

Original Paper

Investigating the Relationship Between Professional Status and Professional Commitment of Nurses



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ABSTRACT

Introduction: One of the priorities of nursing education is to provide solutions to nurses' questions so that they can remain in their career and render professional services. Committed nurses work harder to improve their careers. Professional status can boost nurses' confidence.

Objective: To determine the relationship between professional status and professional commitment in nurses working in hospitals of Kashmar City, Iran.

Materials and Methods: This analytical cross-sectional study was performed on 230 nurses working in Kashmar City hospitals. They were selected by the census method in 2019. The data collection tools were the nursing professional status questionnaire and the Cliekman and Henning professional commitment questionnaire. The obtained data were analyzed with the Spearman, Kruskal-Wallis, and Mann-Whitney U statistical tests.

Results: The Mean±SD age of the nurses was 31.57±6.82 years (35.5% men and 64.5% women). Their Mean±SD score of professional status was 44.09±6.19, and their Mean±SD score of professional commitment was 48.04±9.42. The highest score of professional status belonged to the self-confidence component. The Spearman correlation coefficient showed a significant relationship between the dimensions of self-confidence, treatment team staff, and community in professional status and professional commitment of nurses ($P<0.05$). Confidence was the most important predictor for professional involvement in terms of professional status dimensions ($R^2=0.228$).

Conclusion: Health policymakers are advised to take the necessary steps and develop professional status promotion programs and skills related to maintaining professional commitment in nurses.

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Highlights

- Nursing is a humane profession and requires people who can manage their professional responsibility.
- Professional status can increase professional commitment in nurses.
- Among the dimensions of professional status, self-confidence is one of the most important predictors for professional commitment.
- The results of this study highlight the upholding of professional commitment and improving the professional status of nurses.

Plain Language Summary

Professional commitment means performing assigned tasks without any oversight, which increases the professional ability and decision-making in nurses. The higher the professional commitment of nurses, the higher would be their quality of nursing care. Another factor affecting the quality of patient care is professional status, which reflects the social status of the job and provides a unique path to personal success. Nurses with low professional status perform unprofessionally. Unfortunately, the general picture of nursing in Iran is a relatively negative one. The current shortage of nurses is also a serious challenge around the world. In this study, the relationship between professional status and professional commitment of 220 nurses was assessed. The results showed that their professional status is moderate, and their professional commitment is high. Also, there is a direct relationship between professional status and professional commitment. Based on the results, we suggest that the professional status of nurses be promoted by providing in-service training.

Introduction

Commitment is a human trait that exists in all people, but not everyone is equally committed to something or someone [1]. Professional commitment demonstrates a person's loyalty to that profession [2]. Professional commitment means determining one's identity with the profession, including the commitment and dedication to the profession [3]. Professional commitment can be defined as profound satisfaction and practical commitment to the tasks assigned to a person, provided that the person performs his or her duties in the best possible way without any oversight system [1].

Professional commitment, as a strong belief and acceptance of professional values, strongly motivate people to promote their profession and maintain their membership in the profession [4, 5]. Nursing is a humane profession and needs the people who not only enter the profession with a heartfelt desire but also maintain their commitment to the profession and attempt to improve it [6]. The study of professional commitment in nursing shows that if nurses are more committed to the profession, they will strive more to improve their profession, and more inclined to participate in it [7].

A review of the studies in the field of commitment in the nursing profession shows the relationship between professional commitment and factors such as individual stability and staying in the profession [7-9], job performance [10], and job satisfaction [1, 11-13]. Other studies have shown that nursing care is provided with higher quality in hospitals where nurses work with a high professional commitment [14-16]. Garcia-Moyano et al. reported that nurses' professional commitment increases the quality of care and safety and patients' satisfaction, as well as increases nurses' professional ability and decision-making [17].

Another factor that affects the quality of the patient's care is the professional status [18]. According to sociological theories that examine the concept of social class, professional status reflects the social status of the profession [19]. If the social status of the job is low, tension will appear in the professional status [18, 20]. A high professional status may create high self-esteem, which is associated with high job satisfaction [19, 21]. Respect gained from professional status is the key to success [22]. Low professional status in nursing leads to reduced professional satisfaction, dependence on others when deciding on patient's care, and low participation with other health professionals related to patient's care [18].

The results of a study in the United States showed that working in an environment where professional status is high reduces depression and job stress [23]. Studies in Iran have shown that ignoring the professional status and social reputation of nurses is the cause of about 70% of their job dissatisfaction and unprofessional performance [18, 20].

The results of another study on the relationship between nursing professional status and social health in Iran showed that 64% of nurses had average professional status, 17.5% of them had poor professional status, 3.1% had a very low professional status, and 13.4% had excellent professional status. The reasons for low professional status in this study were low academic standards, limited job opportunities, and low payments, and the nurses' feelings about being inferior to doctors [19].

Given the importance of the two components of professional status and commitment in the job of nursing, which is directly related to the emotion of human beings, it seemed necessary to conduct a study that specifically examines the professional status and commitment of nurses. So the present study aimed to determine the relationship between professional status and professional commitment of nurses working in hospitals of Kashmar City, Iran affiliated to Mashhad University of Medical Sciences. The results of this study help managers to plan for the improvement of nursing services quality. Besides, the predictive ability of professional status in estimating professional commitment was also taken into account.

Materials and Methods

In this analytical cross-sectional study, the statistical population consisted of all nurses working in Kashmar City hospitals in 2019. A total of 230 nurses entered the study by a total census sampling method. First, a list of all departments in which nurses were working was prepared, and all nurses who met the inclusion criteria (with at least a BS in nursing, signing an informed consent to participate in the research, and 1 year of working experience) entered the study. The exclusion criterion was failing to complete less than 10% of the questionnaire.

Three questionnaires were used to collect data and achieve research objectives. The first questionnaire included demographic information such as age, gender, marital status, level of education, job status, work experience, workplace, organizational position, the presence of a nurse in the family, and having sufficient information when entering the nursing course. The second

questionnaire (nursing profession status) had 16 items that were designed by Tohidi et al [19], in 2016 in Persian and based on managerial and social theories. The questionnaire was used after obtaining permission from its designer. The subscales of this questionnaire are nursing status and self-confidence, nursing status and treatment team staff, nursing status and community, and nursing status and the managers. The scores for each subscale depends on the number of questions in each subscale. Each item of the questionnaire is rated on a 4-point scale (1=not at all, 2=low, 3=medium, 4=high). According to the designer's recommendations, the total score ranges from 16 to 64. A score between 16 and 26 indicates a very low professional status, between 27 and 38 a low professional status, between 39 and 50 a moderate professional status, and between 51 and 64 a high professional status [19]. The reliability coefficient of this tool was 85% calculated with the Cronbach alpha for the present study.

The professional commitment was also assessed using a questionnaire derived from the Clikeman and Henning 2000 standard questionnaire [24]. The questionnaire contains 15 items that reflect the professional commitment of nurses, and the 5-point scale was used to evaluate the responses (1=completely disagree, 2=disagree, 3=neither agree nor disagree, 4=agree, and 5=completely agree). It should be noted that items 3, 7, 9, 11, 12, and 15 are inversely scored. The total score obtained ranges between 15 and 75. In addition, professional commitment scores were classified as high (scores 45 and more), medium (scores 30-45), and low (scores 30 and less). The study of Hosseini and Soltani in Iran showed that this questionnaire has a high face and content validity [25]. The reliability of this tool was also confirmed by the Cronbach alpha coefficient of 90% for the present study.

To observe the ethical principles, we obtained a permission letter from the Vice Chancellor for Research of Mashhad University of Medical Sciences to do the research. Then the questionnaires were given to the study subjects. Sufficient information about the objectives of the study and its procedure was delivered to the participants. Oral consent was obtained from all nurses, and they were assured that participation in this study was optional and that all information recorded in the questionnaire would be anonymous and confidential. The participants were asked to set a time limit for submitting the completed questionnaires to researchers so that they could collect the questionnaires at the same time. After collecting the questionnaires, the obtained data were entered into SPSS version 22 and analyzed us-

ing descriptive and inferential statistics (the Spearman, Kruskal-Wallis, and Mann-Whitney U tests) at a significant level of 0.05. The Kolmogorov-Smirnov test was used to check the normality of the data.

Results

In this study, out of 230 questionnaires that were analyzed, 220 were complete regarding the nursing profession status. Therefore, the response rate of the participants in the study was 95.65%. The Mean±SD age of the nurses participating in this study was 31.57±6.82 years. The Mean±SD work experience was 7.58±6.01 years, and most nurses (69.5%) had less than 10 years of work experience. In terms of gender, 64.5% of the partici-

pants were women. Most respondents had a BS (94.1%) and 34.1% were interns.

Table 1 presents the frequency distribution of nurses participating in the present study. The Mann-Whitney U test was used to determine the relationship between gender, marital status, level of education, workplace, the presence of a nurse in the family, and having information before entering the field with each of the professional status subscales and professional commitment. The Kruskal-Wallis test was also used to determine the relationship between age, organizational position, occupational rank, and work experience with professional status and professional commitment scores.

Table 1. Demographic information based on the total score of professional status and the total score of professional commitment of nurses

Variable	No. (%)	Sig.	
		Professional Status	Professional Commitment
Age (y)	< 30	0.26*	0.13*
	30-40		
	> 40		
Gender	Male	0.33**	0.63**
	Female		
Marital status	Single	0.84**	0.32**
	Married		
Level of education	BS.	0.01**	0.14**
	MS.		
Organizational position	Nurse	0.05*	0.54*
	Head nurse		
	Supervisor		
Workplace section	Critical	0.38**	0.62**
	General		
Job rank	Internship	0.41*	0.05*
	Contractual employee		
	Chargeable employee		
	Official employee		
Work experience (y)	1-9	0.59*	0.14*
	10-20		
	>20		
Presence of a nurse in the family	Yes	0.06**	0.20**
	No		
Having information before entering the field of nursing	Yes	0.057**	0.08**
	No		

* The Kruskal-Wallis test; ** The Mann-Whitney U test

Table 2. Variables related to nurses' professional commitment based on the linear regression model

Predictive Variables	SE	Beta	Sig.	95%CI	
				Lower	Upper
Professional status and self-confidence	0.21	0.89	0.001	0.477	1.310
Professional status and treatment team staff	0.33	0.71	0.032	0.062	1.375
Professional status and community	0.28	0.86	0.003	0.306	1.422
Professional status and managers	0.79	-1.44	0.065	-3.019	0.130

Based on the results, the Mean \pm SD score of professional status was 44.09 \pm 6.19, which indicates a mean level of professional status. The Mean \pm SD scores of various subscales of this variable with a scale of 100 points were as follows: 76.99 \pm 16.49 in the subscale of self-confidence, 47.88 \pm 17.93 in the subscale of treatment team staff, 47.21 \pm 15.79 in the subscale of society, and 46.97 \pm 26.95 in the subscale of managers. In addition, the Mean \pm SD score of professional commitment was estimated to be 48.04 \pm 9.42, which showed a relatively high level of professional commitment of nurses. Also, the results of the Spearman test showed a significant relationship between professional status and professional commitment ($r=0.47$, $P=0.001$).

To find what subscales of professional status play a role in predicting professional commitment, the enter method of multiple linear regression statistical test was used (Table 2). According to Table 2, there is a significant relationship between self-esteem, treatment team staff, and community subscales of professional status with professional commitment. Regression standard coefficients indicate that self-confidence is the most important predictor for professional commitment. The square root of R for multiple linear regression was 0.228.

Discussion

The results of data analysis concerning the overall purpose of the study, i.e., determining the relationship between professional status and professional commitment, showed a significant positive correlation between professional status and professional commitment of nurses. That is, with increasing professional status, professional commitment increases, too.

In the study of Tohidi et al. conducted in Hamedan, the level of professional status among nurses was moderate [19]. They also collected their information using the nursing professional status questionnaire. It should be noted that professional status has been considered

as one of the factors in improving the quality of nursing care and job satisfaction of nurses [18]. Besides promoting effect, this variable plays a valuable part in people's social health [19]. Furthermore, it has been mentioned as an important factor influencing self-confidence [26]. At the same time, Bahrami et al. in their study, aimed to determine the relationship between social and professional status and job components, using the nursing professional status questionnaire. They found that the level of professional and social status among nurses is inadequate [18]. Differences in results may be due to differences in the number of nurses surveyed, as well as different research environments. Low professional status can lead to adverse consequences such as poor identity and the low independence of the nursing profession and thus reduced quality of nursing care [27].

The results of the present study showed that the nurses under study have a high professional commitment, which is consistent with the results of the Nogueras study [28], which could be due to the conditions prevailing in the workplace. In the study of Hosseini and Soltani, which was performed using the tools used to investigate professional commitment in this study, many nurses had a high level of professional commitment, with which the results of the present study are similar [25].

People with higher professional commitment are more motivated to promote their professional values. Furthermore, professional commitment is associated with participation, love, and believe in positive nursing values [2]. Nurses with higher professional commitment are less likely to think about quitting their careers than their peers [29]. The results of this study confirmed this finding, too. Moradi et al. [1] conducted a study to determine the relationship between professional commitment and job satisfaction of nurses. Their results showed that the professional commitment of the majority of nurses was moderate. As mentioned before, commitment is a human trait that exists in everyone. Still, not everyone is equally committed to something,

and factors such as satisfaction, religious beliefs, conscience, morality, culture, sense of belonging, economic status, and personality are the reason for the different levels of commitment from person to person.

According to the findings of the present study, among the various subscales of professional status, the lowest score belonged to the area of professional status and managers, which was lower than the average. Hard-working conditions and various job shifts can be made more tolerable if it is accompanied by appreciation and proper understanding of society, and especially the special attention of nursing officials and managers. The study of Jafar Aghaei et al. showed that the feeling of being appreciated and understood is one of the most important factors affecting professional commitment in nurses [30].

The results of the present study showed that self-confidence and having a sense of being valuable can have a significant impact on a person's sense of commitment to their profession. Therefore, emphasizing the spiritual aspects of the nursing profession, and especially reminding it to the freshman students can help them to progress in this profession and promote commitment among nurses. Given the importance of professional status and its impact on professional commitment, it is recommended that managers emphasize the various dimensions of nursing professional status at work. In-service training can also be considered in hospitals to familiarize nurses with professional status. Based on these results, we suggest that the managers of the hospitals improve the professional commitment of their employees by increasing their professional status.

One way to promote nurses' professional status is to involve them in decisions about nursing performance, thereby boosting their self-confidence and subsequent professional status. In this study, the role of professional status in improving professional commitment was considered. Future researchers are recommended to consider and study how professional status is formed. Also, examining and comparing professional status between different occupations may be considered as an issue for future research. Finally, it should be noted that other possible consequences of professional status can also be considered. The limitation of this study was the impossibility of examining professional commitment and nursing status separately for each hospital ward due to a large number of hospital wards.

Ethical Considerations

Compliance with ethical guidelines

This article is the result of a research project approved by the Research Ethics Committee of Mashhad University of Medical Sciences (Code: IR.MUMS.REC.1397.276) dated February 23, 2019.

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Authors contributions

Study concepts, design, data analysis, manuscript preparation, manuscript review and editing: All authors; Literature review and data acquisition: Akhtar Nejat Mohammad and Maryam Varzeshi; Definition of intellectual content and statistical analysis: Ali Safari and Jamshid Jamali.

Conflict of interest

The authors declared no conflict of interest.

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