guardians. [26] In family-centered care philosophy, the family is a constant phenomenon in child's life. The primary role of a pediatric nurse is to provide direct care for the child and his parents, and involves support and defense of child and family through recognizing their needs, making them aware of their rights, helping them in decision making, and providing training and counseling for them. [27] Abbaszadeh in a qualitative study from the perspective of mothers of children showed that ignoring the needs of mothers is one part of the hospitalized mother's grievances and a part of nurses ineffectively in pediatric wards. [28] From our study participants perspective, the ability to meet the needs of the family, and support them especially mothers of hospitalized children is one thing that will be in a self-efficient nurses when caring for children. Results of a study by Morsy showed that providing support for parents of hospitalized children by nurses reduces parents' stress and increases their adjustment with hospitalization of children, affecting the quality of life and care outcomes. [29]

This article explored religiosity as a contributing factor in the development of altruism. Some religions promote caring for others as loving one's neighbor in addition to showing love to God.^[20] The study findings of Taylor also suggest that nurses' religious beliefs will affect the job motivation and views to the patient and nursing services.^[30] Also, research in Iran confirms that religious orientation plays a major role in coping nurses with the job problems. The Ravari study with the aim to examine the concept of spiritual job satisfaction among nurses reveals that nurses' religious orientation plays an important role in tackling employment problems.^[31]

Altruism and maintaining a positive caring approach and humanistic willingness for taking care of others makes nurses to care for the patients willingly. The nursing profession actually assumes a saint-like identity this way. Nurses with personal trait such religious beliefs seem to have changed their approach and have given sense to their duties against environmental problems and have gained a psychological immunity and exhibit their capabilities with greater confidence act. It seems that, despite the fact the purpose of the nursing profession is helping the invalids, a positive attitude, and personal willingness is required as personal characteristics for the pediatric caring profession. Motivation will cause a person to achieve the goal of maximum power use and continue to achieve a high level of self-efficacy. [32] The positive evaluation nurse of yours arising from religious beliefs and believing care as a sacred activity will be increased their confidence and motivation and promote their self-efficacy perception. [33] Although one must be aware not to generalize the results of qualitative studies, one can identify and understand the different aspects contributing to self-efficacy, as well as altruism, and then help with improving the quality of care services as nurses should view themselves as competent so that they can help others.

CONCLUSION

Altruism acted as the driving force, and the duty of care is considered significant and important. These feelings are so clean, strong, and valuable, despite the problems and the stress of the workplace nurses to continue to work and serve. Participants in the study acknowledged having empathic tendencies and attitudes of care; nurses can ignore their workers' problems and prefer well-being of patients and can achieve in a type of self-sacrifice, self-worth, and self-esteem. In this case nurse engagement in caring acts toward children without expecting something in return. In the perspective of the participants, self-efficient nurse in the pediatric ward, provide a more meaningful and humane care. In fact, positive attitude and humanistic willingness are required as self-efficacy perception for the pediatric caring profession.

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Conflicts of interest

There are no conflicts of interest.

REFERENCES

- Zulkosky K, editor. Self-Efficacy: A Concept Analysis. journal Nursing Forum. Wiley Online Library. 2009;44(2):93-102.
- Bandura A. Guide for constructing self-efficacy scales. Self-efficacy Beliefs of Adolescents. Vol. 5.Information Age publishing 2006. p. 307-37.
- Washington OG, Moxley DP. Self-efficacy as a unifying construct in nursing-social work collaboration with vulnerable populations. Nurs Inq 2013;20:42-50.
- Melnikov S, Shor R, Kigli-Shemesh R, Gun Usishkin M, Kagan I. Closing an open psychiatric ward: Organizational change and its effect on staff uncertainty, self-efficacy, and professional functioning. Perspect Psychiatr Care 2013;49:103-9.
- Lee PY, Dunne MP, Chou FH, Fraser JA. Development of the child abuse and neglect reporting self-efficacy questionnaire for nurses. Kaohsiung J Med Sci 2012;28:44-53.
- Manojlovich M. Promoting nurses' self-efficacy: A leadership strategy to improve practice. J Nurs Adm 2005;35:271-8.
- Lee TW, Ko YK. Effects of self-efficacy, affectivity and collective efficacy on nursing performance of hospital nurses. J Adv Nurs 2010;66:839-48.
- 8. Karabacak Ü, Serbest S, Kan Öntürk Z, Eti Aslan F, Olgun N.

- Relationship between student nurses' self-efficacy and psychomotor skills competence. Int J Nurs Pract 2013; 19:124-30.
- Lauder W, Watson R, Topping K, Holland K, Johnson M, Porter M, et al. An evaluation of fitness for practice curricula: Self-efficacy, support and self-reported competence in preregistration student nurses and midwives. J Clin Nurs 2008;17:1858-67.
- Robb M. Self-efficacy with application to nursing education: A concept analysis. Nurs Forum 2012;47:166-72.
- Cimiotti JP, Barton SJ, Chavanu Gorman KE, Sloane DM, Aiken LH. Nurse reports on resource adequacy in hospitals that care for acutely ill children. J Healthc Qual 2014;36:25-32.
- Desbiens JF, Gagnon J, Fillion L. Development of a shared theory in palliative care to enhance nursing competence. J Adv Nurs 2012;68:2113-24.
- Papastavrou E, Efstathiou G, Charalambous A. Nurses' and patients' perceptions of caring behaviours: Quantitative systematic review of comparative studies. J Adv Nurs 2011;67:1191-205.
- Livesley J, Long T. Children's experiences as hospital in-patients: Voice, competence and work. Messages for nursing from a critical ethnographic study. Int J Nurs Stud 2013;50:1292-303.
- Bell JA, Schroder TG, Morris CF. A pediatric resource nurse program for nonpediatric nurses. J Nurses Staff Dev 2012;28:288-91.
- Graneheim UH, Lundman B. Qualitative content analysis in nursing research: Concepts, procedures and measures to achieve trustworthiness. Nurse Educ Today 2004;24:105-12.
- Hsieh HF, Shannon SE. Three approaches to qualitative content analysis. Qual Health Res 2005;15:1277-88.
- Polit D, Moule P, Ellis P, Polit D, Burns N, Moule P, et al. Essentials of Nursing Research: Appraising Evidence for Nursing Practice. Philadelphia: Lippincott, Williams and Wilkins; 2014. p. 2014.
- Lillis C, LeMone P, LeBon M, Lynn P. Study Guide for Fundamentals of Nursing: The Art and Science of Nursing Care. Philadelphia: Wolters kluwre, Lippincott Williams & Wilkins; 2010.
- Swank JM, Ohrt JH, Robinson EM. A qualitative exploration of counseling students' perception of altruism. J Humanist Couns 2013:52:23-38.
- Mimura C, Griffiths P, Norman I. What motivates people to enter professional nursing? Int J Nurs Stud 2009;46:603-5.
- Rhodes MK, Morris AH, Lazenby RB. Nursing at its best: Competent and caring. Online J Issues Nurs 2011;16:10.
- Smith R, Lagarde M, Blaauw D, Goodman C, English M, Mullei K, et al. Appealing to altruism: An alternative strategy to address the health workforce crisis in developing countries? J Public Health (Oxf) 2013;35:164-70.
- Fahrenwald NL, Bassett SD, Tschetter L, Carson PP, White L, Winterboer VJ. Teaching core nursing values. J Prof Nurs 2005;21:46-51.
- Alligood MR, Marriner-Tomey A. Nursing Theorists and Their Work St.Iouis. Missouri: Mosby/Elsevier; 2010.
- Hockenberry MJ, Wilson D. Wong's Nursing Care of Infants and Children. St. Louis, MO: Mosby; 2011.
- Kyle T, Carman S. Essentials of Pediatric Nursing. Philadelphia: Wolters kluwre, Lippincott Williams & Wilkins; 2013.
- Abbaszadeh A, Salmani N, Rassouli M. Perceptions of mothers from barriers of nursing care satisfaction: A qualitative research. J Qual Res Health Sci 2014;3:51-61.
- Morsy AA. Nursing support and stress among mothers of hospitalized children. J Am Sci 2012;8 Suppl 1:135-141.
- Taylor EJ, Carr MF. Nursing ethics in the seventh-day adventist religious tradition. Nurs Ethics 2009;16:707-18.
- Ravari A, Vanaki Z, Houmann H, Kazemnejad A. Spiritual job satisfaction in an Iranian nursing context. Nurs Ethics 2009;16:19-30.
- Abbasianfard M, Bahrami H, Ahghar G. Relationship between self-efficacy with achievement motivation in pre-university girl students. J Appl Psychol 2010;4:95-109.
- Rezapour Mirsaleh Y, Khabaz M, Safi M, Abdi K, Yavari M, Behjati Z. The relationship of religiosity, personality dimensions and self-efficacy with coping style of nurses practitioner students. Iran J Nurs Res 2011; 6(22) 52-64.