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Tomophobia and Professionalism among Nurses in Public Health Institutions in Anambra State: A study of Chukwuemeka Odumegwu Ojukwu University Teaching Hospital

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Abstract

This paper investigates the impact of Tomophobia on professionalism among nurses in public health institutions using Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Anambra state as focus. A cross-sectional survey method was adopted for data gathering and supplemented by qualitative data, which was generated through review of literature. From a population of 185 the research sampled all the 130 nurses present during the 4 days field work for data gathering. SPSS version 20.0 tools were used for data analysis. The results of analysis reveal the prevalence of compassion fatigue and burnout, indifference to patients care, retarding zeal for work and apprehension, and retarding interest for knowledge and more professional skills acquisition among the nurses due to tomophobic experiences. These tend to undermine general healthcare and successful surgeries. Among others, the paper recommends the employment of professional counsellors to address the rising tide of tomophobia, and quick administrative response to nurses demands for the review of their conditions of service.

Keywords: *Anambra State, nurses, professionalism, public healthcare, tomophobia*

Introduction

Nursing as a profession seeks to ensure the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations (American Nurses Association. 2010). Consequently, the profession seeks a standard of education and self-development: professional organizations; commitment; autonomy: continuing education, body of knowledge and competencies; social value: and a code of ethics that ensures the fulfilment of its purpose (ten Hoeve, et al. 2014; Ghadrian, et al. 2014; Ilisar & Karada, 2010; Oweis, 2005). Their acquisition, and the obligation of trained nurses to these requirements in the course of discharging their responsibilities and nurses role behaviours, which are viewed as professionalism (Jakovijevic & Ostojic. 2013), structure or define the effectiveness and achievement of healthcare institutions and nurses in general (Crues, et al. 2000; Swisher, et al. 2004).

Professionalism as used here refers to the conscious application of the principles of excellency, humanism, accountability and altruism that based on admirable clinical competence, interpersonal relationships, effective communication skills and ethical standards (Amir, et al. 2020). Professionalism guarantees nurses commitment to compassionate ethical and insightful practices, continual development, accountability, and demonstration of a spirit of collaboration and flexibility in the discharge of their duties (Hwang, et al. 2009).

Professionalism among nurses demands behaviours that produce high quality care, patient satisfaction, and trust on nurses, healthy teamwork, and compliance to treatment plans (Amir,

et al. 2020; Mueller, 2015). Such behaviours include caring, communication skills, empathy, attention to detail, problem solving skills, sense of humour, and commitment to patient advocacy, willingness to learn ethical thinking, and good leadership. These tends to generate incredible nursing performance, personal and professional autonomy, critical thinking, clinical reasoning, empowerment and ability to reflect on practice in better levels of education and training, active participation in research activities” (Amir, et al. 2020) and positive motivation among nurses. Professionalism provides guidance for nurses to self-regulate themselves, adhere to social and ethical values maintain high ethical standards and commitment to career development.

However, Fantahun et al, (2014) and Yonatan et al, (2015) noted that character of membership nature of communication, changes in nursing practice lack of autonomy, lack of leadership skills health care risks, emotional load among other factors tend to puncture nurses profession practices and their efficaciousness regardless of the availability of performance enhancing factors noted above. Among the anti-professional factors, Woldegerima et al, (2018), Braam et al (2019), and Dagona & Uduak (2019) identified anxiety and depression caused by risk of infection, poor and lack of medical equipment, and personal protective instruments (Bradt et al, 2013; Bausal & Joon, 2018) among other as fundamental factors. Anxiety is an emotion characterized by a feeling of uneasiness and fear without specific object and worry. It is an overreaction to a situation that is subjectively seen as menacing that may lead to symptomatic tension and apprehension, muscular tension, restlessness, fatigue, inability to catch one's breath, and problems of concentration (Barlow, 2010).

Although anxiety and fear act as a safeguard to keeping people alert and away from ignoring danger, drives and enhances physical and intellectual performances (Bradt et al. 2013; Janis, 2009, Smith. 2008), it causes people in this case nurses) to withdraw from situations provoking it (Saini & Dayal, 2016: Gonçalves et al. 2019) Thus, tomophobia among nurses could lead to withdrawal from less commitment to and manifestation of anti- professional behaviours among nurses. This phenomenon has received little or no attention in the literature as most studies focused on the causes and impact of tomophobia on patients and surgical outcomes, and remedies while neglecting the prevalence and consequences of such for professionalism among nurses. No available and/or accessible study examined this in Nigeria generally and Anambra state in particular. This study attempts to fill this lacuna using Chief Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku. Anambra slate as case study.

Thus, the purposes of this study are:

1. To determine whether Nurses working at Chief Chukwuemeka Odumcgwu Ojukwu University Teaching Hospital Amaku, Anambra state exhibit high-level of professionalism:
2. To determine whether significant level of Tomophobia exist among nurses working at Chief Chkwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Anambra state;
3. To evaluate the level of relationship that exists between the level of Tonophobia and professionalism among Nurses working at Chie! Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Anambra state.

The relevance of this study is located in its potency to assist or provide useful guide to different groups and professionals in the healthcare industry such as doctors, patients, and their relatives on how to handle anti-professional behaviours of nurses arising from tomophobic experiences. It shall also enable stakeholders in the Medicare to evolve policies, programmes, and projects

that will alleviate tomophobia among nurses. This will reduce tomophobia among nurses there from enhance their professional services. Theoretically, the study is relevant to the extent that it tests different postulations as evident in the literature concerning the negative effect of Tomophobia on nurses' professionalism. Thus, its findings complement existing literature, and therefore, serve as source of data for further research in the field to researchers. In addition, it contributes to knowledge by making people realize that poor remuneration, pressure of work. Pseudo education etc. are not the only encumbrances to standard nurses' professional behaviours. Consequently, the study provides a framework through which nurses' poor performance can be explored. Equally, the study will guide future researchers in the area especially the aspects that affects thinking, emotion, and perception of nurses working in healthcare institutions.

Methods

This study adopts Institution based cross-sectional study design wherein data was collected from Nurses working at Chief Chukwuemcka Odunegwu Ojukwu University Teaching hospital Amaku, Awka - Anambra state and supplemented by qualitative data. The data were collected over a period of 4 days from August 21 - 24, 2023. The population of study consists of all nurses employed and currently serving in the hospital, which personnel unit records of the hospital holds as 185 from this population, the study sampled 130 Nurses from all the sectors or departments in the hospital who were on active duty in the study setting that fulfilled the inclusion criteria Such criteria include more than six month employment in the hospital at the time of the study, 18 years of age, availability and free will to participate, absence of mental impairment and professional certification.

Data was generated from the participants/sample using researchers' constructed and pre-tested Likert S-point scale constructed version of questionnaires, which had 4 parts, namely: participants socio-demographics, measurement of the level of professionalism among nurses, level of tomophobia among nurses, and the impact of tomophobia on the professional practice of nurses in the hospital The questionnaire is structured alone a likert scale of strongly agree (5), agree (4), no opinion 3), disagree (2), and strongly disagree (1). To test the validity and reliability of the instrument, the questionnaire was pretested on nurses in General Hospital Onitsha before the actual data collection and the Cronbah alpha result was 0.97%. The consent of the hospital authorities and participants dually obtained after explaining the aim and objectives of the study, the administration of the questionnaires began at Chief Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku with the assistance office student nurses alter a brief workshop to familiarize them on the data collection procedure. The data generated was checked for completeness, edited, and entered into EpiData version 3.1 before it was exported to SPSS version 21.00 for analysis.

Results

From the total 130 sample size or participants, 88 (67.7%) were female while 42 (32.3%) were male. With regards to educational qualification, 80 (61.5%) are holders of B.Sc. Nursing certificates, 45 (34.6%) hold diploma while 5 (3.9%) are holders of M.Sc. in Nursing Science. They have acquired working experiences ranging from 12months - 5years (21.3%), 6 - 10years (32.8%). 1|15 years (18.5%). 16-20years (1 1.7%). and 21 years and above (15.7%). Martially, 84 participants (64.6%) are married while 46 others are single.

Research Question I: Do Nurses exhibit high level of professionalism in their practices at Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Anmaku, Anambra state?

The SPSS analysis of the data generated reveals the followings:

Table 1: Results of SPSS Analyses of responses to questions on level of professionalism

S/N	Research questions	Grand Mean	Standard Deviation	Standard d Error	Tests of Between Subjects Effects	Sig.	Pairwise Comparisons
1	As a nurse, you recognize Personal capabilities, knowledge base and areas for development in your career	4.31	.205	.103	132.466	.000 & .002	@ 95% confidence Interval, no adjustments
2	You always engage in critical thinking about ethical issues in nursing professional practice	4.31	.205	.103	132.466	.000 & .002	@ 95% confidence Interval, no adjustments
3	You have been open minded and having the desire to explore new knowledge	4.01	.239	.241	240.296	.000	@ 95% confidence Interval, no adjustments
4	You always showcase initiative for new ideas and involved in taking actions to implemets those ideas	4.14	.918	.056	222.652	.262 & .000	@ 95% confidence Interval, no adjustments
5	You have received official query before based on your professional conduct or because of your approach to duties	1.32	.005	.416	11.544	.003	@ 95% confidence Interval, no adjustments

Source: SPSS analysis of responses to questions

Table one above reveals that a majority of the 130 participants recognize their personal capabilities, knowledge base and areas for development in your career. SPSS analysis of their responses to question 1, which sought to find out if the recognize personal capabilities, knowledge base and areas for development in your career reveals grand mean of 4.31 with a standard deviation and error of .205 & .103. The tests of Between-Subjects Effects reveals a significant mean difference of .000 & .002, whereas the mean difference should be significant at level. The Pairwise Compares carried out to determine the level of adjustment due to level of significances reveals no adjustment Thus, the ground mean of 4.31, which represents preferred in our likert scale measure, was accepted. Similar results were obtained from the analysis of responses to question 2 which sought to find out if the nurses engage in critical thinking about ethical issues in the nursing professional practice. Consequently, majority of the 130 participants engage in critical thinking about ethical issues in the nursing professional practice

Further, the SPSS analysis of responses to questions which sought to find out if the nurses have been open-minded and exhibit the desire to explore new knowledge reveals a grand mean of 4.01 with a standard deviation the .239 and error of .241. The Tests of Between-Subjects Effects reveals a significant mean difference of .000 whereas the mean difference should be significant at .05 levels. The Pairwise Comparison carried out to determine the level of adjustment due to level of significances reveals no adjustment Thus, the ground mean of 4.01, which represents Agreed in our likert scale measure, was accepted and implies that nurses Working in the study area have being open-minded and exhibit the desire to explore new knowledge.

The SPSS analysis of participants responses to question reveals grand means of 4.14 with a standard deviation of .918 whose .262 & .000 level of differences are insignificant when compared with .05 standard level of significance. Their Pairwise Comparisons equally reveal no adjustment. Thus, the grand mean of 4.14 representing Agree in our likert scale measure was accepted. This implies that majority of the participants always showcase initiative for new ideas and involved in taking actions to implement those ideas.

The analysis of responses to question 5 reveals grand means of 1.32 with a standard deviation of .005 whose .002 level of differences is insignificant when compared with .05 standard level of significance. The Pairwise Comparisons reveals no adjustment to the mean. Thus, the grand mean of 1.32 representing 'Strongly Disagree' in our likert scale measure was accepted. This implies that majority of the participants have not received official query before based on their professional conduct or because of their approach to duties.

Research Question 2: Do Nurses working at Chief Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku Anambra state experience significant, level of Tomophobia?

The SPSS analysis of the data generated reveals the followings:

Table 2: Results of SPSS Analyses of responses to questions on level of Tomophobia

S/N	Research questions	Grand Mean	Standard Deviation	Standard d Error	Tests of Between Subjects Effects	Sig.	Pairwise Comparisons
1	You experiences fear and anxiety any tine the hospital books surgery for any of your relatives or your patient	4.43	.234	.202	108.336	.000	@ 95% confidence Interval, no adjustments
2	You prefer alternative medical treatment in surgery cases most of the time.	4.14	.112	.443	107.421	.004	@ 95% confidence Interval, no adjustments
3	You experience fever tension and apprehension each time you have a duty schedule for surgical operation in your hospital	4.21	.239	.241	322.197	.000	@ 95% confidence Interval, no adjustments
4	As a patient you dread Surgery and prefer normal treatment during health challenges	4.14	.112	.443	107.421	.004	@ 95% confidence Interval, no adjustments

Source. SPSS analysis of responses to questions

In table two above, the SPSS analysis of responses to question 1, which sought to find out if the participants experience fear and anxiety any time the hospital books surgery for any of their relatives or patients reveals grand mean of 4.43 with a standard deviation and error of .234 & .202. The Tests of Between-Subjects Effects reveals a significant mean difference of .000, whereas the mean difference should be significant at .03 levels. The Pairwise Comparism carried out to determine the level of adjustment due to level of significances reveals no adjustment.

Thus, the grand mean of 4.43, which represents 'Agreed' in our likert scale measure, was accepted. This implies that majority of the participants experience fear and anxiety any time the hospital books surgery for any of their relatives or patients.

Further, the SPSS analysis of responses to questions 2 which sought to find out if the nurses prefer alternative medical treatment in surgery cases most of the time reveals a grand mean of 4.14 with a standard deviation of .112 and error of .443. The Tests of Between-Subjects Effects reveals a significant mean difference of .004 whereas the mean difference should be significant at .05 levels. The Pairwise Comparism carried out to determine the level of adjustment due to level of Significances reveals no adjustment thus, the grand mean of 4.14, which represents 'Agreed' in our likert scale measure was accepted and implies that majority of the nurses prefer alternative medical treatment in surgery cases most of the time.

In addition, the SPSS analysis of responses to question 3 reveals grand means of 4.21 with a standard deviation of .239 whose .000 levels of difference is insignificant when compared with .05 standard level of significance. Their Pairwise Comparisons equally reveal no adjustment. Thus, the grand mean of 4.21 representing "Agree in our likert scale measure was accepted. This implies that majority of the participants experience fever, tension and apprehension each time they have a duty schedule for surgical operation in the hospital.

Equally, the analysis of responses to questions 4, which ought to find out if the participants dread surgery and prefer normal treatment during health challenges, reveals a grand mean of 4.14 with a standard deviation of .112 and error of .443. The Tests of Between-Subjects Effects reveals a significant mean difference of .004 whereas the mean difference should be significant at .05 levels. The Pairwise Comparison carried out to determine the level of adjustment due to level of significances reveals no adjustment. Thus, the grand mean of 4.14, which represent 'Agreed' in our likert scale measure, was accepted and implies that majority of the nurses dread surgery and prefer normal treatment during health challenges.

Research Question 3: Is there a significant relationship between the level of Tomophobia among Nurses working at Chief Chukwuemeka Odunegwu Ojukwu University Teaching Hospital Amaku, Anambra state and the level of professionalism among them?

The SPSS analysis of the data generated reveals the followings:

Table 3: Results of SPSS Analyses of responses to questions on Tomophobia influence on professionalism

S/N	Research questions	Grand Mean	Standard Deviation	Standard Error	Tests of Between Subjects Effects	Sig.	Pairwise Comparisons
1	You experience compassion fatigue and burnout and tend to avoid attention or care required by surgical patients most of the times	4.11	.122	.563	278.126	.002	@ 95% confidence Interval, no adjustments
2	Surgical patients have complained indifference or lack of care against you to the authorities	4.31	.205	.103	132.466	.000 & .022	@ 95% confidence Interval, no adjustments
3	Anxiety, fear, and	4.21	.239	.241	240.296	.000	@ 95% confidence

	apprehension due to surgical experiences tend reduce your professional Zeal and commitment as a nurse						Interval, no adjustments
4	You have interest to advance your knowledge and acquire more professional & leadership skills in the field of surgery	1.32	.005	.416	112.544	.003	@ 95% confidence Interval, no adjustments

Source SPSS analysis of responses to questions

In table three above, the SPSS analysis of responses to question 1, which sought to, find out if experience compassion fatigue and burnout and tend to avoid attention or care required by surgical patients most of the times reveals grand mean of 4.11 with a standard deviation and error of 122 & .563. The Tests of Between-Subjects Effects reveals a significant mean difference of .002, whereas the mean difference should be significant at .05levels. The Pairwise comparison carried out to determine the level of adjustment due to level of significances reveals no adjustment. Thus, the grand mean of 4.11, which represents 'Agreed' in our likert scale measure, was accepted. This implies that the nurses experience compassion fatigue and burnout and tend to avoid attention or care required by surgical patients most of the times.

Further, the SPSS analysis of responses to questions 2, which sought to find out if the nurses prefer alternative medical treatment in surgery cases most of the time reveals a grand mean of 4.31 with a standard deviation of 205 and error of 103. The Tests of Between-Subjects effects reveals a significant mean difference of 000 & 002 whereas the mean difference should be significant at .05levels. The Pairwise Comparison carried out to determine the level of adjustment due to level of significances reveals no adjustment thus, the grand mean of 4.31, which represents 'Agreed' in our likert scale measure was accepted and implies that surgical patients hate complained of indifference or lack of care against mar majority the nurses to the authorities.

In addition, the SPSS analysis of response to question i reveals grand means of 4.21 with a standard deviation of 239 whose 900 level of difference is Insignificant when compared with 05 standard level of significance their Pairwise comparisons equally reveal adjustment.

Thus, the grand mean of 4.21 representing 'Agree' in our likert scale measure was accepted. This implies that anxiety, fear, and apprehension due to surgical experiences tend to reduce the professional zeal and commitment of majority of the participants as a nurse.

Equally the analysis of responses to question 4, which sought to find out if the participants have interest to advance their knowledge and acquire more professional and leadership skills in the field of surgery, reveal a grand mean of 1.32 with a standard deviation of .005 and error of .416. The Tests of Between-Subjects Effects reveals a significant mean difference of .003 whereas the mean difference should be significant at .05 levels. The Pairwise Comparison carried out to determine the level of adjustment due to level of significance reveals no adjustment. Thus the grand mean of 1.32, which represents 'Strongly Disagreed' in our likert scale measure, was accepted and implies that majority of the nurses do not have interest to advance their knowledge and acquire more professional & leadership skills in the field of surgery.

Discussion

The findings of the present study indicate that majority of nurses engage in critical thinking about ethical issues, exhibit open-minded behaviour and the desire to explore new knowledge in the field, showcase initiative for new ideas and participate in the process of their implementation, and have not received official query. These imply that high-level professionalism exists among nurses working at Chief Chukwuemeka Odumegwu Ojukwu University Teaching Hospital, Amaku, Anambra state.

It observes also that majority of the nurses experience fear and anxiety any time their relatives or patients have surgery case: prefer to use alternative medical treatment in surgery cases most of the time; experience fever, tension and apprehension each time they have a duty schedule for surgical operation; and prefer normal treatment to surgery during health challenges. These are indices of tomophobia and they express high-level prevalence of the phenomenon among most of the nurses working in the hospital. This finding collaborates previous observations made by Agama and Kibiti (2018), Mulugeta, et al. (2018), Bisson (2017), Homzová and Zeleniková (2015) and Vogelzangs, et al. (2010) to the effect that tomophobia causes health disorder and sicknesses in people. Therefore, reducing tomophobia through programmes such as Relaxation therapy, Cognitive Behavioural Therapy, acupuncture, and administration of anti-anxiety medication (Teater, 2013; Pritchard, 2009) is a viable treatment option for certain ailments or health disorder in people.

Further, the study observes that majority of the participants experience compassion fatigue and burnout avoid attention or care required by surgical patients most of the times experience retarding zeal for work due to anxiety and apprehension associated with surgical experiences; and do not have interest to advance their knowledge or acquire more professional & leadership skills in the field of surgery. These findings imply that tomophobia tend to reduce or negatively influence professionalism among nurses working at Chief Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Anambra state. This finding is at variance with previous studies by Yilmaz et al (2011), Pokharel, et al. (2011). Jjala, et al. (2010), which identified the impact of tomophobia on patients' recovery and/or post-surgery. The present finding brings to the fore that tomophobia among nurses affects surgical outcomes and patients recoveries negatively. This requires the attention of professional counsellors, in-service training, workshops, and administrative responses to nurses' demands to address the cause of the phenomenon

In conclusion, professionalism is the anchor of a successful nursing career and tends to define the activities of nurses working at Chief Chukwuemeka Odumegwu Ojukwu University Teaching Hospital Amaku, Anambra state. However, the prevalence of tomophobia among the nurses exerts negative influence on the effectiveness of professionalism on their career. The phenomenon generated compassion fatigue and burnout, indifference to patients' care,

retarding zeal for work and apprehension: and retarding interest for knowledge and more professional skills acquisition among the nurses. This has the potential to undermine general healthcare delivery and successful surgeries in the hospital. This study then recommends further investigation on the impact of retarding professional spirit among nurses on general healthcare delivery and surgical outcomes in the hospital. Secondly, The hospital should employ the services of professional counsellors to address the rising tide of tomophobia among nurses. Finally, quick administrative response is required to organize workshops/seminars on nurses. Professionalism, and Healthcare Delivery with a focus on tomophobia and political Will to review conditions of service for nurses in the hospital.

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