

Nurses' Images of the Nursing Profession and Their Caring Behaviors*

Abstract

Background: It is important for good quality nursing care that nurses display nursing care at a good level. It is known that nurses' caring behaviors are influenced by society's image of nursing. However, it is not known how the perception of the nursing profession among nurses themselves affects their caring behaviors.

Aim: This study was conducted with the aim of assessing nurses' images of the nursing profession and their caring behaviors and determining the correlation between them.

Methods: This descriptive and correlational study was conducted with 98 nurses working at a university hospital. A Questionnaire Form, the Caring Behaviors Inventory-24, and the Image of the Nursing Profession Scale were used to collect data. Continuous variables were expressed with mean \pm standard deviation and categorical variables with numerical values and percentages. The Mann-Whitney *U* test, the Kruskal-Wallis test, and Spearman's correlation analysis were used in the evaluation of the data.

Results: It was found that 65.3% of the nurses had a good image perception of the nursing profession. According to the care behaviors scale, they had the highest scores on the sub-scale of knowledge and skills (5.46 ± 0.55) and the lowest on connectedness (4.88 ± 0.75). The assurance, respectfulness, and caring behavior total scores of those who chose the profession willingly were found to be higher ($P < .05$). It was determined that there was a significant positive correlation between their perceptions of the image of the nursing profession and the caring behavior total and its sub-scales ($P < .05$).

Conclusion: In the current study, the nurses had a good perception of the image of the nursing profession and that their caring behavior levels were high. In addition, as their professional image perception scores rose, their caring behaviors perception scores also rose.

Keywords: Nurse, nursing care, image, care, behavior

Sevda Efil¹ , Selin Balaban Şahin² ,
Zeynep Yariş¹ 

¹Department of Medical Nursing, Çanakkale Onsekiz Mart University Faculty of Health Sciences, Çanakkale, Turkey

²Department of Nursing, Çanakkale Onsekiz Mart University Faculty of Health Sciences, Çanakkale, Turkey

Introduction

In order to meet the increasingly complex needs of health care, it is important to provide good quality health service.¹ For a successful health service, the importance of effective and reliable care is an undeniable reality.² Nurses are responsible for the quality of nursing care.³ In this regard, nursing care is important in reducing the burden which illness creates. Therefore, the factors that affect nursing care, which has an important place in the provision of health care, should be assessed. In the literature, it is reported that many factors affect nursing care, such as nurses' professional and individual characteristics (age, professional experience, education, knowledge and skills, attitude to care, etc.) relating to the patient,⁴ health policies, and institutional characteristics (working conditions, etc.)⁵⁻⁷ In particular, it is known that the comparison between the number of patients per nurse and the practice of good quality nursing care and positive care outcomes is important.⁷ The professional values which nurses hold also affect the quality of care.⁸ It has also been stated in various studies that willingness in choosing the profession, professional satisfaction,^{4,6} and the view of society of the nursing profession not only affect the development of the nursing profession but also affect care.⁴

It has been stated in studies that a positive image of the nursing profession is an important factor in choosing nursing as a profession, remaining in nursing, gaining professional status and power, making a career, or recommending it as a career.^{9,10} For this reason, one of the many difficulties that affect nursing care is a negative image of nursing.¹¹ The image of nursing is determined by how nurses themselves and society perceive nursing.¹⁰ Also, the assignment of social resources is related to the quality of the provision of

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Corresponding author: Sevda Efil
E-mail: sevda_efil@hotmail.com

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financing for nursing education, research, practice, and nurses' working conditions.¹² The way nurses communicate, their clothing, their professional and outside-work behavior, their professional identities, the fact that nursing is seen as a woman's profession, and the way the profession is reflected in the written and visual media all affect the image of nursing.^{11,13,14} Apart from this, the inadequate number of nurses, poor working conditions, and society's negative view of nursing damage the image of nursing.¹⁵

Care, which is the basic role of nursing practice, is expressed by nursing actions and behaviors.¹⁶ Professional image is also very important because it affects the attitude to work and behavior of members of the profession. Therefore, as care behaviors displayed may have a positive or negative effect on professional image, perceived professional image may also affect care behaviors. It has been shown in the literature that nurses' care behaviors are positive: they score the highest in the sub-scale of knowledge and skills and the lowest in connectedness.¹⁶⁻²⁰ In studies evaluating nurses' images of the nursing profession, it is found to generally have a negative professional image perception.^{9,21} A limited number of studies have found that nurses have a professional image perception at a medium²² or high¹² level. It is strongly emphasized in the literature that professional image affects nurses' professional attitudes and behaviors.^{9,10,13} At the same time, it is reported that society's view of the nursing profession is mostly negative and that this negatively affects nursing care.¹⁰ One of the factors affecting efforts to improve care quality is nurses' images of their profession. It is accepted that nurses who have a positive professional image will also have a positive effect on society's view of the nursing profession.¹⁵ At the same time, it is important in the provision of good quality health care that caring behavior in nurses should be at a good level. For this reason, the relationship between the professional image perceived by nurses and their caring behaviors should be determined. At the same time, a positive image perception of the nursing profession may also have a positive effect on choosing the profession.^{12,21,22} Also, no study was found in the literature simultaneously examining the relationship between nurses' image perceptions of the nursing profession and their caring behaviors. Therefore, it was thought important to assess the effect of willingness in the choice of profession on professional image and caring behaviors.

Aim of the study

This study was conducted with the aim of assessing nurses' images of the nursing profession and their caring behaviors and examining the correlation between them.

Research Questions

- What are nurses' image perceptions of the nursing profession and their caring behaviors?
- What are nurses' images of the profession and caring behaviors according to their willingness in their choice of profession?
- Is there a correlation between nurses' professional images and their caring behaviors?

Materials and Methods

Type of research

This was a descriptive and correlational study.

Population and Sample of the Research

The population of the research was all of the nurses working in the wards (intensive care, internal medicine, and surgical services) of a government hospital (N=130), and the 98 nurses who met the criteria for inclusion in the study and agreed to participate in the study on the dates when the research was conducted were included in the sample. Nurses were included in the research who were actively working as nurses in one of the following units: internal medicine services (n=42, internal medicine, gastroenterology, oncology, infection, cardiology, thoracic, neurology, pediatric, physiotherapy, and psychiatry), surgical services (n=30, surgery, maternity, cardiovascular surgery, ear, nose and throat, eye, orthopedic, organ transplant), and intensive care units (n=26, anesthesia and reanimation, coronary, neonatal). Nurses who on the date when the research was conducted were working in the outpatients' department (such as the diabetes department, blood donation unit, or breathing function test unit) or in emergency or who were not providing care were excluded from the research.

Data Collection

Before collecting data, the researchers explained to the nurses the aim of the research, its content, what it covered, and its duration. Those nurses who agreed voluntarily to participate in the study were given the data collection instruments. The nurses were asked to answer the questions in the data collection instruments in the way that they thought suitable and to answer all the questions. The research data were collected between February 21 and March 1, 2019. The nurses completed the forms independently of the researchers at a time which was convenient for them. The researchers collected the forms completed by the nurses during the week between 8.30 AM and 8.30 PM. It took approximately 20 minutes for each participant to complete the forms.

Data Collection Instruments

A questionnaire form, the Caring Behaviors Inventory-24 (CBI-24), and the Image of the Nursing Profession Scale were used to collect data.

The questionnaire form had 6 questions on sociodemographic and other descriptive characteristics such as age, gender, education, professional experience, and place of work.

The Caring Behaviors Inventory-24 was developed by Wu et al²³ to evaluate the nursing care process. Turkish validity and reliability were tested by Kurşun et al.²⁴ The scale consists of 24 items in 4 sub-scales: assurance (8 items: 16, 17, 18, 20, 21, 22, 23, and 24), knowledge and skill (5 items: 9, 10, 11, 12, and 15), respectfulness (6 items: 1, 3, 5, 6, 13, and 19), and connectedness (5 items: 2, 4, 7, 8, and 14). A 6-point Likert-type scale was used for the answers: 1=never, 2=hardly ever, 3=sometimes, 4=usually, 5=most of the time, 6=always. The scores of all the items were added together and divided by 24, giving a total score on a scale of between 1 and 6. In each sub-scale, the scores of the items were added together and divided by the number of items, giving a score of 1-6 for each sub-scale. Higher scores on the sub-scales and the scale total were accepted as showing higher levels of nurses' perception of care quality. The Cronbach alpha coefficient for the scale total was found to be 0.96 with the nurses.²⁴ In the present study, the Cronbach alpha coefficient was 0.96.

The Image of the Nursing Profession Scale was developed by Dost and Bahçecik¹⁵ to determine nurses' professional image perceptions. The scale is of Likert type, ranging from 5 "I completely agree" to 1 "I absolutely disagree." The answers to negative statements on the scale are scored in reverse, from 1 "I completely agree" to 5 "I absolutely disagree." The negative items are numbers 8, 14, 15, 17, 18, 20, 21, 22, 23, 24, 25, 26, 28, 29, and 31. A higher score on the scale indicates a more positive professional image perception by the nurses. Scores that can be obtained on the scale vary between 42 and 210. A score of 42-75 is interpreted as having a very weak image perception, 76-109 as weak, 110-143 as medium, 144-177 as good, and 178-210 as having a very good image perception. The Cronbach alpha coefficient of the scale was determined as 0.88.¹⁵ In the present study, the Cronbach alpha coefficient was 0.82.

Data Analysis

The program package Statistical Package for Social Science 20.0 was used to evaluate the data obtained in the study. Descriptive statistics (frequencies, percentages, central tendency, and distribution measurements) were used in the analysis of the data. When the data conformed to normal distribution, it was examined with the Kolmogorov-Smirnov test, and when it did not show normal distribution, non-parametric tests the Mann-Whitney *U* test and the Kruskal-Wallis *H* test were used. The correlation between the image of the nursing profession and caring behaviors was determined by the Spearman correlation coefficient. In interpreting the results, a significance level of .05 was used, and when *P* < .05, the difference was taken to be significant.

Ethical Aspect of the Research

Institutional permission was obtained from the management of the university hospital where the research was conducted. Written permission was obtained by e-mail from the researchers to use the scales in the collection of data. Permission number 2011-KAEK-27/2019-E.1900003127 dated February 20, 2019, was obtained from the Clinical

Research Ethics Committee of Çanakkale Onsekiz Mart University. Oral and written approval was obtained from the nurses who agreed to participate in the research.

Results

Examining the nurses' sociodemographic characteristics, it was seen that their median age was 28.48 ± 6.05 years, 87.8% were female, 57.1% were university graduates, 54.1% were married, 76.5% had chosen the nursing profession willingly, and their mean duration of working was 86 ± 71 months (Table 1).

The nurses' mean score on the total Caring Behaviors Inventory was found to be 5.17 ± 0.59 , and the highest scores were on knowledge and skills (5.46 ± 0.55) and the lowest on connectedness (4.88 ± 0.75). It was found that the nurses' mean score on the image of the nursing profession scale was 147.20 ± 10.21 and that 65.3% of the nurses had a good perception of the image of their profession (Table 2).

The assurance (5.32 ± 0.60 , *P* = .022) and respectfulness (5.13 ± 0.67 , *P* = .048) subscale scores and the total score (5.23 ± 0.57 , *P* = .043) on the Caring Behaviors Inventory of those who had chosen the profession willingly were found to be significantly high. It was seen that there was no significant variation in the scores of perceptions of image of the nursing profession in those who had chosen the profession willingly (*P* > .05) (Table 3).

A significant positive correlation was found between the nurses' perception of the image of the nursing profession and the Caring Behaviors Inventory total score ($r=0.411$, *P* < .001), assurance ($r=0.338$, *P* < .001), knowledge and skills ($r=.397$, *P* < .001), respectfulness ($r=.347$, *P* < .001), and connectedness ($r=0.425$, *P* < .001) (Table 4).

Discussion

Nurses with professional knowledge and skill are an important force in the provision of a good quality health care service.²⁵ A positive

		Mean ± SD	Min-Max
Age		28.48 ± 6.05	20-42
Total nursing profession experience (months)		86 ± 71	1-312
		n	%
Gender	Female	86	87.8
	Male	12	12.2
Education level	Health vocational high school	24	24.5
	Ordinary degree	12	12.2
	Bachelor's degree	56	57.1
	Master's	6	6.1
Marital status	Married	53	54.1
	Single	45	45.9
Willingness for the nursing profession	Yes	75	76.5
	No	23	23.5

Table 2. Nurses' Scores on Caring Behaviors Inventory and Image of the Nursing Profession Scale (n=98)

	Mean \pm SD	Median (Min-Max)
Caring Behaviors Inventory		
Assurance	5.25 \pm 0.62	5.31 (3.63-6.00)
Knowledge and skill	5.46 \pm 0.55	5.60 (3.80-6.00)
Respectfulness	5.06 \pm 0.68	5.17 (3.17-6.00)
Connectedness	4.88 \pm 0.75	5.00 (2.80-6.00)
Total	5.17 \pm 0.59	5.21 (3.67-6.00)
Image of the Nursing Profession Scale		
Total (score)	147.20 \pm 10.21	147.00 (107.00-168.00)
	n	%
Weak image perception	1	1.0
Medium image perception	33	33.7
Good image perception	64	65.3
Total (n)	98	100.0

image of the profession on the part of nurses is reflected positively in their care behaviors. This has a positive effect on the quality of nursing care provided.^{10,12,15} However, it has been emphasized that in order to improve nurses' work performance, it is important not only for the public but for nurses to have a positive image of the profession.¹² The results obtained from this study give an idea of nurses' care behaviors and images of the profession and show the correlation between nurses' images of the profession and their caring behaviors.

An important reason for the generally falling or low numbers of nurses is known to be the negative image of the profession. For this reason, the image of nursing has mostly been a source of concern for nurses.^{10,14} In the past and today, a sufficient number of nurses of good quality is important in providing patient care of high quality.²⁶ A good image of nursing will not only increase the number of nurses but will also have a positive effect on the provision of nursing services.^{11,12,21,22} In this study, it was seen that many nurses had a good image perception. Similarly, in a study by Sarı,¹² it was found that nurses had a professional image at a good level. In a study by Sezer et al.²² it was determined that nurses had a professional image at a medium level. On the contrary, Aşci²¹ found a low-level professional image in nurses. Also, in another study, it was seen that nurses had a negative image of their profession.⁹ The unhappiness of nurses who have a negative image is negatively reflected in their caring behaviors, affecting their work performance.^{13,16,26} Therefore, it is thought

Table 3. Comparison of Nurses' Willingness in Choosing the Nursing Profession According to Caring Behaviors Inventory and Image of the Nursing Profession Scale (n=98)

			Willingness in Choosing the Nursing Profession		Mann-Whitney <i>U</i> test	
			Mean \pm SD	Median (Min-Max)	<i>z</i>	<i>P</i>
Caring Behaviors Inventory	Assurance	Yes	5.32 \pm 0.60	5.38 (3.63-6.00)	-2.29	.022*
		No	5.02 \pm 0.63	4.88 (3.88-6.00)		
		Total	5.25 \pm 0.62	5.31 (3.63-6.00)		
	Knowledge and skill	Yes	5.47 \pm 0.54	5.60 (3.80-6.00)	-0.453	.651
		No	5.42 \pm 0.57	5.60 (4.00-6.00)		
		Total	5.46 \pm 0.55	5.60 (3.80-6.00)		
	Respectfulness	Yes	5.13 \pm 0.67	5.17 (3.17-6.00)	-1.98	.048*
		No	4.83 \pm 0.69	4.83 (3.33-5.83)		
		Total	5.06 \pm 0.68	5.17 (3.17-6.00)		
	Connectedness	Yes	4.97 \pm 0.70	5.00 (3.20-6.00)	-1.65	.099
		No	4.60 \pm 0.87	4.60 (2.80-6.00)		
		Total	4.88 \pm 0.75	5.00 (2.80-6.00)		
Total	Yes	5.23 \pm 0.57	5.25 (3.67-6.00)	-2.1	.043*	
	No	4.97 \pm 0.59	5.04 (3.92-5.92)			
	Total	5.17 \pm 0.59	5.21 (3.67-6.00)			
Image of the Nursing Profession Scale	Yes	147.52 \pm 10.68	147.00 (107.00-168.00)	-0.637	.524	
	No	146.17 \pm 8.66	147.00 (130.00-161.00)			
	Total	147.20 \pm 10.21	147.00 (107.00-168.00)			

Significant difference at $P < .05$; *Value in bold: significant.

		Caring Behaviors Inventory				
		Assurance	Knowledge and skill	Respectfulness	Connectedness	Total
Image of the Nursing Profession Scale	<i>r</i>	.338	.397	.347	.425	.411
	<i>P</i>	.001*	.000*	.000*	.000*	.000*

r: Spearman's correlation coefficient; *Value in bold: significant.

necessary to concentrate on achieving a positive image of the profession in nurses.

The quality of nursing care is related to caring behaviors.²⁷ Therefore, the caring behaviors displayed are an important part of nursing practices.¹⁰ It was found in the study that nurses had high perceptions of caring behaviors. When the sub-scales of caring behaviors were examined, it was determined that the nurses had the highest scores on knowledge and skills and the lowest scores on connectedness. Similarly, it was found in a study by Erenoğlu et al²⁸ that nurses had the highest scores on knowledge and skills and the lowest scores on the sub-scale of connectedness. Other studies have also found that the perception of care quality was positive and that the highest scores were from the sub-scale of knowledge and skills, and the lowest were from connectedness.^{18,20,22} The connectedness sub-scale of the scale has such headings as educating and informing the patient, planning nursing care together with the patient, and devoting time to the patient. In the results of other studies,¹⁷⁻²⁰ as in this study, the connectedness sub-scale having the lowest score may be the reason for the inadequate number of nurses and the reason for the inability to fulfill such responsibilities as educating and informing patients. Nurses who have knowledge and skills relating to their profession and who show this with their professional attitude and behaviors are able to display a professional approach. This is reflected positively in caring behaviors and is important in improving and developing health, in providing health care services and thus improving health outcomes.^{7,10,13,21} At the same time, it is reflected positively in the image of nursing.^{12,21,22} For this reason, it is a welcome result that caring behaviors were at a high level in the study. The high scores on the sub-scale of knowledge and skills may arise from the large proportion of nurses educated at the university degree level.

It is known that one of the factors in choosing the nursing profession is a positive image of nursing.⁹ At the same time, it is accepted that aside from working conditions, willing choice of the nursing profession affects nurses' caring behaviors, and this is reflected in the quality of care.¹⁷ It was found in the study that in nurses who had chosen their profession willingly, scores on respectfulness and total caring behaviors were significantly high. This shows that caring behaviors were positively affected in those who had chosen their profession willingly. It was seen that when we examine the effect of willingness in the choice of profession on scores for image of the profession, choosing the profession willingly did not affect image perception. In nurses and in society, the image of nursing affects a person's perceptions and expectations of the profession.²⁶ Along with this, nurses with caring behavior and image perception at a high level take an active role in the provision of a good quality healthcare service.^{19,26,28} A significant positive correlation was found in the study between the nurses' image perceptions of the nursing profession and caring

behaviors. For this reason, it is important that nurses should have a positive image of their profession.

Limitations of the Research

Because this research was conducted with nurses working in the wards of one single university hospital, one limitation of the research is that the conclusions cannot be generalized. Also, the results obtained are limited because the answers that the nurses included in the research gave depended on self-reporting.

Conclusion

It was found in the study that most nurses had a good image of their profession and that according to the caring behavior scale, their levels of perception of care quality were high. A positive correlation was found between nurses' images and their caring behaviors. From these results, it can be said that activities by nurses which will ensure the images of the nursing profession be positive will be positively reflected in caring behaviors and will increase the quality of care. In this regard, it is thought that efforts to improve the image of the nursing profession are important not only among the general public, but it is also important to take steps to improve the professional image of nurses. In education given to nurses and nursing students, the image of nursing and its importance should be emphasized. Studies paying attention to variables that could affect nurses' image of the profession can help to implement solutions and to share conclusions.

Ethics Committee Approval: Ethics committee approval was received for this study from Çanakkale Onsekiz Mart University (February 20, 2019, 2011-KAEK-27/2019-E.1900003127).

Informed Consent: Written and verbal informed consent was obtained from all participants who participated in this study.

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References

1. T.C. Sağlık Bakanlığı Türkiye Halk Sağlığı Kurumu Kronik Hastalıklar, Yaşlı Sağlığı ve Engelliler Daire Başkanlığı, Türkiye Bulaşıcı Olmayan Hastalıklar Çok Paydaşlı Eylem Planı 2017-2025. Available at: http://www.euro.who.int/_data/assets/pdf_file/0006/346695/BOH_TR.pdf?ua=1.

2. Cerit B, Coşkun S. Hasta ve hemşirelerin hemşirelik bakım kalitesine ilişkin algıları. *Turk J Clin Lab*. 2018;9(2):103-109. [CrossRef]
3. Hemşirelik Yönetmeliği. Available at: <http://www.turkhemsirelerdernegi.org.tr/tr/yasa-ve-yonetmelikler.aspx>. [8 Mart 2010].
4. Gül Ş. Bakım kavramı ışığında hemşirelik bakımı ve etkileyen faktörler. *Acu Sağlık Bil Derg*. 2019;10(2):129-134. [CrossRef]
5. Zencir G, Eşer İ. Hemşirelikte yeni bir kavram: karşılanamayan hemşirelik bakımı. *Ege HFD*. 2015;31(1):83-94. Available at: <https://dergipark.org.tr/tr/download/article-file/825165>.
6. Griffiths P, Recio-Saucedo A, Dall'Ora C, et al. The association between nurse staffing and omissions in nursing care: a systematic review. *J Adv Nurs*. 2018;74(7):1474-1487. [CrossRef]
7. Aiken LH, Sloane DM, Bruyneel L, et al. Nurse staffing and education and hospital mortality in European countries: a retrospective observational study. *Lancet*. 2014;383(9931):1824-1830. [CrossRef]
8. Can Ş, Acaroğlu R. Hemşirelerin mesleki değerlerinin bireyselleştirilmiş bakım algıları ile ilişkisi. *FNHemDerg*. 2015;23(1):32-40. [CrossRef]
9. Emeghebo L. The image of nursing as perceived by nurses. *Nurse Educ Today*. 2012;32(6):e49-e53. [CrossRef]
10. ten Hoeve Y, Jansen G, Roodbol P. The nursing profession: public image, self-concept and professional identity. A discussion paper. *J Adv Nurs*. 2014;70(2):295-309. [CrossRef]
11. Rezaei-Adaryani M, Salsali M, Mohammadi E. Nursing image: an evolutionary concept analysis. *Contemp Nurse*. 2012;43(1):81-89. [CrossRef]
12. Sarı M. *Hemşirelerin mesleğine yönelik imaj ve mesleğe bağlılık algısı* [Master's thesis]. İstanbul: Marmara Üniversitesi Sağlık Bilimleri Enstitüsü; 2019.
13. Sabancıoğulları S, Doğan S. Profesyonel kimliğin dışı yansıyan boyutu: profesyonel imaj ve hemşirelik. *Head*. 2011;8(2):28-37. Available at: https://je-r-nursing.org/Content/files/KUHEAD_8_2_VI.pdf.
14. Kartal H, Kantek F. Yönetici hemşirelerde hemşirelik imajı ölçeğinin psikometrik özelliklerinin incelenmesi. *Bakirkoy*. 2018;14:190-197. [CrossRef]
15. Dost A, Bahçecik AN. Hemşirelik mesleğine yönelik imaj ölçeği geliştirilmesi. *Jaren*. 2015;1(2):51-59. [CrossRef]
16. Papastavrou E, Karlou C, Tsangari H, et al. Cross-cultural validation and psychometric properties of the Greek version of the Caring Behaviors Inventory: a methodological study. *J Eval Clin Pract*. 2011;17(3):435-443. [CrossRef]
17. Aydın H. *Acil serviste hasta ve hemşirelerin bakım davranışlarının değerlendirilmesi* [Master's thesis]. İstanbul: Marmara Üniversitesi Sağlık Bilimleri Enstitüsü; 2013.
18. Karlou C, Papathanassoglou E, Patiraki E. Caring behaviours in cancer care in Greece. Comparison of patients', their caregivers' and nurses' perceptions. *Eur J Oncol Nurs*. 2015;19(3):244-250. [CrossRef]
19. Kurşun Ş. *Genel cerrahi servisinde hasta ve hemşireler tarafından hemşirelik bakım kalitesinin algılanması* [Master's thesis]. İstanbul: İstanbul Üniversitesi Sağlık Bilimleri Enstitüsü; 2010.
20. Yürün Y. *Hastanede çalışan hemşirelerin hasta bakım davranışlarının belirlenmesi* [Master's thesis]. KKTC, Yakın Doğu Üniversitesi Sağlık Bilimleri Enstitüsü; 2015.
21. Aşçı B. *Cerrahi servislerinde çalışan hemşirelerin hemşirelik imajı ve etkileyen faktörler* [Master's thesis]. İstanbul: Okan Üniversitesi Sağlık Bilimleri Enstitüsü; 2017.
22. Sezer TA, Esenay Fİ, Korkmaz G. Çocuk hemşirelerinin mesleki imajları: profesyonel mi, geleneksel mi? *HEMAR-G*. 2017;19(3):45-54. Available at: [http://hemarge.org.tr/ckfinder/userfiles/files/2017/vol19sayi3/\(5\)%20.pdf](http://hemarge.org.tr/ckfinder/userfiles/files/2017/vol19sayi3/(5)%20.pdf).
23. Wu Y, Larrabee JH, Putman HP. Caring behaviors inventory: A reduction of the 42-item instrument. *Nurs Res*. 2006;55(1):18-25. [CrossRef]
24. Kurşun Ş, Kanan N. Bakım davranışları ölçeği-24'ün Türkçe formunun geçerlik ve güvenirlik çalışması. *Anadolu Hemşirelik Sağlık Bilimleri Derg*. 2012;15(4):229-235. Available at: <https://dergipark.org.tr/tr/download/article-file/29608>.
25. Izumi S. Quality improvement in nursing: administrative mandate or professional responsibility? *Nurs Forum*. 2012;47(4):260-267. [CrossRef]
26. Price SL, McGillis Hall L. The history of nurse imagery and the implications for recruitment: a discussion paper. *J Adv Nurs*. 2014;70(7):1502-1509. [CrossRef]
27. Kocatepe V, Uğur E, Karabacak Ü. Yoğun bakım ve palyatif bakım ünitelerinde çalışan hemşirelerin sürekli öfke ve öfke ifade tarzları ile bakım davranışları arasındaki ilişki. *FN Hem Dergisi*. 2017;25(1):13-20. Available at: <https://dergipark.org.tr/tr/download/article-file/332712>.
28. Erenoğlu R, Can R, Tambağ H. Hemşirelik bakım davranışları ve bakım davranışları ile ilgili faktörler; Doğumevi örneği. *Sağlık Toplum*. 2019;29(1):79-88. Available at: <https://ssyv.org.tr/wp-content/uploads/2019/06/9-Hem%C5%9Firelik-Bak%C4%B1m-Davran%C4%B1%C5%9Flar%C4%B1-ve-Bak%C4%B1m-Davran%C4%B1%C5%9Flar%C4%B1-%C4%B0le-%C4%B0lgili-Fakt%C3%B6rlere-Do%C4%9Fumevi-%C3%96rne%C4%9Fi.pdf>.