



DETERMINATION OF ATTITUDES OF HEALTH STAFF ABOUT TO EVIDENCE BASED PRACTICES

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ABSTRACT

Evidence-based practices (EBP) are becoming more and more important in health care services due to the increased demand for malpractice, improved health systems and increased demands for EBA. In this study, it is aimed to determine the attitudes of health workers towards EBP. The study was carried out with 232 nurses, midwives and paramedics who were willing to participate in the study voluntarily and served in hospital clinics. The data collection form was distributed face to face and distributed to the participants and the answers were taken back in the same way. Descriptive statistics and parametric tests were used in the analysis of the data and the data were analyzed in the statistical package program and $p < 0.05$ was considered statistically significant. As a result of the study, it was determined that the gender and the status of taking a research course changed attitudes towards EBPs. For this reason, it is recommended that studies should be carried out in the curriculum about the EBPs in education of health professionals, studies to understand the difference between the sexes, increasing the lessons about EBPs and determining attitudes towards EBP.

KEYWORDS : Evidence based applications, health personnel, attitudes.

INTRODUCTION

Since the 1980s, the term "evidence-based medicine" has been defined as the use of scientific evidence in determining the best application. The use of EBP in the decision-making process by other medical personnel working in the clinic apart from clinical doctors in time has led to the change in the meaning of the term "evidence-based medicine" and to the use of the term "EBP." Although EBPs (EBP) has more than one explanations in the literature, its most commonly used definition is "the conscientious, clear and logical use of the best available evidence in decision-making about the individual patient care process." According to another definition, EBP is "the selection of research results, the synthesis of results and the preparation of these results for clinical application decisions in the improvement of patient outcomes, working environment, and clinical applications."

EBP have emerged for various reasons in time. EBP has been defined for various reasons such as giving better care to individuals, improving patient outcomes, and preventing malpractice errors. While the health systems and the demands of professional organizations were effective in the emergence and widespread use of EBPs movement, the increases experienced especially in malpractices revealed the importance of EBP. Furthermore, the necessity of basing health care applications on evidence has come to the fore for reasons such as the increase in care costs, increase in demands for evidence-based information, the fact that very little part of care was given based on evidence, a decrease in confidence in health personnel, and patients' anxiety for improper medical applications.

It is very important for nurses working at the center of care and having primary roles such as caregiving to work based on evidence in the applications. The care to be given to individuals should be based on the most recent and new scientific knowledge and should contribute to the patient's recovery, and the relationship between informing the patient and making a decision about the patient is the most determining factor in the professionalization of nursing. In this context, providing safe and effective care within professional nursing applications, providing health services for the needs of the individuals and society served, and basing the applications performed on a scientific basis are indispensable components. The factors such as improving the quality of the care provided and the consequences of the care, making a difference in clinical applications and patient care outcomes, the standardization of care,

and increasing nurse satisfaction affect the quality of the care provided and create a bond based on trust between the nurse and the patient.

EBP ensure the scientification of nursing applications, and scientifically produced new knowledge constitutes the basis of up-to-date nursing applications. On the other hand, commitment to traditionalism in nursing applications also causes incompatibility in the transfer of new information to medical care. Therefore, it is compulsory and necessary to use EBP in the field of nursing. In the last Nursing Regulation published in our country, it is stated that nurses should provide evidence-based care.

Although the necessity of EBP is mentioned in the regulation, the integration of EBP in the field may not be easy. In the literature, the realization of EBP is stated to be a difficult process. One of the main reasons for this problem with very complex dimensions is the attitudes and perceptions of caregivers with regard to EBP. In this context, the first step to be taken for the development of the strategies to increase evidence-based nursing application is to determine nurses' attitudes toward the subject. From this point of view, this study was carried out to determine the attitudes of health professionals toward EBP.

MATERIALS AND METHODS

The descriptive study is a single-center study. Universe and Sample The population of the study consisted of health workers working in inpatient services and intensive care units of one of private hospital. The sample of the study consisted of 232 volunteer volunteers. The mean age of the participants was 25.7, 84.9% were female, 18.1% were married, 77.6% were university graduates, 41.8% were foreign languages and 45.3% were in the intensive care unit

Data Collection Tools

The data collection tools consist of two parts. In the first part, questions about the socio-demographic characteristics and the second part we used "Attitude Scale for Evidence-Based Nursing" Scale.

Ethics

Scale was obtained. In order to collect the research data, permission was obtained from the hospital, where verbal consent was obtained from the nurses and the study was carried out.

Data Collection

Data were collected face-to-face by the researcher during the working hours of nurses.

STATISTICAL & ANALYTICAL METHODS

Analysis of research data was done by using a statistical package program. Basic descriptive statistics (mean, standard deviation, frequency) and hypothesis tests (Independent-Samples t-test and One-Way ANOVA test) were used for statistical analysis.

Research Budget

The cost was covered by the researchers.

RESULTS

It was determined that 68.1% of the participants did not attend research design for school education and 89.2% didn't receive a research design after graduation; also It was determined that 45.3% did not participate in a scientific activity during their professional lives.

46.6% of the participants stated that they received information about evidence based practices and 26.3% stated that they had information about the level of evidence. 15.9% of the participants gave the best evidence for randomized controlled trials, and 6% of the respondents gave a descriptive study.

While 86.2% of the participants stated that scientific research results could be used in patient care, 52.6% of them stated that the most used role was routine work; While preparing the patient care plan, 30.6% of the application guidelines were used and 23.3% of them benefited from the upper management instructions 37.5% of the respondents referred to the doctor as the caregiver and 31.9% as the nurse.

There was a statistically significant relationship between the participants' total scores obtained from the Attitudes Towards Evidence-Based Nursing Scale and the gender of the participants. Male participants have higher attitudes towards EBPs than female participants.

There was no statistically significant relationship between the total scores of the participants' Attitudes Towards Evidence-Based Nursing Scale and their marital status.

There was no statistically significant relationship between the total scores of the participants' Attitudes Towards Evidence-Based Nursing Scale and those of the graduate.

There was a statistically significant relationship between total scores of participants' Attitudes Towards Evidence-Based Nursing Scale and course-taking courses in school education. The subjects of research in the field of research in school life have higher attitudes towards evidence than those who do not take research courses.

DISCUSSION

The studies on EBP in the literature are limited, and EBP are generally discussed in the review type in the literature. It is very important for health personnel to investigate current evidence, to obtain up-to-date information, to read and understand the information they have acquired and to transfer this information to their professional application while providing care service. In our country, formal education is not widespread, and after the education provided in schools, nurses do not monitor the publications. The monitoring of publications related to the field after graduation is quite important in terms of professional development and professionalism. As a result of the study, it was determined that the majority of the participants did not receive education on research design during their education life and after graduation and that nearly half of them did not participate in any scientific activity during their professional life. It can be said that it was due to the presence of employees from different disciplines in the sample studied, different levels of education of the employees, and intensive working hours. Nurses

usually obtain information about the clinical investigation from nursing journals because it is quite important and necessary for nurses to conduct research and to apply the information obtained as a result of the research during care to determine the problems related to the field and to improve nursing applications. Furthermore, the use of the results of scientific research in patient care guides nurses in patient care and helps them to provide high-level care to patients. On the other hand, failure to reach the existing evidence, the rapid change in information and evidence, or the problems in the spread of the evidence obtained prevent the transfer of evidence to care and application. In the study carried out by Veeraman (2007), it was determined that nurses lack knowledge about doing research, interpreting research findings and evaluating the research and that nurses were insufficient in discussing research findings with their colleagues. In our study, it was determined that nearly half of the healthcare professionals received information on EBP and that few people gave correct answers to EBP. Furthermore, the majority of the participants stated that they could use scientific research results in patient care. It is thought that this situation was due to the fact that the courses on research taken by nurses and other health personnel during their education life were insufficient in the curriculum and that the EBP in the field were not used adequately.

In the transfer of evidence to application by nurses, there are many factors such as the lack of time, the lack of adequate skills, inharmonious teamwork, further adoption of traditional care, and the lack of authority and jurisdiction. In our study, it was determined that the professional role which was used most frequently by half of the participants was to do routine works and that the second professional role which was used most frequently by nearly half of them was to provide care. Furthermore, the participants responded that the doctor was on the first rank as the person who decides on care and that the nurse was on the second rank. This may suggest that the autonomy of other health professionals is still not enough in patient care. In the study carried out by Brown et al.(2008) to determine the perceived opportunities and barriers associated with EBP of nurses, it was determined that they thought that the barriers depending on the institution were the lack of autonomy of nurses and excessive time limitation, and the most perceived barrier was institutional barriers. Furthermore, in the same study, it was also determined that there was a significant and strong relationship between barriers and applications, knowledge, attitudes and EBP. It can be said that the results of the study are similar to the results of our study. Care is among the duties of nurses and other health personnel. Therefore, the person who is primarily responsible for care and decides on care should be the nurse and other health personnel. Care, which is the independent area of health care professionals working together with the doctor, should be applied in accordance with the opinions of the personnel who provide care, in cooperation of health care professionals with the doctor (Staphone & Lanchester, 2016).

In the study carried out by Estabrooks (1999) in which the sources of information used by nurses in patient care were examined, it was determined that personal experiences were first used as a source of information, followed by information received during nursing education, hospital resources, and physicians, respectively. In the study carried out by Areskoug-Josefsson et al. (2012), it was determined that nurses mainly benefited from the information they received from patients, their personal experiences and local guides during clinical applications and that very few of them benefited from their own working styles and EBP. In our study, it was determined that practical guides (hospital resources) were the first source used. In the study carried out by Thiel and Ghosh (2008), it was determined that the majority of nurses received information from their friends or peers instead of investigating and nursing journals when there was a need for information on clinical applications and that very few of them obtained information from the nursing database. It can be said that the difference in our study was due to a reflection of quality works conducted in hospitals since 1999 or the use of practical guides in patient care made by the

hospital administration. The biggest obstacle for nurses to use research results in patient care is due to the fact that they do not find themselves sufficient to change patient care procedures (Parahoo, 2000). As a result of the systematic review performed by Ay and Gençtürk (2015) in Turkey, nurses indicated that the facts that they did not find themselves sufficient to create change in patient care and were not supported to conduct research in the working environment and to use the results were the obstacle for them to use research results. In our study, the first person who decides on care was determined to be the doctor. This result suggests that nurses do not find themselves sufficient in the field of care and do not have the authority to decide on care.

In our study, it was found out that the participants had high attitudes toward EBP and that the sub-dimension of intention application was at an average level. Furthermore, in our study, it was determined that there was a relationship between gender and receiving the research course during education life and the attitudes toward EBP. In the study carried out by Koehn and Lehman (2008), it was determined that the EBPs and attitude scores of nurses were at an average level and that especially the mean knowledge and skills scores were quite low. In the study carried out by White-Williams et al. (2013), it was determined that the majority of nurses had an awareness of EBP and research association and that they mostly obtained high scores from the knowledge/skills and application sub-dimension of the sub-scale scores for evidence. In the study carried out by Thiel and Ghosh (2008), nurses' attitudes toward EBP were found to be moderate. In the study carried out by Yue et al. (2017), the EBP skills of nurses were found to be low, and nurses received the lowest score in summarizing evidence, carefully evaluating evidence and systematic literature review, explaining problems, spreading evidence, providing evidence in systematic research from the EBP sections. In the study carried out by Boström et al. (2008) with the nurses working in elderly units, it was determined that nurses could not come together with their friends having knowledge about the literature, could not reach the articles, had no application areas for research results and had not enough time to review and read articles. In the study carried out by Kocaman et al. (2010), it was determined that nurses stated that they did not have enough time to apply new ideas for the field. In the same study, it was determined that the fact that nurses were not informed about the studies carried out and their results and did not come together with their colleagues who have knowledge about nursing investigations was the biggest obstacle for nurses to follow research results. In the study carried out by Öztürk et al. (2010), it was determined that the important obstacles for nurses to use research data were the lack of time, failure to collect research results in a single center, limited opportunities in the implementation of research results, and the lack of enough time to read research. It can be said this situation was due to the excessive workload of nurses and other health professionals, inability to find enough time, the fact that they did not receive the research course and did not know a foreign language at a sufficient level, inability to access the studies carried out, and the fact that they did not have enough information about EBP. In our study, it was determined that there was no difference in the attitudes toward evidence between educational levels. In the study carried out by Koehn and Lehman (2008), it was determined that nurses' scores regarding the EBP varied by educational levels and that there was a statistically significant difference between the attitudes toward EBP with the increase in educational level. It can be said this situation was due to the fact that our sample consisted of the members of different professions and that the study was carried out with health personnel with different levels of education. Furthermore, it can be said that it was due to the fact that scientific publications were not monitored in clinics after education.

CONCLUSION AND RECOMMENDATIONS

The use of EBP is increasingly emphasized in the field of health. It can be said that students' interactive participation in a lesson in research courses and the fact that they perform one-to-one application for the research are important in terms of the

development of knowledge, skills, and attitudes. It can be useful for them to organize curricula and to perform one-to-one application in terms of increasing their attitudes toward evidence. Furthermore, the need for health personnel to conduct research in the clinic and field after education will contribute to their access to new information created for evidence and will be useful in terms of critically evaluating and implementing the knowledge. To increase participation in professional scientific activities after graduation is also important in increasing attitudes toward EBP.

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