







Compassion Competence among Nursing Students from Different Cultures: A Multi-Country Study

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DISCLOSURE

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INTRODUCTION

Compassionate care is the wish of every patient, health professionals, the public and loved ones (John, 2016).

The presence or absence of compassion leaves an indelible impression that patients and their relatives have about their experiences of care in the health facilities.







- □ Compassion is the main factor which adds to patient satisfaction with nursing care and it enhances nurses' job satisfaction (Royal College of Nursing, 2012).
- Most patients and family members agree that improving patients' satisfaction around their experience of care brings out an outcome that is valued. (Department of Health, 2008)













Literature reveals that there is a universal interest in compassion as it relates to care (Adamson & Dewar, 2015; Dewar, Adamson, Smith, Surfleet & King, 2014).











According to Bivins, Tierney and Seers (2017), the need for compassionate care has become focus of serious discussion at international level resulting in initiatives such as Schwartz Rounds established in America, Hearts in Healthcare in New Zealand, and the Asia Pacific Healthcare Hub of Charter for Compassion.











☐ In the United Kingdom, a policy document called 'Compassion in Practice' outlined six 'Cs' associated with compassionate care (care, compassion, courage, communication, commitment and competence).

Compassion connotes empathizing with the patient and also empowering them through efficient and effective nursing care (Dewar & Cook, 2014).





- □ Compassion competence means nurses association and communication with patients in a passionate way, including sensitivity and insight based on their experience and knowledge (Lee & Seomun, 2016).
- ☐ This ensures effective care and treatment which are evidence-based (Department of Health, 2012).













☐ There is no evidence of assessing compassion competence among undergraduate nursing students focusing on multicountries in literature.

☐ Therefore, carrying out this study is crucial to highlight areas of deficiency in compassion competence among nursing students who are still at the formative stage.

AIM/OBJECTIVES OF THE STUDY



The main purpose of the study was to assess compassion competence among nursing students from different cultures.









The Specific objectives were to:



Determine compassion competence of nursing students in communicating with patients.

Ascertain compassion competence among nursing students in terms of sensitivity to patients' needs.

Evaluate the level of compassion competence in relation to insight into patients' problems.

Identify determinants of compassion competence among nursing students.











SETTINGS OF THE STUDY





MATERIALS & METHODS

☐ The study was a descriptive cross-sectional survey involving four countries – Nigeria, South Korea, Oman and Iraq.

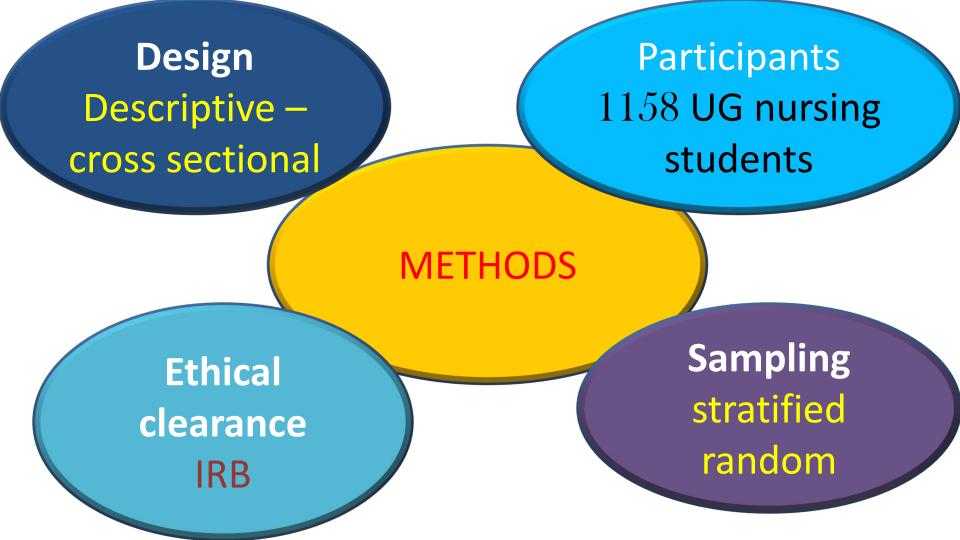
☐ A total of 1158 undergraduate nursing students participated in the study which included both generic and direct entry students.

☐ A stratified random sampling method was used to select participants from 200 level of study to 400 or 500 (as applicable in each institutions)











DATA COLLECTION

Data were collected using Compassion Competence Scale (CCS) developed by Lee and Seomun (2016) to measure communication, sensitivity, and insight.

□ The instrument contained 17 items on a 5 - point Likert scale (strongly agree =5, agree =4, neutral =3, disagree=2, strongly disagree=1).



DATA COLLECTION Contd

☐ The instrument contained 17 items (8 on communication, 5 on sensitivity, and 4 on insight)

□ Items were on a 5 - point Likert scale (strongly agree =5, agree =4, neutral =3, disagree=2, strongly disagree=1); with total scores calculated for each variable.



DATA COLLECTION Contd

□ The 17 items are divided into eight (8) items on communication, five (5) items on sensitivity and four (4) items on insight.

☐ The total score is calculated as the mean of the scores for each question; it ranges from 1 to 5.





DATA COLLECTION Contd

☐ The instrument was pilot tested on 118 nursing students not used in the study in the four countries.

☐ The Cronbach's alpha estimates were: .90 for the whole instrument; .80 for communication; .79 for sensitivity .70 for insight





ETHICAL CONSIDERATIONS

- ☐ Ethical approval was given by the Health Research Ethics Committee of each institution involved in the study.
- ☐ Informed consent was obtained from the participants
- ■Study processes adhered to ethical protocols (confidentiality and anonymity)









DATA ANALYSIS

□ Data were computer analyzed by using SPSS for Windows version 21.

Descriptive statistics, analysis of variance (ANOVA) and regression were used to analyze the data.





RESULTS/DISCUSSION

- □ Nursing students who completed the survey numbered 1,158 in four countries.
- ☐ The socio-demographic characteristics of the sample shows that 70.6% were female; 87.7% were single, and average age was 22.25 (SD=3.44, minimum 18 to maximum 47).
- ☐ The biggest proportion of the respondents was from South Korea (31.3%), whereas the lowest was from Oman (18.3%).





□ Overall, compassion competence was 3.96 (SD=0.56), with a sequentially high level of the following:

 \square Sensitivity (mean = 4.10; SD = 0.63)

 \Box Communication (mean = 3.92; SD = .60)

 \square Insight (mean = 3.86; SD = .66).









- ☐ In terms of the Compassion competence Scale (CCS) sub-factors, sensitivity domain was perceived as the highest CCS dimension among nursing students:
 - \Box Iraq (mean = 4.20, SD = 0.52),
 - \square Nigeria (mean = 4.14, SD = 0.83),
 - \Box Oman (mean = 4.01, SD = 0.71)
 - \square South Korea (mean = 4.01, SD = 0.49).



- □With regards to sensitivity, the respondents asserted their recognition of the need for sensitivity which is reflected in high score in the CCS subscale.
- This findings is supported by Lee and Seomun (2016) assertion that nurses need to be skilful in the sensitivity which includes accommodating, being focused on the patients and families and other significant people around the patient.





☐ Communication and Insight having lower scores may be attributed to lack of experience in interacting and handling patients' pent-up problems by nursing students.

☐ Level of study and country of residence showed statistically significant multivariate effects.











CONCLUSION

The respondents' sensitivity to patients needs was high across all countries that participated in the study.











LIMITATIONS/RECOMMENDATIONS

- □ Different cultural background of the respondents, duration of the nursing programme (4 or 5 years); mode of students' entry (generic and direct entry) and the sample size may limit the generalization of the results.
- ☐ The need to emphasize and develop effective communication skills and insights which are important aspects of compassion competence during the undergraduate programme and these can increase the quality of nursing care were recommended.

















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