



International Congress
on Nursing
5th
International
Congress
on Nursing

AAB University
Pristina, Kosovo
24 - 26 September
2021

ABSTRACTS
BOOKS

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**5th INTERNATIONAL CONGRESS on
NURSING
(ICON-2021)**

ONLINE CONFERENCE

**AAB University
Pristina, Kosovo
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ABSTRACTS BOOKS

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KEYNOTES



Prof. Dr. Serap ÜNSAR
Trakya University, Turkey

Keynote Title: *“Covid-19 and Chronic Diseases”*

Abstract: will be announced...

Bio: will be announced....



Prof. Dr. Gülbeyaz Can
Istanbul University, Turkey

Keynote Title: *“Covid-19 and Cancer”*

Abstract: will be announced....

Bio: will be announced....



Prof. Dr. Kobus Maree

University of Pretoria

Faculty of Education

Keynote Title: “Facilitating autobiographicity to promote gifted and talented learners' self-designing and career construction”

Abstract: Connecting conscious knowledge with subconscious insights

An exponential increase in the rate of change forces people to deal with repeated transitions at all levels of their existence. These transitions are often difficult to handle and give rise to feelings of vulnerability and concern. Events such as the recent economic meltdown, major changes in the global economy, and the impact of the Covid-19 pandemic in particular, have given rise to downsizing, retrenchments, rising unemployment, as well as insecurity and uncertainty at all levels – prompting spiralling unemployment rates globally.

The developments delineated above call for a strong response from theoreticians, researchers, practitioners, and policy makers. This paper explicates the theory and conceptual framework underlying an innovative, integrative (qualitative+quantitative) approach to (career) counselling for gifted and talented learners. This approach aims to help gifted learners connect what they know about themselves consciously with what they are aware about themselves sub-consciously.

The paper explains that, globally, millions of gifted and talented learners have never been given a fair chance in life to design themselves and choose and construct their careers meaningfully. These learners (from across the diversity spectrum) may have made substantial contributions to humankind. The world may have lost the likes of a Mother Teresa, a Mark Savickas, an Albert Einstein, a Sigmund Freud, a Nelson Mandela, a Kofi Annan, or so many other luminaries.

Lastly, this paper shows how learners’ ‘stories’ (information obtained from qualitative approaches) can be blended with their (test) ‘scores’ (information obtained from quantitative approaches (test ‘scores’)). Achieving this aim can help (career) counsellors identify giftedness and talent and help learners experience or rekindle a sense of meaning, hope, and purpose in their lives and contribute to positive transformation and societal advancement globally.

Brief bio: Prof. Kobus Maree (DEd (Career Counselling); PhD (Learning Facilitation in Mathematics); DPhil (Psychology)) is a full Professor in the Department of Educational Psychology at the University of Pretoria. Kobus is a member of the following core scientific committees: a. UNESCO Chair on Lifelong Guidance and Counseling, and b. the UNESCO University Network and Twinning (UNITWIN) Chair. In addition, he was elected as a member of the Board of Directors of the International Association of Applied Psychology (IAAP) Division 16) in 2018. Moreover, he accepted appointments as a Research Fellow at the University of the Free

State and as Professor Extraordinaire at the University of Stellenbosch and the University of Southern Queensland. Kobus has received multiple awards for his research. In 2014, he received the Psychological Society of South Africa's Award for Excellence in Science. He was awarded the Chancellor's Medal for Teaching and Learning from the University of Pretoria in 2010 and has been nominated successfully as an Exceptional Academic Achiever on four consecutive occasions. He has a B1 rating from the National Research Foundation. Kobus has authored or coauthored 90+ peerreviewed articles and 75 books/ book chapters since 2010. In the same period, he supervised 38 doctoral theses and Master's dissertations and read keynote papers at 25+ international conferences, and at 22+ national conferences. He has also presented invited workshops at conferences in 40+ countries on a) integrating qualitative and quantitative approaches in career counselling and b) the art and science of writing scholarly articles. Over the past seven years, he has spent a lot of time abroad as a visiting professor at various universities. He was awarded a fellowship of the IAAP in 2014 and received the Psychological Society of South Africa's Fellow Award in 2017.

ABSTRACTS

DETERMINING ATTENTION CONTROL LEVELS OF NURSING STUDENTS

Nida KIYICI, Ondokuz Mayıs University

Zeliha KOÇ, Ondokuz Mayıs University

Abstract

Objective: Attention can be defined as the power to concentrate the thought on a certain thing. This study was planned descriptively in order to determine the factors affecting the attention control levels of nursing students. **Method:** This research was carried out with the participation of 401 nursing students who were studying at the Faculty of Health Sciences of a university between 22.04.2021 and 29.04.2021 and who were willing to participate in the study. The data in the study were collected using a 19-question questionnaire that determines the sociodemographic characteristics of the nursing students and the Attention Control Scale. Attention Control Scale was developed by Derryberry and Reed (2001) and was adapted in Turkish by Akin et al. (2013), it is a one-dimensional scale consisting of 20 items. There are no reverse scored items in the scale. High scores on the scale indicate a high level of attention control. The questionnaire form and scale were administered after the approval of the ethics committee and the informed consent of the nursing students participating in the study. Percentage calculation, Kruskal Wallis test and Mann Whitney U test and Cronbach's Alpha coefficient were used to evaluate the data. **Findings:** With respect to the nursing students who participated in the research, it was determined that 69.1% were women and 30.9% were men, mothers of 43.6% and fathers of 29.4% were elementary school graduates, mothers of 90.8% were housewives, fathers of 24.7% were self-employed, 71.8% were born and grown up in nuclear families, 48.1% lived in a city center for a long time in terms of accommodation unit, 70.3% were staying at dormitories for the time being, 72.3% had a balance of income and expenses, 86.3% had social security, 65.1% preferred nursing voluntarily, 76.6% liked their profession, 35.2% considered to change the profession, 98.3% were not affiliated with professional associations, 77.6% did not follow Professional and occupational publications and the age average is 20.9 ± 1.8 . The median score of the Nursing Students Attention Control Scale was 47 (20-80) and the Cronbach's Alpha reliability coefficient was 0.630. It was determined that the highest score of the students on the Attention Control Scale items was related with the statement "It is very difficult for me to concentrate on a difficult task when there are voices around (2.8 ± 0.9)", and the lowest score was related with the statement "It is easy for me to read or write at the same time while talking on the phone (2.0 ± 0.9)". It was observed that the score of Attention Control Scale varied according to some characteristics of nursing students ($p < 0.05$). **Conclusion and Suggestions:** In this study, it was determined that the attention control scale scores of the nursing students were above medium and the scale scores differed according to some characteristics such as willingly choosing the profession, loving the profession, thinking about changing the profession. In line with the findings, it can be said that students' loving and willingness to choose their profession affects their attention control levels. In this direction, it is recommended to consider the preferences of individuals while making career choices in university entrance exams, and to use education methods that increase students' attention control levels while restructuring the nursing education curriculum.

KEYWORDS: Attention, Attention Control, Nursing, Student.

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FACTORS RELATED TO THE PERCEPTIONS OF NURSES ABOUT THE WORK ENVIRONMENT

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Abstract

Objective: It is extremely important that the care environments where health services are provided are suitable for protecting patient and employee safety and that they have the features that can provide targeted care. This study was planned descriptively in order to determine nurses' perceptions of the working environment and the factors affecting it.

Method: This study was conducted with the participation of 186 nurses who worked in a university hospital between 17.05.2021 and 24.05.2021 and agreed to participate in the study. The data in the study were collected using a questionnaire consisting of 21 questions that determine the sociodemographic and professional characteristics of the nurses and the Working Environment Scale. Working Environment Scale was developed by Blegen et al. (2004) and adapted to Turkish by Sezgin (2007). The Work Environment Scale consists of 26 items with 5 sub-dimensions: institutional quality management, physical resources, professional relations, staff fears and job satisfaction. Each statement in the scale is scored from 1 to 5. A minimum of 26 and a maximum of 130 points can be obtained on the scale. It is accepted that the higher the score obtained from the Working Environment Scale, the higher is the satisfaction with the working environment. The questionnaire form and scale were administered after the approval of the ethics committee and informed consent from the nurses participating in the study. Percentage calculation, One Way Analysis of Variance test, Kruskal Wallis test, Independent Sample T test, Mann Whitney U test and Cronbach's Alpha coefficient were used in the evaluation of the data.

Findings: It was determined that 81.7% of the nurses participating in the study were women, 18.3% were men, 72.6% were married, 46.2% had undergraduate degrees, 94.6% were born and grown up in nuclear family structure, 39.8% worked in surgical sciences, 92.5% worked as department nurses, 48.4% worked in shifts, 75.3% preferred the nursing profession voluntarily, 69.4% liked their profession, 60.2% were satisfied with the service they worked, 53.2% chose their department willingly and the age average is 35.74 ± 7.59 . The average score of the Nurses' Working Environment Scale was 94.31 ± 10.84 and the Cronbach's Alpha reliability coefficient was 0.692. Nurses' Working Environment Scale staff fear sub-dimension median score was 24.57(7-31), quality management sub-dimension median score was 19.67(7-26), professional relations sub-dimension median score was 13(6-16), physical resources sub-dimension the median score for the dimension was 8.67(3-12) and the median score for the job satisfaction sub-dimension was 17.67(5-26). In this study, Working Environment Scale scores were determined to differ according to certain socio-demographic and occupational characteristics such as the service that nurses work in ($F=2.849$, $p=0.025$), duty in the service ($t=3.113$, $p=0.002$), working year ($F=4.077$, $p=0.019$), working year in the service where the nurses worked ($F=7.347$, $P=0.001$), manner of work ($X^2=12,167$, $p=0,002$), the state of willingness to choose the profession ($t=2.736$, $p=0.007$), the state of liking the profession ($X^2=30,904$, $p=0,01$), satisfaction with the service they worked in ($F=17.490$, $p=0.001$), the average number of patients they gave daily care ($X^2=10,995$, $p=0,012$).

Conclusion and Suggestions: In this study, it was found that the level of satisfaction of nurses regarding their working environment was above medium. In line with the findings obtained, it is recommended to establish quality assurance systems in order to increase the satisfaction of nurses regarding the working environment, managers to consider patient / nurse ratios while planning manpower, and encourage employees to report undesirable events for patient and employee safety.

KEYWORDS: Perception, Work(ing), Work Environment, Nursing.

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DETERMINING THE STIGMATIZATION AND DISCRIMINATION TENDENCY OF UNIVERSITY ABOUT HIV / AIDS STUDENTS IN HEALTH-RELATED DEPARTMENTS

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Zeliha KOÇ, Ondokuz Mayıs University

Abstract

Objective: HIV / AIDS is an important public health problem in terms of complications and transmission risk. The perception that HIV / AIDS was mostly seen in homosexuals in the first periods of its emergence caused these individuals to be stigmatized. This study was planned to determine the stigmatization and discrimination tendencies of university students studying in health-related departments regarding HIV / AIDS.

Method: This research was carried out with the participation of 221 students studying at Vocational School of Health Services and Faculty of Health Sciences of a university between 17.05.2021 and 24.05.2021 and willing to participate in the research. In the study, data were collected using a 36-question questionnaire, which determines students' sociodemographic characteristics, knowledge and attitudes towards HIV/AIDS, and AIDS Knowledge Scale and AIDS Attitude Scale. AIDS Knowledge Scale was developed by Aydemir et al. (2018). The scale consists of 21 items. The high score obtained from the scale indicates the high level of AIDS related knowledge. AIDS Attitude Scale was developed by Aydemir et al. (2018). This scale consists of 17 Likert-type items. High score obtained from the scale represents a positive attitude. The questionnaire form and scales were administered after obtaining written consent from the relevant institution and informed consent from the students participating in the study. Percentage calculation, Kolmogorov Smirnov, Pearson Correlation coefficient, t test, ANOVA, Tukey test and Cronbach's Alpha coefficient were used to evaluate the data.

Findings: It was determined that among the students who participated in the study, 72.4% are women, 27.6% are men, mothers of 28.5% are elementary school graduates, fathers of 27.6% are high school graduates, mothers of 68.8% are housewives, fathers of 23.1% are retired, 66.1% were born and grown up in nuclear family structure, 40.3% have families based on democratic values, 41.6% lived in a city center for a long time in terms of accommodation unit, 60.2% were staying at dormitories for the time being, 48.9% had a balance of income and expenses, 91% do not suffer from health problems, 78.7% have not display stigmatizing and discriminatory attitude towards individuals diagnosed with HIV/AIDS and the age average is 21.7 ± 1.8 . AIDS Knowledge Scale mean score was 11.4 ± 3.4 , Cronbach's Alpha reliability coefficient was 0.718, AIDS Attitude Scale mean score was 55.3 ± 10.4 , Cronbach's Alpha reliability coefficient was 0.831. It was observed that the AIDS Knowledge and AIDS Attitude Scale scores differed according to some characteristics of the students ($p < 0.05$).

Conclusion and Suggestions: In this study, it was determined that the AIDS Knowledge Scale and AIDS Attitude Scale scores of the students were moderate and the scale scores differed according to some characteristics such as class, parental education level, father's occupation and family structure. In line with the findings, it can be concluded that the educational status of the students' parents affects AIDS related knowledge and attitude towards the disease. In this direction, it is recommended to use all kinds of educational tools on the subject in order to reduce stigmatization and develop positive attitudes among students.

KEYWORDS: HIV, AIDS, Stigmatization, Discrimination.

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IDENTIFICATION OF THE FACTORS AFFECTING THE STIGMATIZATION TENDENCIES OF UNIVERSITY STUDENTS IN HEALTH-RELATED DEPARTMENTS TOWARDS ALCOHOL AND SUBSTANCE USE

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Abstract

Objective: Stigmatization of alcohol and substance use is one of the grave and significant social problems in our country as in the whole world. With the increasing prevalence of alcohol and substance use, the framework of stigmatization is also expanding. This study was planned to determine the factors affecting the stigmatizing tendencies of university students studying in health-related departments towards alcohol and substance use.

Method: This research was carried out with the participation of 212 students who were willing to participate in the study between 22.04.2021 and 29.04.2021 at the Health Services Vocational School and Faculty of Health Sciences. The data in the study were collected by using a questionnaire consisting of 38 questions about the sociodemographic characteristics of the students and alcohol substance use, the Yedam Alcohol Addiction Stigmatization Scale and the Yedam Substance Addiction Stigmatization Scale. Yedam Alcohol Addiction Stigmatization Scale was developed by Ögel et al. (2019). The scale consists of 12 items. In this test which is designed with a score range between 0 and 36, the high score obtained from the scale indicates a high level of alcohol dependence stigmatization. Yedam Substance Addiction Stigmatization Scale was developed by Ögel et al. (2019). This scale consists of 12 items. In this test which is designed with a score range between 0 and 36, the high score obtained from the scale indicates a high level of substance addiction stigmatization. The questionnaire form and scales were administered after obtaining written permission from the relevant institution and informed consent from the students participating in the study. Percentage calculation, Kolmogorov Smirnov, Pearson Correlation coefficient, t test, ANOVA, Tukey test and Cronbach's Alpha coefficient were used to evaluate the data.

Results: It was determined that among the students who participated in the study, 76.9% are women, 23.1% are men, mothers of 39.2% are elementary school graduates, fathers of 30.2% are middle-high school graduates, mothers of 74.5% are housewives, fathers of 30.2% are blue collar workers, 74.5% were born and grown up in nuclear family structure, 31.1% have families based on democratic values, 39.6% lived in a city center for a long time in terms of accommodation unit, 65.1% were staying at dormitories for the time being, 48.6% had a balance of income and expenses, 89.6% do not suffer from health problems, 84% do not smoke, 86.3% do not drink alcohol, none of the students are diagnosed with substance use abuse and disorder, 97.2% have not stigmatized individuals who consume alcohol and the age average is 21.6 ± 1.6 . The mean score of the Yedam Alcohol Addiction Stigmatization Scale was 17.33 ± 5.69 , the Cronbach's Alpha reliability coefficient was 0.777, the Yedam Substance Addiction Stigmatization Scale mean score was 20.52 ± 5.01 , and the Cronbach's Alpha reliability coefficient was 0.721. It was observed that the scores of Yedam Alcohol Addiction Stigmatization Scale and Yedam Substance Addiction Stigmatization Scale differed according to some characteristics of the students ($p < 0.05$).

Conclusion and Suggestions: In this study, it was determined that the scores of the Yedam Alcohol Addiction Stigmatization Scale and the Yedam Substance Addiction Stigmatization Scale were moderate, and the scale scores differed according to some features such as age, school, mother's education level, father's education level, father's occupation and family structure. In line with the findings, it can be concluded that students' alcohol and cigarette use has an impact on their stigmatization levels. In this regard, it is recommended to organize training programs that increase the awareness of alcohol and substance addiction stigmatization during the education process for students studying in health-related departments.

KEYWORDS: Alcohol, Addiction, Stigmatization, Substance, Student

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DETERMINATION OF NURSING STUDENTS' ATTITUDES TOWARDS PREVENTING FALLS AND APPROACHES TO REPORTING INCIDENTS

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Abstract

Aim: This study was planned to determine nursing students' attitudes towards preventing falls and their approaches to reporting incidents. **Method:** This study has a descriptive and cross-sectional design. The study was carried out with the students studying in Nursing department at Health Sciences Faculty of a university between 22.04.2021 and 05.05.2021. In the study, sample was not chosen and it was aimed to reach the whole population. As a result of this, 220 students who volunteered to participate in the study were included in the study. Data collection process was started after ethics committee permission was taken. The data were collected by using "Student Descriptive Information Form" "Incident Reporting Scale (IRS)" and "Questionnaire Form to Determine Attitudes towards Preventing Falls (QDAPF)" prepared by the researchers. Percentage calculation, Kruskal Wallis test, Mann Whitney U test and Cronbach's Alpha coefficient were used to evaluate the data. **Results:** It was found that 76.8% of the nursing students in the study were female, 23.2% were male, the settlement where 38.6% lived the most was town, 62.3% lived with their families, 79.1% chose their profession willingly, 97.3% thought falls were preventable, 51.8% did not receive training about falls, 51.8% did not consider themselves competent in terms of preventing falls, 98.6% thought falls should be reported, 63.3% stated that reporting falls would harm healthcare professionals' careers. Mean age of the students was found as 21,18±2,16. In the study, total mean score of IRS was found as 27,65±3,71. It was found that "the intention to make internal reports" subscale had the highest mean score (17,078±2,935), while "being indifferent" subscale had the lowest mean score (2,982±1,702). Mean score of students from QDAPF was found as 87,51±4,89. No statistically significant association was found between IRS and QDAPF in the study ($p>0.01$). It was found that while the students' being single and being in their first year of study increased scores from IRS, the students in their second year of study and those who had been trained about falls had more positive attitudes towards preventing falls than the other students. **Conclusion:** In the study, it was found that the mean scores of nursing students' attitudes towards event reporting and prevention of falls were found to be high. It was also found that students' attitudes towards preventing falls and their approaches to incident reporting did not affect each other. Students who had received training about falls were found to have high attitudes towards preventing falls. Trainings given about the importance of preventing falls and incident reporting will contribute to increasing patient safety.

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THE EFFECTS OF NURSING STUDENTS' APPROACHES TO TEAM WORK ON THEIR ATTITUDES TOWARDS PATIENT SAFETY

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Zeliha KOÇ, Ondokuz Mayıs University

Abstract

Aim: This study was conducted to find out the effects of nursing students' approaches to team work on their attitudes towards patient safety. **Method:** The present study has a descriptive and cross-sectional design. The study was conducted with students studying in Nursing department at Health Sciences Faculty of a university between 22.04.2021 and 05.05.2021. Sample was not chosen in the study and it was aimed to reach the whole population. 212 students who volunteered to participate in the study were included in the study as a result of this. Data collection process was started after ethics committee permission was taken. The data were collected by using "Student Descriptive Information Form" "Attitude Scale for Teamwork (ASTW)" and "Questionnaire Form to Determine Nursing Students' Attitudes towards Patient Safety (QDAPS)" prepared by the researchers. Percentage calculation, Kruskal Wallis test, Mann Whitney U test and Cronbach's Alpha coefficient were used to evaluate the data. **Results:** It was found that 75% of the nursing students in the study were female, 25% were male, the settlement where 41% lived the most was province, 62.7% lived with their families, 71.7% loved their profession, 83% chose their profession willingly, 56.1% had received training about patient safety, 31.6% of those who had received training thought their training was sufficient, of the students who had received clinical training 17.5% faced medical errors during training and 33.6% of these students reported the cause of error as lack of communication, 15.9% thought medical errors resulted from careless work and excessive workload, 49.5% thought medical errors resulted from nurses and 70.3% were prone to teamwork. Mean age of the students was found as 21,17±2,09. In the study, ASTW total mean score was found as 119,97±12,62. It was found that "leadership" subscale had the highest mean score (27,47±3,37), while "mutual support" subscale had the lowest mean score (17,48±3,34). QDAPS total mean score of the students was found as 91,41±5,09. When the relationship between ASTW and QDAPS was examined, a statistically significant, positive and weak association was found (Spearman's r : 0,348; $p < 0,01$). No statistically significant difference was found between students' ASTW total mean scores and sociodemographic features ($p > 0,05$). However, total QDAPS mean scores of nursing students who were more prone to teamwork, those who loved their profession, those who had health problems and those who had received clinical training were statistically significant and high ($p < 0,05$). **Conclusion:** In the study, team work and patient safety attitude total mean scores of nursing students were found to be high. In addition, it was found that as mean scores of team work increased, attitudes towards patient safety became more positive. Inclusion of patient safety and team work training in the curriculum in preventing medical errors may contribute to ensuring patient safety.

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THE EFFECTS OF NURSING STUDENTS' BELIEFS TOWARDS OBESE INDIVIDUALS ON THEIR STIGMATIZATION TENDENCIES

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Abstract

Introduction and Purpose: It is very important to provide good quality and equal care to obese individuals without judging, stigmatization and discrimination. The aim of this study was to determine the effects of nursing students' beliefs towards obese individuals on their stigmatization tendencies. **Method:** This descriptive study was conducted between 05.06.2021-20.06.2021 with the participation of 232 students who were studying at Ondokuz Mayıs University, Faculty of Health Sciences, department of Nursing and who were willing to participate in the study. The data in the study were collected by using a 25-item survey form consisting of 25 questions to find out socio-demographic characteristics of the students and their attitudes towards obese individuals and Beliefs about Obese Persons Scale (BAOP) and Stigma Scale. Beliefs about Obese Persons Scale was developed by Allison et al. (1991) and adapted into Turkish by Dedelioğlu et al. (2014). The scale consists of 8 items and a single dimension. High scores from the scale show positive behavior pattern towards obese individuals. Stigma Scale was developed by Yaman and Güngör (2013). The scale consists of 22 items and 4 sub-dimensions. High scores from the scale show high stigmatization tendency. Normality distribution of the data was examined with Kolmogorov Simirnov test. Kruskal Wallis and Mann Whitney U test were used in the comparison of data which were not normally distributed. The correlation between the scales and sub-dimensions was examined with Spearman correlation analysis. **Results:** It was found that 75.4% of the students in the study were female and 24.6% were male, 82.8% had grown up in a nuclear family, 36.6% had a democratic family structure, 60.8% chose the profession of nursing willingly, 79.7% had a body mass index within normal range, 69.4% did not have a history of obesity in family members, 67.7% had overweight individuals in their immediate circle, 74.6% were not exposed to stigmatization and discriminative attitudes due to their body weight; 97.8% were not biased against obese individuals, 78.9 % stated that they wanted to provide care to obese individuals and mean age was found as 20.72 ± 1.68 . Mean Beliefs about Obese Persons Scale score was found as 23.4 ± 1.02 , while mean Stigma Scale score was found as 44.8 ± 11.7 . Beliefs about Obese Persons Scale scores and mean Stigma Scale scores were found to differ in terms of some sociodemographic characteristics of students ($p < 0.05$). **Conclusion and Recommendations:** In line with the data obtained from the scale, it was found that students' beliefs about obese individuals were not negative and they had low level of stigmatization tendency. It is recommended to increase social awareness about the increase in obesity prevalence, which has become a global problem, and to prevent the tendency for stigmatization and discrimination.

KEY WORDS: Nursing, Obesity, Belief, Stigmatization.

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FACTORS RELATED WITH SPIRITUAL WELL-BEING IN PATIENTS HOSPITALIZED IN INTENSIVE CARE UNIT

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Abstract

Introduction and Purpose: It is very important to provide good quality and equal care to obese individuals without judging, stigmatization and discrimination. The aim of this study was to determine the effects of nursing students' beliefs towards obese individuals on their stigmatization tendencies. **Method:** This descriptive study was conducted between 05.06.2021-20.06.2021 with the participation of 232 students who were studying at Ondokuz Mayıs University, Faculty of Health Sciences, department of Nursing and who were willing to participate in the study. The data in the study were collected by using a 25-item survey form consisting of 25 questions to find out socio-demographic characteristics of the students and their attitudes towards obese individuals and Beliefs about Obese Persons Scale (BAOP) and Stigma Scale. Beliefs about Obese Persons Scale was developed by Allison et al. (1991) and adapted into Turkish by Dedelioğlu et al. (2014). The scale consists of 8 items and a single dimension. High scores from the scale show positive behavior pattern towards obese individuals. Stigma Scale was developed by Yaman and Güngör (2013). The scale consists of 22 items and 4 sub- dimensions. High scores from the scale show high stigmatization tendency. Normality distribution of the data was examined with Kolmogorov Simirnov test. Kruskal Wallis and Mann Whitney U test were used in the comparison of data which were not normally distributed. The correlation between the scales and sub-dimensions was examined with Spearman correlation analysis. **Results:** It was found that 75.4% of the students in the study were female and 24.6% were male, 82.8% had grown up in a nuclear family, 36.6% had a democratic family structure, 60.8% chose the profession of nursing willingly, 79.7% had a body mass index within normal range, 69.4% did not have a history of obesity in family members, 67.7% had overweight individuals in their immediate circle, 74.6% were not exposed to stigmatization and discriminative attitudes due to their body weight; 97.8% were not biased against obese individuals, 78.9 % stated that they wanted to provide care to obese individuals and mean age was found as 20.72 ± 1.68 . Mean Beliefs about Obese Persons Scale score was found as 23.4 ± 1.02 , while mean Stigma Scale score was found as 44.8 ± 11.7 . Beliefs about Obese Persons Scale scores and mean Stigma Scale scores were found to differ in terms of some sociodemographic characteristics of students ($p < 0.05$). **Conclusion and Recommendations:** In line with the data obtained from the scale, it was found that students' beliefs about obese individuals were not negative and they had low level of stigmatization tendency. It is recommended to increase social awareness about the increase in obesity prevalence, which has become a global problem, and to prevent the tendency for stigmatization and discrimination.

KEY WORDS: Nursing, Obesity, Belief, Stigmatization.

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THE RELATIONSHIP BETWEEN SLEEP QUALITY AND FATIGUE LEVELS IN RELATIVES OF PATIENTS HOSPITALIZED IN PALLIATIVE CARE UNIT

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Abstract

Introduction and Purpose: Taking care of individuals with a chronic disease in the family and meeting their needs may change the roles in the family. This situation can bring about physical, psychological, social and economic problems related with patient relatives. This study was carried out as a descriptive and cross-sectional study to find out the relationship between sleep quality and fatigue levels in relatives of patients hospitalized in palliative care unit. **Method:** This study was carried out with the participation of the relatives of 160 patients who were receiving care and treatment in the palliative care unit and internal medicine and surgery clinics of a training and research hospital. Relatives of 80 patients who were receiving care and treatment in the palliative care unit formed the study group, while relatives of 80 patients who were receiving care and treatment in internal medicine and surgery clinics formed the control group. In the study, the data were collected by using patient and patient relative descriptive information form and Pittsburg Sleep Quality Index and Piper Fatigue Scale. Percentage, Mann Whitney U, Kruskal Wallis and Spearman's correlation test were used in data assessment. **Results:** It was found that 27.3% of the patient relatives in the study group had a diagnosis of diabetes and 47.3% had a diagnosis of hypertension; while 37.5% of the patient relatives in the control group had a diagnosis of diabetes and 25% had a diagnosis of asthma. Pittsburg Sleep Quality Index and Piper Fatigue Scale median scores of patient relatives in the study group were 8(0-16) and 4,95(1-9), respectively; while Pittsburg Sleep Quality Index and Piper Fatigue Scale median scores of patient relatives in the control group were 10(2-16) and 6,09(2-9), respectively. Considering that a total score of 5 and above from Pittsburg Sleep Quality Index indicates poor quality of sleep, it was determined that the patient relatives in the study had very poor quality of sleep. Statistically significant difference was found between the Pittsburg Sleep Quality Index and Piper Fatigue Scale scores of the study and control group patient relatives ($p<0.05$). **Conclusion and Recommendation:** In line with the results found in the study, patient relatives were found to have moderate fatigue and poor quality of sleep. It was also found that fatigue levels increased as quality of sleep decreased. It is recommended to plan nursing interventions to increase quality of sleep and fatigue levels in patient relatives and to decrease their care burdens.

KEY WORDS: Fatigue, Patient relative, Palliative care, Quality of sleep.

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THE EFFECTS OF UNIVERSITY STUDENTS' FEAR LEVELS OF BREAST CANCER ON HEALTHY LIFESTYLE BEHAVIORS

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Abstract

Aim: This study was conducted as a descriptive study to find out the effects of university students' fear levels of breast cancer on their healthy life style behaviors. **Method:** The study was conducted between 05.06.2021 and 20.06.2021 with the participation of 386 students who were studying in a university and who agreed to participate in the study. The data were collected by using an information form prepared in line with the literature by the researcher which included 26 questions to find out sociodemographic characteristics and thoughts of students towards breast cancer, Champion Breast Cancer Fear Scale and Healthy Lifestyle Behaviors Scale II. Champion Breast Cancer Fear Scale is an 8-item 5 Likert type scale which was developed by Champion et al. (2004) and adapted into Turkish by Seçgili (2012). Total score from the scale varies between 8 and 40. 8-15 points indicate "low level of fear", 16-23 points indicate "moderate level of fear" and 24-40 points indicate "high level of fear". Healthy Lifestyle Behaviors Scale II is a 4 Likert type scale consisting of 52 items and 6 subscales, developed by Walker et al. (1996) and adapted into Turkish by Bahar et al. (2008). Total score from the scale varies between 52 and 208. Normality distribution of the data was evaluated with Shapiro Wilk and Kolmogorov Smirnov. Kruskal Wallis test, Mann Whitney U test, one way ANOVA and independent samples t test were used in data analysis. **Results:** It was found that 98.2% of the students in the study were single, 73.3% had a nuclear family and 35.5% had a democratic family structure, 85.2% had social security, 86.8% did not have any health problems, 52.1% referred to doctor when they had health problems, 70.7% had knowledge about breast cancer, 76.4% were afraid of breast cancer and mean age of the students was 20.7 ± 2.3 . Champion Breast Cancer Fear Scale median score of the students was 25 (8 - 40) and Healthy Lifestyle Behaviors Scale II mean score was found as 141.5 ± 24.2 . **Conclusion:** When the Breast Cancer Fear Scale scores were evaluated in this study, it was found that university students had high levels of breast cancer fear. No statistically significant association was found between Breast Cancer Fear Scale and Healthy Lifestyle Behaviors Scale II. In line with the results found, it is recommended to increase students' knowledge and awareness in order to decrease their cancer fear levels.

Key Words: Breast cancer, Behavior, Fear, Student, Health, Life.

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THE EFFECTS OF UNIVERSITY STUDENTS' FEAR LEVELS OF BREAST CANCER ON HEALTHY LIFESTYLE BEHAVIORS

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Abstract

Aim: This study was conducted as a descriptive study to determine the health beliefs and practices of university students towards breast cancer. **Method:** The study was conducted between 05.06.2021 and 20.06.2021 with the participation of 522 female students who were studying in a university and who agreed to participate in the study. The data were collected with an information form prepared in line with the literature by the researcher which included 24 questions to find out sociodemographic characteristics and health beliefs and practices of students towards breast cancer and Champion Health Belief Model Scale. Champion Health Belief Model Scale was developed in 1984 by Victoria Champion to find out individual's beliefs towards breast cancer and Breast Self-Examination (BSE). The scale which was adapted into Turkish by Gözüm and Aydın (2004) is a 5 Likert type scale including 52 items and eight subscales. Although a total scale is not obtained from the scale, each subscale is evaluated separately. The increase in the subscale scores indicates increase in the perception of benefits, susceptibility, seriousness and barriers. Normality distribution of the data was evaluated with Shapiro Wilk and Kolmogorov Smirnov. Kruskal Wallis test, Mann Whitney U test and one way ANOVA were used in data analysis. **Results:** It was found that 98% of the students in the study were single, 70.8% had a nuclear family and 34.2% had a democratic family structure, families of 83.2% had social security, 86.6% did not have any health problems, 71.4% had knowledge about breast cancer, 27.1% received information about breast cancer from the internet and 25.5% from school, 60.1% knew how to make breast self-examination (BSE), 33.5% made BSE whenever they thought of it, 93.5% did not have clinical breast examination, 85.9% did not have any relatives diagnosed with breast cancer and mean age of the patients was found as 20.5 ± 1.5 . Students had a median score of 7 (3 - 15) from Champion Health Belief Model Scale susceptibility subscale, a median score of 21 (6 - 30) from seriousness subscale, a median score of 23 (5 - 25) health motivation subscale, a median score of 18 (4 - 20) from BSE benefits subscale, a median score of 14 (8 - 40) from BSE barriers subscale, a median score of 33 (10 - 50) from BSE self-efficacy subscale, a median score of 20 (5 - 25) from mammography benefits subscale and a median score of 23 (11 - 55) from mammography barriers subscale. **Conclusion:** In line with the scores students got from Champion Health Belief Model Scale subscales, it was found that students had moderate level of susceptibility perception, high level of seriousness, health motivation, BSE self-efficacy, BSE benefits and mammography benefits perceptions and low level of BSE barriers and mammography barriers perceptions. In line with the results found, it is recommended to increase students' awareness about practices to prevent breast cancer and early screening methods.

Key Words: Breast Cancer, Belief, Student, Health, Practice.

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A RANDOMIZED CONTROLLED TRIAL: THE EFFECT OF ACUPRESSURE AND FOOT REFLEXOLOGY ON PAIN BEFORE HEEL-LANCING

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Ayfer Açıkgöz, Eskisehir Osmangazi University

Abstract

Background: Heel-lancing is a common source of pain in newborns. **Aim:** This study aimed to determine the effects of foot reflexology and acupressure on the KI3 and St36 points on pain during interventions when these procedures were administered before heel lancing in term newborns. **Methods:** This study was conducted with 105 healthy term babies who met the inclusion criteria and who were delivered by cesarean section between October 2017 and March 2018 at a State Hospital in Turkey. The study had three groups assigned using a block randomization method. The groups are as follows: a study group to whom foot reflexology was administered (n = 35), a study group to whom acupressure was administered (n = 35), and a control group on whom no interventions were administered (n = 35). A “Newborn Information Form” and a “Neonatal Pain, Agitation, and Sedation Scale” (N-PASS) were used to collect data. The SPSS 24.0 statistical package was used for data analysis. The fits of the N-PASS scores were obtained by two independent researchers and were analyzed using the intra-class correlation coefficient (ICC). **Results:** The study found a significant intergroup difference between pain scores of neonates during the procedures ($p < 0.05$). Advanced analyses found that the pain scores in the acupressure and foot reflexology groups were similar, whereas the pain scores in the control group were higher than in the other two groups. **Conclusions:** Acupressure and foot reflexology were effective in reducing acute pain in neonates during the heel lancing. The study recommends that acupressure and foot reflexology methods be used on site during heel lancing procedures in newborns to reduce pain.

Key words: Newborn, pain, heel lance, foot reflexology, acupressure, nurse

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Triage knowledge levels of health personnel in Turkey: a study in state hospitals in Samsun

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Abstract

Today, triage is most commonly practiced in emergency departments. Due to the increase in the number of patients admitted to the emergency services, it is observed that having a fast and accurate triage system is critical for patient safety. Today, the necessity of an effective triage system for emergency patients to receive appropriate health care in a short time is unquestionably accepted and it is emphasized that nurses have an important role in performing triage correctly. Nurses who will take part in triage, It is stated that they should receive a special education on this subject, be equipped with knowledge, skills, behavior, critical thinking, fast and correct decision-making abilities, and have professional characteristics. This research was carried out as a cross-sectional study between 15/05/2019 and 15/05/2021 in order to determine Triage knowledge levels of health personnel working in Turkey: a study in state hospitals in Samsun and the factors affecting this situation, using a "Questionnaire Form," which consisted of three sections based on the literature. The population of the study consists of 324 nurses in total; some of them work in the emergency services of 16 hospitals, which are attached to a Provincial Health Directorate, and other health personnel working the emergency service of a university hospital. The research has been completed with the participation of 300 health personnel. Data have been collected by means of using the introductory information form of health personnel and their Triage knowledge levels. Data are presented as percentage, median (min-max). The level of significance has been taken as $p < 0.05$. In the research, it has been determined that 52.3% of the health personnel takes place between the ages of 20-30, (63.7%, $n=191$) of them were female, (64.0%, $n=192$) have a bachelor's degree and (53.7%, $n=161$) were married. Majority of the health personnel (85.7%, $n=257$) stated that they received triage training during their vocational training, and (69.3%, $n=208$) in the postgraduate period. On the other hand in this research, the majority of the health personnel (5.0%, $n=15$) reported that triage was "almost never" applied in their units, while (40.0%, $n=120$) reported that it was applied "always". Research findings show that the health personnel' triage knowledge was moderate and that vocational and postgraduate training affected their triage knowledge. It is recommended that institutional managers implement regular and continuous in-service training programs for health personnel and support their participation in certification programs to improve their triage knowledge.

Key Words: Triage; health personnel; knowledge levels.

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Triage applications in Turkey During the Covid-19 pandemics

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Abstract

The purpose of this paper is to describe the revisions made in the triage system in Turkey as a response to the Covid-19 pandemics. The fundamental aspects of triage system are universal, and these will be explored. Covid-19 pandemics exposed this system to new challenges worldwide, as will be told in the paper. Turkey adopted a national policy which requires further examination, which is the main subject we'll cover. Covid-19 is a virus that has emerged in Wuhan, China, and spread all over the world in a short time, causing severe acute respiratory syndrome and pneumonia. COVID-19, which affects the whole World, is a highly infectious virus that has no specific treatment. In emergency applications, which are available 24 hours a day due to the emergency of patients who have not yet been diagnosed with COVID-19 infection or who are suspected of infection; special measures must be taken to protect both other patients and health professionals. Covidien-19 first appeared in Turkey from March 2020, the emergency department separation new triage system has reduced cross-infection by limiting the activity ranges of both patients and emergency medical personnel, patients in triage were evaluated in terms of COVID-19 risk, and these patients were divided into low, medium and high risk groups and directed to relevant areas. This risk assessment is important for early diagnosis and when the role of early initiation of treatment in the effectiveness of the treatment process is considered, the value of triage in the process will be better understood. The Pre-Triage area can be at the entrance of the emergency room or inside, and the patients are separated according to their answers to the questions about COVID-19, Patients who do not have COVID-19 risk findings according to any criteria but have other complaints, to be subjected to a preliminary evaluation, it is sent to the relevant department in the emergency with other patients in the low risk group. The present paper includes the Triage system using in Turkey During the Covid-19 pandemics for performing pre-evaluation of all patients admitted to the emergency department of hospitals related to COVID-19 and for approaching to different patient groups that have been diagnosed positive for COVID-19.

Key Words: Covid-19; Triage; Emergency Department.

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THE EFFECTS OF UNIVERSITY STUDENTS' FEAR LEVELS OF BREAST CANCER ON HEALTHY LIFESTYLE BEHAVIORS

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Abstract

Breast cancer, a life-threatening disease, is one of the most common types of cancer among women. According to the statistics of the American Cancer Society, it has been reported that approximately 250,000 women were diagnosed with breast cancer during 2017 and more than 40,000 women died due to breast cancer. Cancer and its treatment can cause physical problems such as pain, taste change, alopecia, nausea-vomiting, fatigue, anemia in patients, as well as anxiety and worry about work, social and family life, emotional problems, spiritual problems, hopelessness, fear, and depression. For this reason, it is very important to determine the physiological and psychosocial problems of breast cancer patients and to increase their hope and social support levels. Hope increases the positive energies of cancer patients in life; it prevents negative feelings such as uncertainty, pessimism and helplessness, helps them cope with the disease process, and increases their level of well-being and comfort. In some studies on this subject, it has been reported that the quality of life is high, the prognosis of the disease is good, and pain control is provided in patients with high hope levels. At the same time, it was emphasized that the hope offered during the treatment process gives the patient psychological support, gives strength, motivates, facilitates the adaptation to the treatment/illness process, alleviates the side effects of the treatment, and positively affects the quality of life. On the other hand, cancer treatment and its side effects can cause social isolation by affecting the interpersonal relationships of the patients. For this reason, breast cancer patients need the support of their families, peers, and health professionals during the disease and treatment. Social support includes contact with family members, friends, and other breast cancer patients. Sharing experiences with individuals with the same disease, seeing that they feel the same emotions and that they are not alone helps patients cope with their feelings of hopelessness and helplessness. As a matter of fact, it is emphasized in the literature that social support and supportive interventions facilitate the psychosocial adjustment of breast cancer patients. The gradual deterioration of health conditions, the continuation of distress, and the gradual increase in conditions that cause stress related to the disease may make individuals with a chronic disease such as cancer more in need of social support. As a result, it can be said that raising hope and increasing social support in breast cancer patients are important resources that help them cope with the physiological and psychological tensions they experience.

KEYWORDS: Breast cancer, social support, hopelessness.

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DETERMINING THE SUPPORTIVE CARE NEEDS OF PATIENTS WITH LUNG CANCER

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Abstract

Introduction and Aim: Supportive care is all of the activities that help the patient to get the most benefit from the treatment, to improve the quality of life by minimizing the problems caused by the disease. This study was conducted to determine the supportive care needs of patients with lung cancer. **Method:** This descriptive study was conducted between the dates of 15.06.2019 and 30.03.2020 with the participation of 208 patients with lung cancer who are being treated in the chemotherapy unit of Ondokuz Mayıs University Health Practice and Research Hospital and agreed to participate in the study. Data were collected by using the Patient Descriptive Information Form, which determines the sociodemographic and clinical characteristics of the patients, and the Supportive Care Needs Scale-Short Form. This scale was developed by McElduff, Boyes, Zucca, and Girgis to determine the needs of patients diagnosed with cancer and was adapted into Turkish by Aksuoglu and Senturan. It is a scale consisting of five subdomains: Mental/Psychological, Health System and Information, Physical and Daily Life, Patient Care and Support, and Sexuality. The scale is a five-point Likert type and five answers to each question were scored: I did not need it at all (1 point), I did not need it (2 points), I needed little (3 points), I needed some (4 points), I needed it a lot (5 points). It is accepted that as the score obtained from the scale increases, the patient's need for supportive care increases, too. Conformity to normal distribution was evaluated with the Kolmogorov-Smirnov test. Pearson correlation coefficient was used to examine the relationship between scores. Multiple linear regression analysis was used to analyse the independent variables affecting the total score of the scale and subdomain scores. **Results:** Among the patients participating in the study, it was determined that 79.3% of them are male, 69.7% are primary school graduates, 92.5% live with their spouses/partners, 95.2% have children, 44.7% define their economic status as bad, and the mean age of the patients is 62.0 ± 10.7 . The mean score of the Patients' Supportive Care Needs Scale was found to be 107.4 ± 27.1 . Supportive Care Needs Scale's Mental/Psychological subdomain mean was determined as 34.1 ± 11.3 , Health System and Information subdomain mean as 36.1 ± 11.4 , Physical and Daily Life subdomain mean as 19.2 ± 5.1 , Patient Care and Support subdomain mean as 12.3 ± 4.9 , and Sexuality subdomain mean as 5.6 ± 3.6 . It was determined that some sociodemographic and clinical characteristics of the patients affected the total and subdomain mean scores of the Supportive Care Needs Scale-Short Form. **Conclusion and Recommendations:** It was determined that the supportive care needs of the patients with lung cancer who participated in the study are at a medium level. In this regard, it is recommended to determine the supportive care needs of patients with lung cancer and to plan and implement appropriate nursing interventions.

Keywords: Lung Cancer, Supportive Care, Nursing Practice.

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RELIGIOUS BELIEF AND SPIRITUALITY IN ONCOLOGY PATIENTS

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Abstract

The treatment and care process in oncology patients can create significant changes in the lives of individuals. This situation can affect both the individual and their families closely. Job loss, role changes in the family, physiological and psychosocial problems may occur in oncology patients and their relatives. In this direction, oncology patients and their relatives can apply to spirituality and religious coping methods. People often need spiritual support when dealing with a life-threatening illness such as cancer, serious medical condition, or loss. It can be said that the most important benefit of spirituality and religion in terms of mental health is related to the meaning it brings to human life through the values it reveals and explanations about worldly life. Researches on this subject in recent years have pointed out the relationship between religion/spirituality and health; recommends that health care professionals be aware of these studies and consider their clinical implications. Determining the impact of religious and cultural factors on individuals' experience of illness is critical in planning and delivering culturally and religiously adequate care. The ability of healthcare professionals to provide culturally sensitive care is only possible if they are aware of their patients' spiritual/religious beliefs and practices. Research on this subject will help to determine whether the distress experienced by patients affects their belief levels and whether they use negative religious coping methods. Nurses should consider that spirituality is at the center of an individual's existence and includes feelings and thoughts that bring purpose and meaning to his life. Providing individualized care compatible with the spirituality of the healthy/sick individual can result in a positive healthcare experience for both patient and nurse. It is important to understand how elements such as spirituality, belief, and religion affect daily life, health, and illness, as they affect the care provided to individuals. Spirituality and belief can include religion that refers to a higher power characterized by certain forms of worship, spiritual practices, and codes of conduct. Since nurses provide care to people with many different religious traditions, it is important to have a high level of awareness on this issue. Health professionals have the opportunity to explore the religious and spiritual aspects of the patients they care for. Nurses are unlikely to know about all religions. However, when they identify the religious beliefs and practices of the patients they care for, they may be more likely to meet their spiritual needs. Religious beliefs and practices can directly affect the patient's response to illness and pain, individual care practices such as diet and hygiene, birth and death rituals, gender roles, spiritual practices, and moral codes. Promoting spiritual well-being, a sense of connection between self, others, nature, and a higher power that can be accessed through prayer or other means, is the goal of holistic nursing. By interacting safely with healthy/sick individuals, nurses can learn about the spirituality, belief, and religious coping styles within them. However, by meeting with the spiritual counselor of the patient and their family, they can obtain useful information to be used in the nursing care plan.

Keywords: Oncology, Religious Belief, Spirituality

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Understanding the Causes of Moral Distress Experienced by Oncology Nurses in the context of a pandemic

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Abstract

Problem Statement: Providing care to cancer patients is associated with many ethical challenges. Due to the physical and psychological stress that cancer patients are faced with, the oncology unit can be considered a challenging and unique setting for nurses. During pandemics such as COVID-19, healthcare workers may be particularly exposed to priority setting and other ethical dilemmas caused by scarcity of resources and might experience high levels of moral distress. Studies show that the level of moral distress in nurses caring for cancer patients is higher than the level of moral distress among other nurses. **Aim:** The aim of this scoping review is to explore studies related to causes of moral distress in oncology nursing. **Methods:** This review adopted a scoping review study framework (Arskey & O'Malley 2005), using electronic databases including MEDLINE, AMED, CINAHL, PubMed and Cochrane Library from 1 January 2016 and 31 June 2021 using search keywords: "moral distress", "oncology", "nurses" and "COVID-19". **Results:** The nurses that provide care in oncology are more exposed to the situations such as failure to control the pain of the patient that cause moral distress than those who work with other types of patient care. Studies show that factors that exacerbate or influence the experience of moral distress for nurses, including, young patient age, an more established interpersonal relationship with the patient involving extensive contact and often in the presence, of a deteriorating clinical situation involving the patient. Experiences and levels of moral distress depend on external constraints, such as inadequate communication among team members, internal constraints, such as a lack of empowerment or self-doubt, and the clinical situations. The direct and indirect effects of the COVID-19 responses may influence these factors in multiple ways. **Discussion:** In this review, moral distress was often associated with poor communication or a lack of communication between healthcare professionals, failure to control the pain of the patient, young patient age and interpersonal relationship with the patient. **Recommendations:** Nurses should be trained and provided with strategies to cope with moral distress. It is very important to provide resources and protective work environments for healthcare professionals in ethically challenging situations such as COVID-19.

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Palliative Care for Patients With Heart Failure

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Abstract

Introduction: Heart failure (HF) is defined as insufficiency of heart to meet metabolic needs of the body tissues (1). In the clinic, it occurs with signs of low cardiac output such as weakness, fatigue or congestive symptoms such as pretibial edema, and unintended weight gain (2). Despite the developments in recent years, approximately 40% of heart failure patients die within the first year after the first hospitalization (3). As the disease progresses, a serious deterioration in the quality of life is observed in patients with psychological and physical wear (4). **Main text:** Palliative care is an approach to increase the quality of life of patients and their relatives who are faced with a life-threatening disease, and aims at early diagnosis and treatment of physical, psychosocial and spiritual problems, especially pain (5). The symptoms patients with heart failure experience is gradually increases as they approach the end of life. The most common symptoms experienced by heart failure patients are defined as fatigue, pain, respiratory distress, anxiety, nausea, confusion, and depression (6). Due to the burden of heart failure on patients' relatives and healthcare institutions, as well as the complexity of medical treatment of heart failure, the participation of a palliative care specialist in the treatment of these patients and in clinical decision-making steps has become mandatory (7). In the 2016 ESC acute and chronic heart failure guideline, patients who should be considered for palliative care and their main components are clearly stated (8). Increasing the satisfaction of the patient and his family with palliative care treatment and symptom management affects the clinical results positively. In a nonrandomized study, it was shown that survival of terminal heart failure patients receiving palliative care increased by 81 days compared to those who did not (9). **Conclusion:** It is recommended that patients receive palliative care in order to prevent / reduce the discomfort of patients with end-stage heart failure and to increase the quality of life of the patient and their family. Palliative care for the patients covers continue of care such as medication management and blood pressure monitoring; symptom management such as pain, respiratory distress, fatigue, and depression; supporting emotional and psychosocial needs; spiritual support and education of patient / family (10).

Keywords: Palliative care, Heart failure, Quality of life

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MINDFULNESS LEVELS of NURSES

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Abstract

Objective: This study was conducted to determine the mindfulness level of nurses and the affecting factors. **Method:** The study was conducted as a descriptive cross-sectional study between April 2021 and July 2021. The sample of the study consisted of 150 nurses working in A University Health Hospital and State Hospital, internal medicine, surgical clinics and intensive care units and volunteering to participate in the study. Data were collected with a questionnaire created by the researchers and the Mindful Attention Awareness Scale (MAAS). The data were analyzed by SPSS 15 package program. Mean, frequency, percentile, correlation analysis, Mann Whitney U test and Kruskal-Wallis test were used in the analysis of the data. Significance was evaluated at the $p<0.05$ level. **Results:** In the study, 88.7% of the nurses were women, 62% of them were married, 74% of them were undergraduates, 83.3% of them were clinical nurses and 56% of them were working in the internal medicine clinic. The mean age of the nurses was 34.03 ± 9.1 and the mean of the Mindful Attention Awareness Scale score was 39.50 ± 10.24 . It was found that a significant difference between the education level of the nurses and the mean score of the Mindful Attention Awareness Scale ($p<0.05$). The mean score of the mindfulness scale of nurses with undergraduate and graduate degrees was found to be statistically higher than nurses with graduated from health vocational high schools ($p<0.05$). A significant difference was determined between the nurses' hobbies and the mean scores of Mindful Attention Awareness Scale ($p<0.05$). There was no significant difference between the nurses' marital status, gender, presence of chronic disease, working shift, working area, title and mindfulness ($p>0.05$). There was no significant relationship between the nurses' age, years of profession experience, years of clinical experience, weekly working hours and mindfulness ($p>0.05$). **Conclusion:** It was determined that the mindfulness level of the nurses was slightly below the average. The level of mindfulness of nurses with graduate and undergraduate degrees was found to be higher than the nurses who graduated from health vocational high school. The level of mindfulness of nurses who had a hobby was higher than those who did not. It is recommended seminar etc. to increase the mindfulness levels of nurses.

Keywords: nurse, mindfulness, clinical.

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Assesment of Nurse Records on Multimodal Analgesia in Trauma Patients

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Abstract

Background: Multiple pain sources such as muscle, bone and nerve damage in trauma patients require the use of more than one analgesia method. In this context, multimodal analgesia provides more effective analgesia than using a single type of analgesia. **Objective:** In this study, nurse observation forms were retrospectively examined in order to assess the application of multimodal analgesia in trauma patients in the emergency unit. **Methodology:** The study included the nurse observation forms of 190 trauma patients hospitalized in the emergency unit of a university research hospital and who were 18 years of age or older that were able to communicate in the emergency unit of a university research hospital. The data of the study were collected using the Patient Demografic Information Form and the Multimodal Analgesia Assessment Form. SPSS 23.0 package program was used for statistical analysis of the data. **Results:** The average age of the patients included in the study is 40.94 ± 15.18 , 65.8% of them are male. While 47.9% of the traumas are due to traffic accidents, 37.9% of the patients have multiple traumas. It was determined that 71.6% of the patients were applied multimodal analgesia and that weak opioids and non-opioid analgesics were used most frequently in this analgesia. In addition, it was found that non-pharmacological analgesia methods were not used by nurses in the study. **Conclusions:** According to the results obtained from our study, a decrease was observed in the pain levels of the patients who received multimodal analgesia.

Keywords: Emergency Department, Multimodal Analgesia, Nursing, Pain Management

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