

Towards a Comprehensive Model of Patient Empowerment Through Nursing Strategies: A Study in Iranian Hospitals

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Abstract: Nurses having significant roles as they provide high quality of care that leads to satisfaction patients. Empowering patients is a powerful tool for nurses to achieve required objectives. The purpose of present study is to introduce an integrated model of patient empowerment which can serve patient and create an environment for high quality of care in nursing that would assure patients' satisfaction and participation. In this descriptive study, 200 patients in six Iranian Social Security Organization hospitals were randomly selected. Data gathering tool was mainly the empowerment questionnaire designed by Spreitzer; in addition some part of it was modified in this work which is summed up to 20 questions. The questionnaires were distributed among designated patients then collected after determining the validity and reliability of investigations. In order to determine the effective strategies for the patients' empowerment, first the exploratory factor analysis was conducted and the obtained results of these steps were analyzed using confirmatory factor by Liserl software and then final model was extracted. In this study, the structural equation modeling was used to investigate among variables the existing relations in a model. Providing the necessary resources for patients with the ratio standard of 82% and patients' participation in selecting the kind of self-care with a standard coefficient of 74% had the highest impact on feeling, self-determination the kind of self-care for patient in the treatment process. Based on obtained values, (χ^2/df)=1.65, CFI=0.96, NNFI=0.95, GFI=0.84, RMSEA=0.07 it can be said that patient empowerment model appropriately corresponds to the actual data. The findings of present work showed that Nurses' strategies for Patients' empowerment had positive impacts on patients feeling to have self-determination and affected on their sense of impact. Providing the required resources for patients and their participation in their self-care, supporting and sympathizing with patients, answering patient's questions, training on how to care by themselves and treating them with courtesy and good communication are the most effective strategies for the empowerment of patients.

Key words: Empowerment • Patient • Nurse • Patient-Centred Care • Self-care

INTRODUCTION

In past decades, healthcare workers believed that they know what would be the best choice for patients; so that they can make decisions on behalf of patients. But such decisions were not usually acceptable for patients as individuals gradually became more aware of their rights. Patients were expected to have a right to choose for their comforts [1]. In recent years, another view has been arisen: that patients are, beside professional, expert on

their own bodies, symptoms and situation and this knowledge is necessary to succeed in treatment. In such case patients should be treated as partners in healthcare with both rights and responsibilities. In addition, healthcare politicians and governments might hope that active patients will manage self-care better than conventional care method; thereby alleviate the economic constraints on healthcare sectors [2]. In an effort to solve such problem, nurses play an important role in facilitating the process of patient empowerment [1].

The goal of patient empowerment has to build up the capacity of patients to help them to become active partners in their own care; to enable them to share in clinical decision making and this important concept can be translated to improve the delivery of patient-centred care [3].

Rodwell believes that the concept of empowerment is an assistance process in sharing values with others, mutual decision-making on how to use resources and opportunities and autonomy and freedom in choosing and accepting the responsibilities [4]. In order to achieve the best patients' health status, a new model of nursing has been designed. In this model, the importance of cooperation process between nurses and patients has been stressed [5]. This partnership approach in patient care is in fact the potentiality to empower patients and improve their independence from the nurses through patient active participation for their own treatment [6]. Holmstrom and Roing have defined the ideas of nurses' strategies for the empowerment of patients as behaviors, skills or special tools of nurses which are used for successful patients' empowerment program [2]. When nurses and patients are working together, they can determine the information they need about the health problems; patient thinks that is important [7].

Faulkner has suggested that providing illness related information, with clear answers to patients' questions is treated as an example of patients' empowerment in nursing care [8]. Patient empowerment begins with supply of information and education and includes seeking out information about one's own illness or condition and actively participating in treatment decisions [3]. Accessibility to support is another aspect of empowerment in patient care which can be fulfilled through several ways including: (a) listening to patient's fears and concerns (b) determining patient's attitudes, thoughts and feelings (c) asking patient to express what he has expected to receive through his interaction with health services providers [9]. When you are working with patients, nurses can determine the resources that can assist and ease to solve health problems and improve the health condition of the patients and facilitate the accessibility of their patients to interdisciplinary team members as a resource in their achievement of optimal health [9]. One of the key components of educational measures is that nurses notifies the patient's level of comprehension and avoid using specialized unnecessary terminology. In addition, they should try to solve patient's problems with the help of patients family members' knowledge and skills [10].

Aujoulat and his coworkers [5] have investigated on patients' empowerment; they have demonstrated that the necessary tools or skills for patients' empowerment spin on the mutual respect and communication which is exerted between nurses and patients. They believed that in nurses and patients' interaction in which nurses encourages patients to participate in their self-care. Patients can focus on their needs which have been established through patients, can transfer to their own powers for the benefit of patients [5]. A number of possible barriers have been identified which are related to the effective involvement of patients in decisions about their own care. These include uncertainty about patients' desire for participation, the types of information needed and problems with accessing suitable patient materials. Eliciting the preferences of patients and involving them in decisions about their care requires that health professionals have excellent communication skills and good quality information is readily available to patients when it is needed. Adequate resources will to be made available, as there are costs associated with developing, providing, using and dealing with the consequences of initiatives to support patient participation [11].

Recently, the healthcare system in Iran has focused on patient empowerment program by getting support from the Ministry of healthcare, Iranian nursing organization and nursing schools. But analysis of measurements are limited to train patients. There is not an integrated model available to maintain such issue. The purpose of present research is to investigate the impact of nurses' strategies on the empowerment of patients and propose a comprehensive model to explain nurses' strategies that can empower patients, bring patient satisfaction and high quality of treatments.

MATERIALS AND METHODS

In this study, the patients' empowerment was observed. Patients' empowerment covers four psychological aspects of feeling competence, having the right to choose, feeling of being effective and having a sense of value in their self-care. In order to logically determine the sample group sizes, the maximum likelihood method was used to estimate the models parameters. In Leizerl program, the maximum likelihood method is the default technique to estimate which is used by many researchers in this field. Boomsma [12] has suggested that if we are to estimate the parameters of the structural equation model by the maximum likelihood method, the size of the group (sample size) should be at least more

than 200 patients [12]. On the other hand, regarding the recognition of the 10 variables in the present study and considering some other variables recommended by other researchers for the moment Schumacker [13], Brannick [14] and Dillon *et al.* [15] called on to choose 20 samples for each variable, for 10 questions total of 200 samples were chosen [13-15]. Therefore, in this descriptive study, 200 patients who were hospitalized in medical, surgical, orthopedics, intensive care and emergency departments of six Iranian Social Security Organization hospitals were randomly selected.

Instrument for data gathering was Spreitzer empowerment questionnaire [16] which was partly designed and adjusted in accordance with the special status of patients' empowerment and included three parts: demographic data, patient empowerment situation (feeling of competent, meaning, self-determination and impact) and the effect of nurses' strategies on patients' empowerment. The measurement scale instrument was Likert 7-choice scale which was given 10 grades (ranging from never=0 to always=10). The validity of the questionnaire was measured through content validity. The internal consistency was measured through Cronbach's alpha which was equal to 89%. In order to review the effective strategies for the patients' empowerment, first the exploratory factor analysis was conducted. Then obtained results of these steps were analyzed using confirmatory factor by Liserl software and to evaluate the adequacy of sample size in confirmatory factor analysis, the Bartlett test was used.

Ethical issues were concerned with the participant's autonomy, confidentiality and anonymity during the course of study. All participants were informed about the purpose of investigation. In addition the study was based on voluntary nature of their participation. The research proposal was approved by the Scientific Research Board Members of Science and Research Branch, Islamic Azad University. Informed consent was attained from the participants in writing and signed by individual for all stages of the research. Moreover, an official permission was attained from the hospital director, nursing manager and patients in order to conduct investigation.

RESULTS

In this study, 51% of the participants were female and 49% of the patients were male and their average age was 35.7 years. In terms of literacy, 15% of the patients were

Table 1: Mean and standard deviation for the present status of patients' empowerment

Patient empowerment status	Mean	Standard deviation
Sense of competence	6.17	2.64
Sense of meaning	6.35	1.65
Feeling of self-determination	5.34	2.36
Feeling of impact	4.14	2.96
Overall ability of patients	5.75	1.65

illiterate, 40% had elementary school education, 34% were high school graduates and 11% had bachelor or higher degrees. About 20% of the patients were hospitalized in medical wards, 31% in the surgery department, 11% in the orthopedic ward, 30% in the ICU and 8% were hospitalized in emergency department.

Patients, on their current empowerment situation, reported that they are highly competent in their self-care and feeling of meaning, but the feeling of self-determination and impact was low (Table 1). In general, patients in Iranian social security organization hospitals considered their empowerment status at moderate level (5.75 out of 10).

Based on the exploratory factor analysis, responding to patients' questions, providing patient required resources, training on how to self-care, supporting and sympathizing for patient participation in their care, communication with courtesy and respect with patients were the manifest variables in nurses' empowerment strategies for the patients.

According to the findings, providing the required resources for the patient with the standard coefficient of 0.82 and involving the patients in self-care with a coefficient standard of 0.74 had the most impact on feeling of self-determination in self-care type and feeling of impact in the treatment process (Figure 1).

Sampling Adequacy index was equal to 0.824 and the significant level of Bartlett test was less than 0.001. Based on these two criteria, implementation of factor analysis was possible and patients' empowerment model with the following data had an appropriate compatibility(χ^2/df)=1.65, CFI=0.96, NNFI=0.95, GFI=0.84 and RMSEA=0.07.

Based on the standard rate, the nurses' strategies aspect had an impact on the feeling of self-determination and being effective ($p<0.05$, $t=5.93$); but it has less direct effect on the sense of competence and meaning as well as indirect effect (through having self-determination in the process of effective self-care) on competence and meaning of the patients.

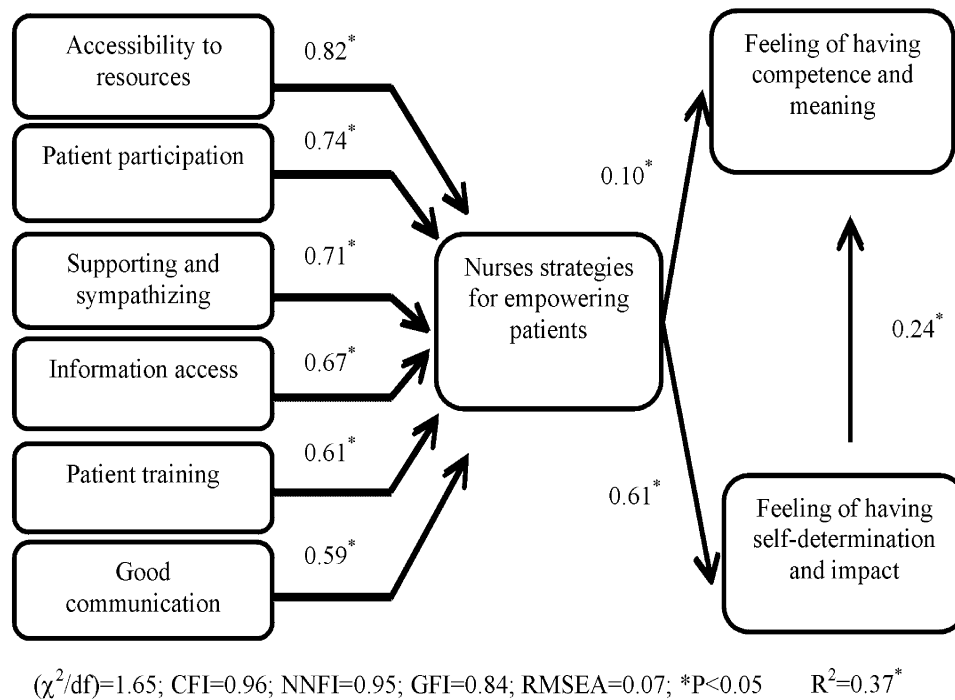


Fig. 1: The model of patient empowerment through nursing strategies

Six strategies of nurses to empower patients explained 0.37 of the variance in feeling self-determination and impact ($R^2=0.37$). The multiple correlation squared value indicates the power of the model. Thus, the model is properly able to predict patients' empowerment.

DISCUSSION

The obtained results showed that the importance of strategies, including responding to patients' questions, providing patient required resources, training on how to self-care, supporting and sympathizing for patient participation in their care, communicating with courtesy and respect with patients are effective on their feeling of having the right to choose and being effective. On the other hand, feeling of having self-determination and impact in the treatment process has affected on patients' sense of competence and meaning. These findings compatible with the investigation conducted by Laschinger and also reported in the literature [9].

Although all nurses' strategies in six hospitals were effective on the patients' feeling of self-determination and impact, providing the needed resources for the patients and patients' participation in their self-care process had the greatest effect on having self-determination in their self-care type and impact in the treatment process. These findings were harmonious with the results of the

investigation conducted by Aujoulat, *et al.* [5] which confirmed the fact that nurses can allocate resources and encourage patients to participate in their self-care and focus on the needs determined by the patient himself and transfer their power to patients and promote their ability level [5]. Multiple studies have demonstrated that patients who were involved in decisions about their care and the management of their conditions had better outcomes than those who were not involved in the care program [17-19].

Moreover, patients in this study stated the fact that the nurses' support and sympathy had a very significant effect on their ability. This finding confirmed with the results reported by Faulkner [8]. He has studied that nurses can create a supportive environment through maintaining the atmosphere and immediately solve the problems through respecting patient choices and providing recommendations to achieve the required health goals [8]. Lau [3] has believed that, the initial step in gaining respect and meeting patient's needs or preferences is to solicit their views and listen to what they say [3].

Responding to the patients' questions and training on how to take care of themselves is another important finding for the patients who help the patient in achieving the enjoyment of their choice and effectiveness of the treatment process. However, it has less efficacy in comparison with provide the needed resources for the

patient and patient's participation in their self-care and supporting and sympathizing. The empowerment process can be achieved through training and support. The essential attribute for these programmes lies with respect to the patient's unique and valuable perspectives rather than training the patient to shadow the health care professionals [3].

In the same field the reported results of investigation conducted by Virtanen [6] showed that nurses in their clinical care mostly pay attention to patients who were not in the hospital or are not familiar with the clinical environment. In such cases, the issues may cause them to feel powerless [6]. Faulkner [8] has emphasized that nurses must make their patients familiar with routine and surroundings at their initial visit and in their patients' training [8]. Poskiparta, *et al.* [20] have found that nurses should respond to their patients' questions should provide specific training in response to their patients' needs [20]. Patient empowerment begins with information and education and includes seeking out information about one's own illness or condition and actively participating in treatment decisions [21].

Nurses' good communication with patients had least effect on the feeling of having the right to choose the care type and their being effective in the treatment process. Although nurses' good communication and courtesy usually determines the effectiveness and patients' right to choose, this may be related to the lack of cooperation between nurses and patients and other professionals; that may cause a lack of attention to the views of patients in the recovery process. Therefore, a good and polite communication between nurses and patients which is essentially considered a type of partnership [22] can cause the patient to have the right to choose the type of treatment and their effectiveness in the treatment process. Providing the stated conditions for the cooperation is prepared and nurses are willing to communicate and cooperate with their patients.

The results of present work showed that patient empowerment provides an opportunity for the patients to increased their independence and have more participation in deciding on the kind of treatment and care for themselves. Aujoulat *et al.* [23] have believed that the result of patients' empowering process is extensively focused on his self-sufficiency. About the disease and patient behaviors and empowerments toward the treatment and also patient effective self-management over the disease and treatment [23]. Patients who have self-determination the kind of treatment and are effective in the process of treatment, accept more responsibilities about

their health, have more involvement in their treatment and feel more confident and satisfied with the treatment process. So it is important that nurses use what is considered the right to choose the kind of treatment and also being effective in the treatment process for the patient where they were hospitalized [9].

Limitations for present study include that the participants who choose to participate in this study may not be reflective of all patients who hospitalized in Iranian Hospitals. The findings of present research must be viewed with caution, then given the cross-sectional nature of the design, which capture a one-time snapshot picture of relationships among variables and preclude strong statements on causality.

CONCLUSION

The given model for the patients' empowerment is offered as an option that can help to build the relationship between the patients and nurses. Regarding the given approach, patients accept responsibility for the results of their choices. The findings indicated that nurses through empowerment strategies play an important role for improving the quality of patients' treatment. Providing the needed resources for the patient, patients' participating in their treatment, supporting and sympathizing with the patient, responding to patients' questions, training on the kind of self-care good communication with patient were the most useful empowerment strategies for patients in Iranian hospitals.

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