Key concept : Perception; Nursing Profession

Perceptions of nurses as a profession in Korea

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I. Introduction

Perception is a psychological process that makes sense out of what one sees, hears, smells, tastes, or feels. Perceptions influence behavior and form attitudes(Marriner-Tomy, 1996). How nurses and others perceive nurses as a profession can affect the nursing practice? If nurses perceive themselves as a professional, they take great responsibilities for patient care. Likewise, if others perceive nurses as professionals, nurses are more likely to contribute to patient care. If others, however, perceives nurse as a non‐professional, their perceptions of nurses influence nurses' moral and produce poor patient outcome. Thus, both nurses' view of their profession as well as others' perceptions of them affect the contributions that nurses are able to make. Specifically, the professions related to nursing tend to influence nurses' work(Song, 1994).

For example, if the policy makers have positive perceptions of nurses, they tend to make polices favorably to nurses. Decisions are mostly based on not rational but the policy makers' own perceptions of objects(Jung, 1995).

Recently nursing has been classified as a profession in many developed countries(Jun, Kim & Bun, 1993). However, nursing has not been fully recognized as a profession in Korea(Lee, 1981), no consistency was found among groups(Song, 1994), and nursing is still recognized as a substitute for physicians's care(Jung, 1995; Yim, 1995).

Therefore, it is important to know perceptions of nurses among groups.

However, little research exists that specifically addressed how various groups perceive nursing as a profession in Korea. This study was undertaken to explore the perceptions of nurses regarding their profession. The purpose of this study is twofold: (a) to examine perceptions of nursing recognized by various groups in Korea and (b) to compare the perceptions of nursing recognized by nurses with those recognized by various groups in Korea.

II. Literature Review

1. Nursing as a profession

Is nursing a profession? Much has been discussed on this issue over the years. Flexner's criteria (Flexner, 1910) for profession included the following: (a) is basically intellectual, (b) is based on a body of knowledge, (c) is practical, (d) have a professional education, and (e) has a strong internal organization of members, and (f) has practitioners who are motivated by altruism. Bixler and Bixler (Bixler & Bixler, 1959) first wrote about the status of nursing as a profession in 1945 and appraised nursing based on their seven criteria. A comparison of Flexner's and Bixler and Bixer's criteria reveal many similarities. (Chitty, 1993). Kelly(1981) expanded Flexner's criteria.

Her criteria included the following :
1. The services provided are vital to humanity and welfare of society.

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2. There is a special body of knowledge which is continually enlarged through research.

3. The services involve intellectual activities; individual responsibilities (accountability) is a strong feature.

4. Practitioners are educated in institutions of higher learning.

5. Practitioners are relatively independent and control their own policies and activities(autonomy).

6. Practitioners are motivated by service (altruism) and consider their work an important component of their lives.

7. There is a code of ethics to guide the decisions and conduct of practitioners.

8. There is an organization (association) which encourages and supports high standards of practice.

According to Kelly's criteria, nursing fulfills these criteria. However, some aspects of both the body of knowledge and autonomy are controversial areas for nursing as a profession. While this was not always so, there is a body of knowledge that is uniquely nursing's like several theoretical models today. Autonomy is still controversial.

Currently Mueller (1994) stated that changes are occurring in the professional cultures, moving nursing toward a more knowledge-based and patient-oriented model of care.

2. Perception of nurses

Perception is defined as the selection, organization, and interpretation of incoming signals into meaningful messages (Chitty, 1993). People select various cues that influence their perceptions. Thus the perceptions influence bahavior and form attitudes (Marriner-Tomy, 1996). Park et al.(1992) analyzed whether nursing is profession or not based on Povalko's criteria. The results are as follows: (a) nursing is positioned between profession and non profession regarding knowledge and theory, (b) nursing is positioned as a profession regarding the relevance for social values, (c) nursing is positioned above the middle level regarding the duration of education, (d) nursing is positioned as a

profession regarding motivation, (e) nursing is positioned above the middle level, close to profession, regarding autonomy, and (f) nursing is positioned as a profession regarding group consciousness or ethical regulations.

Ⅲ. Methodology

1. Sample

Sample consisted of 9 groups (n=584) including hospital personnel (n=38), nurse (n=143), nurse aids (n=47), nurse faculty (n=45), physician (n=49), pharmacist (n=58), politician (n=26), public administrator (n=29), and the public (n=149). Most of the nurses were working at hospitals in Kangwon province, and 31 nurses working in 950 beds, 66 nurses working in 500 beds, 30 nurses working in 250 beds.

2. Instrument

The instrument was developed by researchers based on criteria for professionalism suggested by several scholars and consists of 36 items categorized into 12 subsystems with 5-point range from very negative to very positive. Content validity of the instrument was reviewed by experts and factor analysis was done. The instrument was appropriate to the research questions. Reliability of the instrument was established at .9137.

3. Data Collection

After informed consent was obtained from all participants, the questionnaire was distributed and collected individually except those distributed to nurses. Questionnaire for nurses were distributed and collected through the Department of Nursing. Data was collected from February 1997 to March 1997. The response rates were: 76.0% for hospital personnel; 95.3% for nurses, 94.0% for nurse aids; 52.7% for nurse faculties; 98.0% for physicians; 96.7% for pharmacists; 74.3% for politicians; 93.3% for public administrator; and 74.5% for the public.

〈Table 1〉 Distribution of Sample by Age

Group	20s N(%)	30s N(%)	40s N(%)	50s N(%)	60s N(%)	total N(%)
Nurse	76(53.1)	49(34.3)	15(10.5)	3(2.1)	–	143(100.0)
Nurse Faculty	14(31.1)	12(26.7)	15(33.3)	4(8.9)	–	45(100.0)
Physician	–	17(34.7)	17(34.7)	8(16.8)	7(14.3)	49(100.0)
Pharmacist	17(29.3)	23(39.7)	8(13.8)	7(12.1)	–	58(100.0)
Nurse Aid	44(93.6)	3(6.4)	–	–	–	47(100.0)
Hospital Personnel Public	29(76.3)	9(23.7)	–	–	–	38(100.0)
Administrator	3(7.2)	12(42.9)	10(35.7)	4(14.3)	–	29(100.0)
Politician	15(57.7)	5(19.2)	4(15.4)	2(7.7)	–	26(100.0)
Public	76(51.0)	23(15.4)	30(20.1)	19(12.8)	1(0.8)	149(100.0)
Total	274(46.9)	153(26.2)	99(17.0)	47(8.0)	11(1.9)	584(100.0)

4. Data Analysis

The data were analyzed using SPSS pc. Descriptive statistics of frequency and percentages were used to describe the sample population. Perceptions of nurses were compared by T-test and analysis of variance. Scheffe contrast was used to determine which group more perceived nurses to be profession. The significance level was accepted at .05.

IV. Results

Demographic characteristics of the sample are represented in Table 1. About forty-seven percent of the sample is under age 30. The majority of the nurse aids, hospital administrators, about 39.7% of the pharmacists, and 42.9% of the public administrators were in their thirties.

1. Perceptions of nursing by groups

Table 2 presents the perceptions of nursing by groups. Overall physicians perceived nursing as a profession the highest (M [Mean] =3.24), whereas hospital personnel perceived nursing as a profession the lowest. The top factor perceived by nurses was 'work skill'(M=3.96), followed by 'work attitude'(M=3.76), 'social requirement'(M=3.72), and 'ethical consciousness'(M=3.67). The nurses perceived these factors positively, but they perceived 'work condition' (M=2.40) and 'activities for nursing organizations'(M=2.49) negatively. Nurse faculties and nurses shared similar perceptions. The physicians perceived 'work skill'(M=3.59), 'social recognition'(M=3.66), and 'social requirement'(M=3.59) positively, whereas they perceived the other factors

〈Table 2〉 Perceptions of Nursing by Groups

	N M	NF M	Phy M	Pha M	NA M	HP M	PA M	Pol M	Pub M	F	Scheffé
work skill	3.96	3.67	3.59	3.41	3.53	2.92	3.24	3.44	3.42	7.92**	N>HP, Phy>HP
work attitude	3.76	3.13	3.41	2.82	3.08	2.44	2.93	3.44	3.42	16.43**	N>Pha, NA, PA, Phy>Hp
Knowledge	3.43	3.19	3.26	3.09	3.41	2.68	2.99	2.81	3.05	6.26**	NA>HP
Work Condition	2.40	2.27	2.80	2.60	2.37	2.80	2.57	2.22	2.90	3.74**	N>HP

*p< .05, **p< .01

N=Nurse, NF=Nurse Faculty, Phy =Physician, Pha= Pharmacist, NA= Nurse Aid, HP= Hospital Personnel,
PA= Public Administrator, Pol=Politician, Pub=Public, M=Mean

〈Table 2〉 Perceptions of Nursing by Groups(계속)

	N	NF	Phy	Pha	NA	HP	PA	Pol	Pub	F	Scheffe
	M	M	M	M	M	M	M	M	M		
Social Recognition	3.27	3.44	3.66	3.59	3.41	3.35	3.54	3.40	3.61	2.78	Pub>NF, Pol
Social Requirement	3.72	3.84	3.59	3.56	3.69	3.33	3.72	3.84	3.54	2.51	-
Education	2.65	2.68	2.69	2.33	2.62	2.47	2.63	2.31	2.26	3.93**	Phy, NF, N>Pub
Job Consciousness	3.36	3.36	3.40	3.39	3.23	2.83	3.39	3.02	3.37	2.20*	-
Ethical Consciousness	3.67	3.61	3.43	2.87	3.11	2.29	2.75	2.68	2.90	20.41*	Phy>HP, N, NF>HP, Pol, PA, Pha, Pub
Autonomy	3.21	3.01	2.91	2.55	2.92	2.38	2.57	2.40	2.62	10.75**	NF>HP, N>HP, P, Pol, Pha, PA, Pub,
Activities for Organization	2.49	2.41	2.96	2.11	2.40	1.82	2.74	2.36	2.14	7.58**	N, NF, Phy, NA, PA, Pub>HP
Contribution to Public Welfare	3.05	3.04	3.02	2.91	2.82	1.82	3.05	2.59	2.88	8.44**	N, NF, Phy, NA, Pha, PA, Pub>HP
Total	3.22	3.14	3.24	2.94	3.05	2.59	3.01	2.87	3.01	-	

*$p < .05$, **$p < .01$

N=Nurse, NF=Nurse Faculty, Phy =Physician, Pha= Pharmacist, NA= Nurse Aid, HP= Hospital Personnel,
PA= Public Administrator, Pol=Politician, Pub=Public, M=Mean

moderately. The pharmacists perceived 'social recognition' (M=3.59) and 'social requirement'(M=3.56) positively, whereas they perceived 'nursing education'(M= 2.33) and 'activities for nursing organizations'(M=2.11) negatively. The nurse aids perceived 'work skill'(M=3.53), and 'social requirement'(M=3.69) positively, whereas they perceived 'work condition'(M=2.37) and 'activities for nursing organizations'(M=2.11) negatively. Overall the hospital personnel perceived most the factors negatively. The public administrators perceived 2 factors, 'social consciousness' (M=3.54) and 'social requirement'(M=3.72) positively, while they perceived 10 factors moderately. Politicians perceived only 'social requirement'(M=3.84) positively. The publics perceived 'social recognition'(M=3.61) and 'social requirement'(M=3.54) positively, whereas they perceived 'nursing education'(M=2.26) and 'activities for nursing organization'(M=2.14) negatively.

2. Comparison of perceptions of nurses per factor by groups

The results of this survey revealed significant differences among groups regarding perceptions of nursing as a profession(Table 2). Regarding 'work attitude', there were overall significant differences in the mean scores among groups(F=16.43, P=.01). That is, nurses had significantly higher perceptions of themselves than the other 7 groups except nurse faculties and physicians. Nurses' perceptions concerning 'ethical consciousness' had a significantly higher than the other 6 groups(F=20.41 , P=.01); hospital personnel, politicians, public administrators, pharmacists, publics, and nurse aids. Regarding 'autonomy', nurses had significantly higher perceptions of themselves than the other 5 groups including(F=10.75 , P=.01) hospital personnel, politicians, public administrators, pharmacists, and the public. There were the biggest differences between nurses' and hospital personnel' perceptions of nursing, followed by those between nurses' and publics' perceptions of nurses.

3. Comparison of perceptions of nursing between nurses and the other groups

Table 3 compares the perceptions of nursing between nurses and the other groups. Regarding 'social requirement' and 'professional consciousness', no significant differences were found between the 2 groups. Nurses had significantly higher perceptions of themselves than the other groups regarding 'work knowledge', 'work skill', 'work attitude', 'nursing education', 'ethical consciousness', and 'autonomy', whereas they had significantly lower perceptions of

〈Table 3〉 Perceptions of Nursing: Nurses Compared with Other Groups

Item	Group	N	%	Mean	t
Work skill	Nurse	133	93.0	3.96	
	Others	339	76.9	3.48	7.03**
	Total	427	80.8	3.61	
Work Attitude	Nurse	137	95.8	3.76	
	Others	421	95.5	2.89	10.89**
	Total	558	95.5	3.10	
Work Knowledge	Nurse	137	85.8	3.43	
	Others	388	88.0	3.13	4.47**
	Total	525	89.0	3.21	
Work Condition	Nurse	133	93.0	2.40	
	Others	300	68.0	2.81	-4.74**
	Total	433	74.1	2.68	
Social Recognition	Nurse	139	97.2	3.27	
	Others	140	31.7	3.35	-3.71**
	Total	279	47.8	3.47	
Social Requirement	Nurse	135	94.4	3.72	
	Others	399	90.5	3.61	1.59
	Total	534	91.4	3.64	
Education	Nurse	139	97.2	2.65	
	Others	339	76.9	2.49	2.39**
	Total	478	81.8	2.54	
Job Consciousness	Nurse	138	96.5	3.36	
	Others	381	86.4	3.37	-.19
	Total	519	88.9	3.37	
Ethical Consciousness	Nurse	139	97.2	3.21	
	Others	372	84.4	2.77	8.79**
	Total	511	87.5	2.81	
Autonomy	Nurse	139	97.2	3.21	
	Others	372	84.4	2.77	2.09**
	Total	511	87.5	2.81	
Activities for Organization	Nurse	132	92.3	2.49	
	Others	214	48.5	2.78	-3.01
	Total	346	59.2	2.67	
Total	Nurse	138	96.5	3.05	
	Others	328	74.4	2.95	1.27
	Total	466	79.8	2.98	

*p< .05, **p< .01

themselves than the other groups regarding 'activities for nursing organization', 'work condition' and 'social recognition'.

V. Discussion

In general, These findings indicate that nurses perceived positively regarding 'work skill', 'work attitude', 'social requirement', and 'ethical consciousness', whereas they perceived negatively regarding 'work condition' and 'activities for nursing organizations'. The results of this study are consistent with that of Kim(1996), who found that 62% of the nurses perceived themselves to be working hard enough.

Additionally, these results are similar to those of Song(1994), who found that nurses generally evaluated themselves higher than other groups, but the others did not. The results of this study also support those of Park and Park (1995), who found that the Korean nurses were highly dissatisfied with their low salary, low social welfare, and poor work conditions.

Regarding autonomy, health care providers, such as, physicians, pharmacists, and nurse aids perceived nurses positively, while non health care providers, such as, hospital personnel, public administrators, politicians, and the public perceived nurses negatively.

This finding suggests that nursing should make an effort to build a positive image for health care providers as well as non health care providers. Additionally, this study showed that physicians had a higher perceptions of nurses than the other groups. Much research focused on physician-nurse conflict and stressed collaboration between the two professions (Hammond, Bandak & Williams, 1999).

This study, however, showed that the physicians perceived nursing as a profession positively. These findings will lay new ground for collaboration between physicians and nurses.

Overall most of the groups perceived 'activities for nursing organizations' negatively. One of the nursing organization, Korean Nurses Organization (KNA), is founded for nurses' benefit primarily. Therefore, active advertisement for KNA will be needed. For example, Korean Medical

Association (KMA) has great influence on health policy using political, organizational, and economic power.

As the largest group at hospitals in Korea, nurse aids make up 31.2% of health care providers working in hospitals and were supported by KMA (Public Newspaper, 1991). Therefore, KNA needs to maintain a good relationship with other professional organizations, for example, KMA, Korean Pharmacists Association (KPA), and Korean Nurse Aids Association (KNAA) in order to enhance positive image.

Overall hospital personnel's perceptions of nurses was the least negative, followed by politicians. The publics had the lowest perceptions of nurses regarding 'nursing education'. Although nursing care is crucial to the welfare of most patients, the impact of nursing care is nearly invisible. Therefore, nurses must develop good strategies for promoting nursing as a profession (e.g., education, credentialing, etc) to hospital personnel as well as the politicians and the general public. Additionally, nurses need to be sensitive to what the publics' needs are as future clients, although the public does not participate in policy making.

VI. Implications

This study has significant implications for nurses as they seek to improve their perceptions to other groups. Nurses may find that they have strategies to improve others perceptions of them. What those strategies are yet to be discovered. Further, nurses may find that they are able to establish more mutually supportive relationships with the health care providers and non health care providers, if necessary changes are made.

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-Abstract-

주요개념 : 간호 전문직, 인식

간호전문직에 대한 인식

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연구목적 : 전문직으로서 간호사에 대한 인식을 집단별로 파악하고 이들에 대한 인식을 비교한다.

연구방법 : 설문지를 이용한 비교조사연구로서 조사대상은 간호사, 간호학교수, 의사, 약사, 간호조무사, 병원행정직원, 행정관료, 정당활동가, 일반시민 등을 포함한 총 584명이었으며, 설문지는 12개 하부항목으로 범주화된 36개 문항으로 구성되었다.

연구결과 : 간호사에 대한 인식은 의사가 가장 긍정적이었으며, 병원직원이 가장 부정적이었다. 모든 집단에서 가장 긍정적인 인식을 갖고 있는 항목은 '사회적 요구'였으며, 그 다음은 '직무기술', '사회적 인식' 등의 순으로 나타났다. 가장 부정적인 것은 '간호교육'이었고, 그 다음은 '간호조직체 활동', '직무환경' 순으로 나타났다.

결론 : 본 연구를 기초로 하여 간호사들은 다른 집단들을 대상으로 전문직으로서의 간호사에 대한 인식을 높이기 위한 전략을 마련하여야 한다.

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