Factors affecting the perception of human dignity of nursing students

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Abstract
This descriptive cross-sectional study was conducted to determine the factors that influence the perception of human dignity among nursing students. The study was conducted between 14 April and 17 April 2023 with 191 students studying in the nursing department of the Faculty of Health Sciences of a university who had agreed to participate in the study. Data were collected using a questionnaire designed by the researchers on the literature and Scale of Human Dignity Perception and Understanding in Nursing. The arithmetic mean, standard deviation, median and frequency (in percent), Mann-Whitney U test, Kruskal-Wallis test, and Spearman correlation analysis were used to analyze the data. In this study, it was found that student nurses had a high level of understanding and perception of human dignity. In line with the findings, it is recommended that student nurses’ behaviors and attitudes be supported to provide care by ethical principles and values by respecting individuals’ values and differences.

Keywords: Human dignity; nursing; nursing students; values.

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1. Introduction

Human dignity can be defined as “respecting the inherent value and uniqueness of individuals and communities” [1]. Though the nursing profession has superior and distinctive values [2,3], human dignity constitutes one of the most important values among professional nursing values [4]. It is reported that the value of human beings wreathes around being created as a human, being human, and humanitarian behaviors [5]. For this reason, it is an undeniable fact that all people have equal worth and absolute dignity [6].

Respect for human dignity is recognized by national and international organizations (e.g., the European Union and the International Council of Nurses (ICN)). The Universal Declaration of Human Rights is a legal framework for United Nations Member States that promotes dignity as a fundamental right [7]. It is reported that human dignity has fundamental relational components that not only support the evaluation and recognition of freedom, individuality, autonomy, and respect but also encourage education and positive coping in situations of vulnerability [8].

Nurses can uphold and promote human dignity in their professional practices as they value and respect all patients and colleagues [1,9,10]. Healthcare professionals can fulfill their ethical and moral responsibilities by seeing, listening, and feeling [6,11]. Tehranineshat et al. [2] reported that approaching patients with empathy, providing them with a comfortable physical environment, respecting patients’ privacy, beliefs, and values, involving patients in decision-making processes, providing unbiased care, informing patients about treatment procedures and providing psychological and social assistance in hospitals contribute to the preservation of patient dignity [12,13].

According to ICN [14], “Nurses support and respect the dignity and universal rights of all individuals, in particular, their colleagues, patients, and their families”. It has further been emphasized that maintaining human dignity is the moral obligation of nurses and other health professionals [15,16]. There are some qualitative and quantitative studies in the literature examining human dignity in nursing [16-19].

1.1. Purpose of the Study

This study was conducted to determine the factors that influence the perception of human dignity among nursing students. This study sought answers to the following questions:

- What are the sociodemographic and professional characteristics of nursing students?
- What is the level of perception of human dignity among nursing students?
- Do sociodemographic and professional characteristics of nursing students affect their perceptions of human dignity?

2. Materials and Methods

This descriptive cross-sectional study was conducted with students studying in the nursing department of the Faculty of Health Sciences of a university.

2.1. Participants

Nursing students over 18 years of age, who volunteered to participate in the study, were included in the study. A power analysis was performed to determine the number of people to be included in the study. To calculate Cohen’s (d) Cohen suggested that d<0.2 is considered a “small” effect size, d=0.5 represents a “medium” effect size and d>0.8 corresponds to a “strong” effect size [20]. However, it was further reported that there may be specific cases where even a d value of 0.2 may refer to a strong effect size [20,21]. Cohen’s effect size (r) is calculated using the formula below.

\[ d = \frac{M_1 - M_2}{\sqrt{SD_1^2 - SD_2^2}} \]
Cohen’s effect size, in this study, was calculated as $r=0.374$. The results of the Power Analysis derived using the effect size are presented in Table I. R v3.6.1 (R Core Team, Vienna, Austria) program was used for the power analysis performed in the study, the alpha error was 5%, the beta error was 10% and the sample size was calculated as 175 with a test power of 0.93 [22,23]. Considering certain data loss, the data collection process was terminated when 191 samples were reached.

<table>
<thead>
<tr>
<th>TABLE I</th>
<th>THE IDEAL SAMPLE SIZE INDICATED BY THE POWER ANALYSIS RESULTS AND THE OPTIMAL SAMPLE SIZE TO BE USED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>N</td>
</tr>
<tr>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>3</td>
<td>75</td>
</tr>
<tr>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>5</td>
<td>125</td>
</tr>
<tr>
<td>6</td>
<td>150</td>
</tr>
<tr>
<td>7</td>
<td>175</td>
</tr>
<tr>
<td>8</td>
<td>200</td>
</tr>
<tr>
<td>9</td>
<td>225</td>
</tr>
<tr>
<td>10</td>
<td>250</td>
</tr>
<tr>
<td>11</td>
<td>275</td>
</tr>
<tr>
<td>12</td>
<td>300</td>
</tr>
</tbody>
</table>

2.2. Data collection tools

The study was conducted between 14 April and 17 April 2023 with 191 students studying in the nursing department of the Faculty of Health Sciences of a university who had agreed to participate in the study. The data collection tool consisting of two sections (Personal Information Form (PIF) and Scale of Human Dignity Perception and Understanding in Nursing) was applied by the researchers to the students who volunteered to participate in the study.

2.3.1. Personal Information Form (PIF)

Personal Information Form consists of a total of 10 questions, nine of which were closed-ended questions trying to reveal the age, gender, and grade of the students and one of which was an open-ended question trying to find an answer to their thoughts on the concept of human dignity.

2.3.2. Scale of human dignity perception and understanding in nursing

The scale of Human Dignity Perception and Understanding in Nursing was developed by Yıldırım and Akin Palandöken [24] to evaluate nurses’ understanding and perception of human dignity. The scale consists of 43 items and 3 sub-dimensions Perception, Understanding, and Care. In this study, the Cronbach Alpha reliability coefficient of the scale was calculated as 0.98.

2.3. Data Collection and ethics

Nursing students participating in the research were first informed about the study, and then they were delivered a questionnaire and scale. Nursing students were informed that participation in the research was based on the principle of voluntariness, that their names would be anonymized on the questionnaire, and that the data to be collected in this study would be used solely within the scope of the research. Data collection took approximately 10 minutes.
2.4. Data Analysis

Research data were transferred to the digital environment and analyzed using the IBM SPSS (Statistical Package for the Social Sciences) Statistics 21 program at the p<0.05 statistical significance level at the 95% confidence interval. For descriptive analyses, number, and percentage, minimum-maximum, mean and standard deviation values are presented. Whether the data were normally distributed or not was evaluated using the skewness-kurtosis values, Q-Q plot, and/or Shapiro-Wilk test. Mann Whitney U and Kruskal Wallis tests were used in independent groups to compare the data obtained with the personal and professional characteristics of the students. The relationship between the scale and the survey questions was examined with Spearman’s Correlation analysis, which is one of the analyses used for looking for correlation between variables.

3. Results

The distribution of the sociodemographic characteristics of the nursing students participating in the study is presented in Table II. In this study, it was found that 67% of the students were female, 39.26% were freshmen, 63.87% of the students had income commensurate with their expenditure, 53.93% had an academic score below 79 points, 60.21% liked their profession, 62.83% wanted to be a nurse, 54.45% had not taken any ethics course, 61.26% went into clinical practice. The mean age of nursing students was 20.83±1.93 (Table II).

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age (X±SD: 20.83±1.93)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-19</td>
<td>54</td>
<td>28.27</td>
</tr>
<tr>
<td>20-21</td>
<td>72</td>
<td>37.70</td>
</tr>
<tr>
<td>22 years of age and older</td>
<td>65</td>
<td>34.03</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>128</td>
<td>67.00</td>
</tr>
<tr>
<td>Male</td>
<td>63</td>
<td>33.00</td>
</tr>
<tr>
<td><strong>Grade</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Freshmen</td>
<td>75</td>
<td>39.26</td>
</tr>
<tr>
<td>Sophomores</td>
<td>34</td>
<td>17.80</td>
</tr>
<tr>
<td>Junior</td>
<td>31</td>
<td>16.23</td>
</tr>
<tr>
<td>Senior</td>
<td>51</td>
<td>26.70</td>
</tr>
<tr>
<td><strong>Description of the Economic Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Income commensurate with their expenditure</td>
<td>122</td>
<td>63.87</td>
</tr>
<tr>
<td>Income exceeding the expenditures</td>
<td>16</td>
<td>8.37</td>
</tr>
<tr>
<td>Income below the expenditures</td>
<td>53</td>
<td>27.74</td>
</tr>
<tr>
<td><strong>Academic score</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>80-100</td>
<td>88</td>
<td>46.07</td>
</tr>
<tr>
<td>79 and below</td>
<td>103</td>
<td>53.93</td>
</tr>
<tr>
<td><strong>Whether the Nurse likes the Profession or not</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>115</td>
<td>60.21</td>
</tr>
<tr>
<td>No</td>
<td>13</td>
<td>6.81</td>
</tr>
<tr>
<td>Partially</td>
<td>63</td>
<td>32.98</td>
</tr>
<tr>
<td><strong>Voluntarily Preferred to be a Nurse or Not</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>12</td>
<td>62.83</td>
</tr>
<tr>
<td>No</td>
<td>15</td>
<td>7.85</td>
</tr>
<tr>
<td>Partially</td>
<td>56</td>
<td>29.32</td>
</tr>
<tr>
<td><strong>Taken Ethics Course or Not</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>87</td>
<td>45.55</td>
</tr>
<tr>
<td>No</td>
<td>104</td>
<td>54.45</td>
</tr>
<tr>
<td><strong>Gone into Clinical Practice or Not</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>117</td>
<td>61.26</td>
</tr>
<tr>
<td>No</td>
<td>74</td>
<td>38.74</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>191</td>
<td>100.00</td>
</tr>
</tbody>
</table>

n: Number, %: Percentage

Median Scores of Nursing Students on the Scale of Human Dignity Perception and Understanding in Nursing and its sub-dimensions are presented in Table III. The median Total Score on the Scale of Human Dignity Perception and Understanding in Nursing was 212 (54-215). Median scores in the
Understanding, Perception, and Care sub-dimensions of the scale were determined as 74 (15-75), 65 (21-65), and 75 (16-75), respectively.

### TABLE III
MEDIAN SCORES IN THE SCALE OF HUMAN DIGNITY PERCEPTION AND UNDERSTANDING IN NURSING AND ITS SUB-DIMENSIONS

<table>
<thead>
<tr>
<th>The scale of Human Dignity Perception and Understanding in Nursing</th>
<th>Med (Min-Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding Sub-dimension</td>
<td>74 (15-75)</td>
</tr>
<tr>
<td>Perception Sub-dimension</td>
<td>65 (21-65)</td>
</tr>
<tr>
<td>Care Sub-dimension</td>
<td>75 (16-75)</td>
</tr>
</tbody>
</table>

A comparison of the Sociodemographic and Professional Characteristics of Nursing Students and their Median scores in the Scale of Human Dignity Perception and Understanding in Nursing and its sub-dimensions is presented in Table IV. Median scores in the Scale of Human Dignity Perception and Understanding in Nursing and its sub-dimensions are determined to be different depending on the gender of the nursing students (p<0.001, U=2277,500; p<0.001, U=2389,000; p<0.001, U=2729,500; p<0.001, U=2440,500) (Table 4). It was found that the median understanding sub-dimension score differed significantly according to the student’s class (p<0.05, KW=8,849), Perception and Care Sub-dimension median score differed significantly according to whether the nurse likes the profession or not (p<0.05, KW=10,063; p<0.05, KW=6,033) and that Total, Perception and Care sub-dimension median scores of the scale differed significantly according to whether the participant voluntarily preferred to be a nurse or not (p<0.05, KW=7,261; p<0.05, KW=12,648; p<0.05, KW=7,059).

### TABLE IV
COMPARISON OF THE SOCIODEMOGRAPHIC AND PROFESSIONAL CHARACTERISTICS OF NURSING STUDENTS AND THEIR MEDIAN SCORES IN THE SCALE OF HUMAN DIGNITY PERCEPTION AND UNDERSTANDING IN NURSING AND ITS SUB-DIMENSIONS

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Scale Total Score Med (Min-Max)</th>
<th>Understanding Med (Min-Max)</th>
<th>Perception Med (Min-Max)</th>
<th>Care Med (Min-Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-19</td>
<td>211 (129-215)</td>
<td>73 (45-75)</td>
<td>65 (39-65)</td>
<td>75 (45-75)</td>
</tr>
<tr>
<td>20-21</td>
<td>213 (72-215)</td>
<td>74 (20-75)</td>
<td>65 (26-65)</td>
<td>75 (26-75)</td>
</tr>
<tr>
<td>22 years of age and older</td>
<td>213 (54-215)</td>
<td>75 (15-75)</td>
<td>65 (21-65)</td>
<td>75 (16-75)</td>
</tr>
<tr>
<td>p-value</td>
<td>p=0,507</td>
<td>p=0,168</td>
<td>p=0,194</td>
<td>p=0,250</td>
</tr>
<tr>
<td>test value</td>
<td>KW=1,357</td>
<td>KW=3,569</td>
<td>KW=3,281</td>
<td>KW=2,770</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>213 (129-215)</td>
<td>75 (45-75)</td>
<td>65 (39-65)</td>
<td>75 (44-75)</td>
</tr>
<tr>
<td>Male</td>
<td>208 (54-215)</td>
<td>72 (15-75)</td>
<td>63 (21-65)</td>
<td>73 (16-75)</td>
</tr>
<tr>
<td>p-value</td>
<td>p=0.000**</td>
<td>p=0.000**</td>
<td>p=0.000**</td>
<td>p=0.000**</td>
</tr>
<tr>
<td>test value</td>
<td>U=2277,500</td>
<td>U=2389,000</td>
<td>U=2729,500</td>
<td>U=2440,500</td>
</tr>
<tr>
<td>Grade</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Grade (Freshman)</td>
<td>211 (72-215)</td>
<td>73 (20-75)</td>
<td>65 (26-65)</td>
<td>75 (26-75)</td>
</tr>
<tr>
<td>2. Grade (Sophomore)</td>
<td>212 (54-215)</td>
<td>74 (17-75)</td>
<td>64 (21-65)</td>
<td>75 (16-75)</td>
</tr>
<tr>
<td>3. Grade (Junior)</td>
<td>213 (105-215)</td>
<td>75 (15-75)</td>
<td>65 (34-65)</td>
<td>75 (56-75)</td>
</tr>
<tr>
<td>4. Grade (Senior)</td>
<td>213 (138-215)</td>
<td>74 (54-75)</td>
<td>65 (39-65)</td>
<td>75 (45-75)</td>
</tr>
</tbody>
</table>
### TABLE IV

**COMPARISON OF THE SOCIODEMOGRAPHIC AND PROFESSIONAL CHARACTERISTICS OF NURSING STUDENTS AND THEIR MEDIAN SCORES IN THE SCALE OF HUMAN DIGNITY PERCEPTION AND UNDERSTANDING IN NURSING AND ITS SUB-DIMENSIONS**

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Scale Total Score Med (Min-Max)</th>
<th>Understanding Med (Min-Max)</th>
<th>Perception Med (Min-Max)</th>
<th>Care Med (Min-Max)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>p-value</strong></td>
<td>p=0.329</td>
<td>p=0.031*</td>
<td>p=0.381</td>
<td>p=0.674</td>
</tr>
<tr>
<td><strong>test value</strong></td>
<td>KW=3,435</td>
<td>KW=8,849</td>
<td>KW=3,072</td>
<td>KW=1,534</td>
</tr>
</tbody>
</table>

**Description of the Economic Status**

- **Income commensurate with their expenditure**
  - 213 (72-215)
  - 74 (15-75)
  - 65 (26-65)
  - 75 (26-75)
  - p-value: p=0.172
  - test value: KW=3,518
- **Income exceeding the expenditures**
  - 211 (178-215)
  - 74 (47-75)
  - 64 (52-65)
  - 75 (60-75)
  - p-value: p=0.144
  - test value: KW=4,244
- **Income below the expenditures**
  - 211 (54-215)
  - 73 (17-75)
  - 65 (21-65)
  - 75 (16-75)
  - p-value: p=0.391
  - test value: KW=1,878

**Academic score**

- **80-100**
  - 213 (105-215)
  - 74 (15-75)
  - 65 (34-65)
  - 75 (44-75)
  - p-value: p=0.120
  - test value: KW=1,534
- **79 and below**
  - 211 (54-215)
  - 74 (17-75)
  - 65 (21-65)
  - 75 (16-75)
  - p-value: p=0.212
  - test value: KW=1,708

**Whether the Nurse likes the Profession or not**

- **Yes**
  - 212 (54-215)
  - 74 (17-75)
  - 65 (21-65)
  - 75 (16-75)
  - p-value: p=0.126
  - test value: KW=5,519
- **No**
  - 201 (105-215)
  - 69 (15-75)
  - 62 (34-65)
  - 72 (56-75)
  - p-value: p=0.070
  - test value: KW=5,407
- **Partially**
  - 213 (129-215)
  - 75 (40-75)
  - 65 (37-65)
  - 75 (45-75)
  - p-value: p=0.067
  - test value: KW=10,063

**Voluntarily Preferred to be a Nurse or Not**

- **Yes**
  - 212 (54-215)
  - 74 (17-75)
  - 65 (21-65)
  - 75 (16-75)
  - p-value: p=0.070
  - test value: KW=12,648
- **No**
  - 202 (105-215)
  - 71 (15-75)
  - 60 (34-65)
  - 74 (52-75)
  - p-value: p=0.067
  - test value: KW=7,261
- **Partially**
  - 214 (129-215)
  - 74 (45-75)
  - 65 (39-65)
  - 75 (45-75)
  - p-value: p=0.027
  - test value: KW=12,648

**Taken Ethics Course or Not**

- **Yes**
  - 213 (105-215)
  - 75 (15-75)
  - 65 (34-65)
  - 75 (45-75)
  - p-value: p=0.131
  - test value: KW=7,261
- **No**
  - 211 (54-215)
  - 74 (17-75)
  - 65 (21-65)
  - 75 (16-75)
  - p-value: p=0.027
  - test value: KW=7,261

**Gone into Clinical Practice or Not**

- **Yes**
  - 213 (54-215)
  - 75 (15-75)
  - 65 (21-65)
  - 75 (16-75)
  - p-value: p=0.172
  - test value: KW=7,261
- **No**
  - 211 (72-215)
  - 74 (20-75)
  - 65 (26-65)
  - 75 (26-75)
  - p-value: p=0.674
  - test value: KW=7,261

*p<0.05, **p < 0.001*
The correlation between Median Scores of Nursing Students on the Scale of Human Dignity Perception and Understanding in Nursing and its sub-dimensions are presented in Table V. A statistically significant relationship was found between Median Scores of Nursing Students in the Scale of Human Dignity Perception and Understanding in Nursing and Understanding, Perception, and Care sub-dimensions (r=0.829, p<0.001; r=0.788, p<0.001 r=0.747, p<0.001) (Table V).

### TABLE V
**CORRELATION BETWEEN THE SCALE OF HUMAN DIGNITY PERCEPTION AND UNDERSTANDING IN NURSING AND ITS SUB-DIMENSIONS**

<table>
<thead>
<tr>
<th>Scales</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Scale of Human Dignity Perception and Understanding in Nursing</td>
<td>1,000</td>
<td>0.829**</td>
<td>0.788**</td>
<td>0.747**</td>
</tr>
<tr>
<td>2. Understanding Sub-dimension</td>
<td>1,000</td>
<td>0.449**</td>
<td>0.539**</td>
<td></td>
</tr>
<tr>
<td>3. Perception Sub-dimension</td>
<td></td>
<td>1,000</td>
<td>0.692**</td>
<td></td>
</tr>
<tr>
<td>4. Care Sub-dimension</td>
<td></td>
<td></td>
<td>1,000</td>
<td></td>
</tr>
</tbody>
</table>

*Note. Spearmen’s correlation coefficient. *p<0.05, **p < 0.001*

Nursing students answered the question “What does the concept of human dignity mean to you?” with the following answers: “that a person is a valuable being”, “a person should be worthy of respect” and “A person should be loved just because s/he is human and s/he should respect others and her/himself.”

### 4. Discussion

The findings obtained in this study, which was conducted to determine the factors affecting the perception of human dignity among nursing students, were discussed in line with the literature.

The median total score of the nursing students on the Scale of Human Dignity Perception and Understanding in Nursing was 212 (54-215); median scores in the Understanding, Perception, and Care sub-dimensions of the scale were determined as 74 (15-75), 65 (21-65) and 75 (16-75), respectively. A higher median total score on the Scale of Human Dignity Perception and Understanding in Nursing indicates that nursing students have high levels of Understanding and Perceiving Human Dignity. Within the scope of a study conducted by Aydin et al. [25] examining nursing students’ values and their tendencies toward ethical and professional values, it was determined that nursing students scored an average of 46 points in the human dignity sub-dimension of the Professional Values Scale.

Median scores obtained from the Scale of Human Dignity Perception and Understanding in Nursing and its sub-dimensions were determined to differ depending on the nursing students’ gender. In the study examining the professional value perceptions of nursing students and the affecting factors thereof, Karadağlı [26] found that the human dignity sub-dimension scores of nursing students statistically significantly differ depending on their gender and their grades in academic education. In another study examining the individual values of nursing students and their tendencies towards ethical and professional values, Aydin et al. [25] reported that the human dignity sub-dimension scores in the Nurses Professional Values Scale differed depending on the gender of the nursing students, however, whether the participant voluntarily preferred to be a nurse or not did not affect this score. The nursing students’ differing perceptions of human dignity depending on their gender may be attributed to the fact that professional values are related to social and cultural values and that the role of providing care has traditionally been considered in society as a female’s role [27,28].

It was further determined that the median score in the Understanding sub-dimension of the scale differed significantly depending on the grades of the students in their academic program. The median score in the Perception and Care sub-dimension of the scale was determined to be significantly different depending on whether the nurse likes the profession or not and that median total score in the scale as well as Perception and Care sub-dimensions were determined to be significantly different depending on whether the student voluntarily preferred to be a nurse or not. In a study conducted by
Green [29], examining the professional values of nursing students, it was reported that the 3rd-grade students’ Care sub-dimension scores in the Nurses Professional Values Scale differed significantly compared to other students studying in different grades. In another study in which Elmali [30] tried to reveal professional value perceptions of nursing students, it was determined that the Human Dignity sub-dimension scores did not differ depending on the grade of the students in their academic program. Kantek, Kaya, and Gezer [31] further reported that human dignity levels of 4th-grade and freshmen nursing students differed statistically and that human dignity scores of 4th-grade students were higher.

5. Conclusion

Considering that nursing education can affect students’ perception of human dignity, perception of human dignity is expected to increase as the grades of the students in their academic program increase. The median Total Score on the Scale of Human Dignity Perception and Understanding in Nursing in this study was found to be 212 (54-215).

It was further concluded that the median total score on the Scale of Human Dignity Perception and Understanding in Nursing differed depending on some sociodemographic and professional characteristics of nursing students. In line with the findings derived from this study, we recommend that it is necessary to support nursing students’ behaviors and attitudes in providing nursing care in line with ethical principles and values by respecting the values and differences of individuals.

References


