# **Factors Related To Nurses Caring Behavior In Inpatient Unit**

## Rina Fitriani<sup>1</sup>, Hany Wihardja<sup>2</sup>

<sup>1</sup>Head of Subsection, dr. Suyoto Hospital, Veteran Raya Street, South Jakarta <sup>2</sup>Department of Nursing, Universitas Kristen Krida Wacana, Central of Jakarta Email: hany.wihardja@ukrida.ac.id

#### **Abstract**

Caring is the essence of nursing practice. Caring is also an approach to increase a sense of caring for patients. This attitude can help patients achieve improved quality of recovery and health. Caring from the patient's point of view is a humane attitude expected by the patient. Caring is basically a nurse's behavior, so that caring basically depends on the characteristics and motivation of an individual nurse. This study aims to identify the factors that most influence the caring behavior of nurses in the inpatient room. Research methodology: This research is an analytic observational study with a Cross-sectional approach. The samples technique was total population of nurses that is 137 nurses. Three instrument used in this study are characteristic respondent, work motivation, Caring Nurse-Patient Interaction Scale (CNPI-23). Data analysis using Chi Square test, Kendall's Tau-b and Logistic Regression. The results of this study found that nurses' work motivation was the most influencing factor for nurses' caring behavior (p value 0.022). Nurses with high work motivation voluntarily perform their best efforts and skills when working and do not feel physical or mental pressure. As a result, they can show a sense of caring, empathy, and sensitivity to patients during nursing care. Further recommendation that can be given to hospital management are to pay attention to the creation of a motivational work climate, so that workers have high work motivation at work.

**Keywords:** Caring, Individual Characteristic, Inpatient Unit, Nurse, Work Motivatio

#### Introduction

Hospital as a health service institution that provides health services by providing inpatient, outpatient, and emergency services. Hospitals provide quality and affordable health services to the community to improve the level of health in all fields and types of disease. In providing health services, it is necessary to have health workers who support improving the quality of the services provided. The quality of health services is health services that can satisfy every user. Nurses as one of the most health workers in hospitals are expected to provide care based on caring in accordance with the nursing code of ethics (Syisnawaty, 2017).

Caring is a necessary relationship between the giver and recipient of care to improve the patient's health status as a human being, thereby influencing the patient to recover. Caring is at the core of nursing practice as the main approach in providing nursing care. Watson in his book entitled "The Philosophy and Science of Caring" writes about the caring behavior of nurses in the basic concept of caring which is built on ten carative factors which are ten caritas processes needed in the relationship between nurses and patients. To improve the quality of nursing services, every action must be followed by caring behavior (Arofiat, 2017).

Caring is a nurse's behavior, so caring influenced by various individual characteristics of nurses. This study will identify the relationship between individual variables, namely the characteristics and motivation of nurses with caring behavior of nurses. A research study conducted by Wakhid (2016) at the Prof. Dr. Soerojo Hospital, Indonesia, which showed that the results had no relationship between gender and nurse caring behavior with results (p value 0.062), while age, education and length of work had a significant relationship with nurse caring behavior, namely with the results of age, education, and length of work. Another study conducted by Sembiring (2019) in the Internal Medicine Unit at Medan Public Hospital, Indonesia, which showed that there was a significant relationship between gender and nurse caring behavior, while education and length of work had no

significant relationship. namely by education level, marital status, and length of work.

The behavior of nurses who are not caring will have an impact on patient satisfaction such as a sense of being uncared for and unappreciated which will have an impact on the patient's health. This can be caused by several factors such as failure of communication, friendliness, and accountability. Communication formed between patients and nurses is therapeutic communication which can improve patient health. Hospitality in greeting can be shown by nurses in giving a sense of caring to patients. Accountability requires nurses to be more responsible both to themselves and to others in providing care to patients. The aim of this study to identification of factors that influence the caring behavior of nurses in inpatient units.

#### **Research Methods**

This study uses a descriptive study design with a Cross-sectional correlational approach. This study aims to analyze factors that affect the behavior of nurse in dr. Suyoto Hospital. The independent variables of this study were the characteristics of nurses, consisting of age, gender, education levels, marital status, length of work, employment status, working unit, and work motivation. Meanwhile, the dependent variable was nurse behavior. The study was conducted from December 2021 to January 2022.

The research population was nurse at dr. Suyoto Hospital in South Jakarta. The total population was 140 nurses. Data were collected using total population sampling; the entire sample was 137 respondents. Meanwhile, three respondents were not involved in the study because they were on leave when data were collected. This study was conducted in seven inpatient rooms: Dahlia, Orchid, Boxwood, Carnation, Alamanda, Rose, and Ashoka Rooms in hospital.

The instruments used to collect data were questionnaires A, B, and C. Questionnaire A contained statements related to the nurses' characteristics, including age, gender, education levels, length of work, marital status, working unit, and employment status.

Questionnaire B contained nurses' work motivation, divided into intrinsic and extrinsic motivations. The results of measuring the nurses' motivation were split into two: low motivation with a value of < 70% (30.8) of the overall scores and high motivation with a value of  $\geq 70\%$  (30.8) of the overall scores. Researchers conducted instrument trials at St. Carolus Hospital and involved 29 nurses. This trial obtained Cronbach's Alpha of 0.753.

Questionnaire C contained statements about caring nurses' behavior that followed their perceptions. These statements were derived from the Caring Nurse-Patient Interaction Scale (CNPI-23) developed by Cossette et al. (2006) from the human caring theory initiated by Jean Watson (1979; 1988 in Watson, 2009). The CNPI-23 questionnaire was previously tested on 30 nurse respondents at Mintohardjo Hospital to gain validity. The reliability test was conducted with a reliability coefficient (Cronbach's Alpha) of above 0.7. The results of data analysis refer **Table 1 Distribution of Nurse (n = 137)** 

to the research objectives and hypothesis proving achieved through three analysis stages: univariate, bivariate, and multivariate analyses. This study has passed ethics from the Ethics Commission of Health Research and Development at the Sint Carolus School of Health and Sciences with reference number 010/KEPPKSTIKSC/I/2022 which was issued on January 20th, 2022. Data analysis using Chi Square test, Kendall's Tau-b and Logistic Regression

#### Results

Characteristic Respondents

Table 1 shows that the majority of nurse are 26-35 years old (65.7%), female (84.7%), and Diploma 3 nursing graduates (92.7%). Most of nurses have worked for five years (78.1%) and are married (66.4%). Moreover, the characteristics of nurse shown that most of them work in non-COVID-19 units (75.9%) and have the employment status of civil servants (93.4%).

The Characteristics of Nurse	To	otal
	n	%
Age		
Late Teenagers (17-25 years)	24	17.5
Early Adult (26-35 years)	90	65.7
Late Adult (36-45 years)	23	16.8
Gender		
Male	21	15.3
Female	116	84.7
<b>Education Level</b>		
Diploma	127	92.7
Ners	10	7.3
Length of Work		
New (< 5 years)	107	78.1
Moderate (6 - 10 years)	6	4.4
Long (> 11 years)	24	17.5
Marital Status		
Single	46	33.6
Married	91	66.4
Working Unit		
Unit NOn Covid-19	104	75.9
Unit Covid - 19	33	24.1
<b>Employements Status</b>		

## Rina Fitriani: Factors Related To Nurses Caring Behavior In Inpatient Unit

Civil Servant	128	93.4
Honorary Staff	9	6.6

Based on the result of work motivation, table 2 shows that 49.6% of nurse have a low motivation, while 50.4% have high motivation. The percentages between the two groups are almost equal. Work motivation was assessed from the nurses' intrinsic and extrinsic work motivation.

Table 2 Work Motivation of Nurse Associates in Inpatient Rooms of dr. Suyoto Hospital in 2022 (n = 137)

Carring Daharian	Total		
Caring Behavior	N	%	
Poor behavior	68	49.6	
Good behavior	69	50.4	

This study also identifies the level of caring behavior. The level of behavior divided into 2 category that are good behavior and poor behavior. Table 3 shows that the majority of nurse have good caring behavior (69.3%). The nurses subjectively assessed their caring behavior using the Caring Nurse-Patient Interaction Scale (CNPI-23), consisting of 23 questions about caring behavior in nursing care.

Table 3 Caring Behavior of Nurse Associates in Inpatient Rooms of dr. Suyoto Hospital in 2022 (n = 137)

Caning Dahavian	Total		
Caring Behavior	N	%	
Poor behavior	42	30.7	
Good behavior	95	69.3	

Relationship between Factors of Nurse Characteristics and Work Motivation and Caring Behavior in Inpatient Rooms of dr. Suyoto Hospital in 2022 (n = 137)

Table 4 Result of Statistical Analysis of the Relationship between Factors of Nurse Characteristics and Work Motivation and Caring Behavior in Inpatient Rooms

_	Caring Behavior		Total		p-value
Variable	Poor Good n (%) n (%)		Total	OR 95% CI	
			n (%)		
Age					
Late Teenagers (17 - 25 years)	6 (25)	18 (75)	24 (100)	1,046	0.467
Early Adult (26 - 35 years)	28 (31.1)	62 (68.9)	90 (100)	(0.943-1.160)	0.407
Late Adult (36 - 45 years)	8 (34.8)	15 (65.2)	23 (100)		
Gender					
Male	2 (9.5)	19 (90.5)	21 (100)	0,200 (0.044-0.902)	0.013*
Female	40 (34.5)	76 (65.5)	116 (100)	(0.044-0.702)	
<b>Educational Level</b>					
Diploma	38 (29.9)	89 (70.1)	127 (100)	0,640 (0.171-2.400)	0.515
Ners	4 (40)	6 (60)	10 (100)	(0.171-2.400)	

Length of Work					
New (≤ 5 years)	31 (29)	76 (71)	107 (100)	0,929	0.197
Moderate (6 – 10 years)	0 (0)	6 (100)	6 (100)	(0.821-1.051)	0.197
Long (≥ 11 years)	11 (45.8)	13 (54.2)	24 (100)		
Marital Status					
Single	16 (34.8)	30 (65.2)	46 (100)	1,333 (0.625-2.846)	0.459
Married	26 (28.6)	65 (71.4)	91 (100)	(0.028 2.010)	
Working Unit					
Unit Non Covid-19	36 (34.6)	68 (65.4)	104 (100)	2,382 (0.901-6.300)	0.065
Unit Covid-19	6 (18.2)	27 (81.8)	33 (100)	(05010000)	
<b>Employment Status</b>					
Civil Servant	40 (31.3)	88 (68.8)	128 (100)	1,591 (0.316-8.001)	0.559
Honorary Staff	2 (22.2)	7 (77.8)	9 (100)	(0.010 0.001)	
Work Motivation					
Low motivation	27 (39.7)	41 (60.3)	68 (100)	2,371 (1.119-5.021)	0.022*
High motivation	15 (21.7)	54 (78.3)	69 (100)	(2.11)	

Table 4 shows nurses aged 26-35 have the good caring behavior (68.9%). This result statistically indicates no significant relationship between nurse associates' age and caring behavior (p > 0.05). The majority of the respondents in X Hospital are female nurses who show high caring behavior (65.5%). This result indicates a significant relationship between nurse gender and caring behavior with a p-value of 0.043. Nurses with a Diploma 3 nursing education level have high caring behavior toward patients (70.1%). This result shows no significant relationship between nurse associates' education levels and caring behavior (p > 0.05). Nurses who have worked less than five years show high caring behavior (71%). This result denotes no significant relationship between nurse associates' length of work and caring behavior (p > 0.05).

Married nurses also have high caring (71.4%) behavior. This result indicates no significant relationship between nurse associates' marital status and caring behavior (p > 0.05). The majority of research respondents work in non-COVID-19 units and have the employment status of civil servants. They show good caring behavior. Both variables reveal no significant relationship between nurse associates' work units, employment status, and caring behavior (p > 0.05). Most nurse associates have high work motivation and caring behavior (78.3%). This result indicates a significant relationship between nurse associates' work motivation and caring behavior at X Hospital, with a p-value of 0.036.

Table 5 shows about the most related factor to caring behavior of nurse' in inpatient rooms, there are 3 variables with a p-value of < 0.25; these variables are gender (p-value of 0.013), working work (p-value of 0.065), and work motivation (p-value of 0.022). Therefore, these variables can be incorporated into the multivariate analysis.

Table 5 Bivariate selection result

Variable	p value
Age	0.467
Gender	0.013*
Length of Work	0.297
<b>Educational Level</b>	0.515
Marital Status	0.459
Working Unit	0.065*
<b>Employment Status</b>	0.559

Work Motivation 0.022\*

Table 6 indicates that one variable has a p-value of > 0.05. Meanwhile, two variables have a p-value of < 0.05; they are the variables of gender (p-value of 0.044) and work motivation (p-value of 0.015). The next step was to eliminate one-by-one variables with a p-value of > 0.05, for example, the variable unit of work (p-value of 0.125). The subsequent analysis was to test the interaction between the variable of gender and the variable of work motivation (gender\*work motivation) to explore the contribution of the two variables. The analysis has revealed a p-value of 0.229, greater than the p-value of 0.05. This score indicates no interaction between gender and work motivation. The modeling results are presented in Table 7.

Table 6 Initial Modeling of Logistic Regression Multivariate Modeling

Variable	В	S.E	Wald	p value	OR 95% CI
Gender	-1.583	0.786	4.056	0.044	0.205 (0.044;0.958)
Working Unit	0.795	0.518	2.350	0.125	2 . 2 1 4 (0.801;6.117)
Work Motivation	0.961	0.397	5.861	0.015	2 . 6 1 4 (1.201;5.692)
Constant	1.448	1.752	0.683	0.409	

Table 7 shows that the variables with a p-value of < 0.05 are gender and work motivation. Thus, it is concluded that both variables are the most related factors to nurse caring behavior. The variable of work motivation has the greatest OR result (2.510); thus, nurse motivation is the most influential factor on the dependent variable of the caring behavior of nurse. Nurses with low motivation have a possibility of 2.5 times showing poor caring behavior after being controlled by the gender factor. Meanwhile, female nurses have a chance of 0.1 times to show high caring behavior after being influenced by the work motivation factor.

**Table 7 Result of The Last Multivariate Model** 

Variable	В	S.E	Wald	p value	OR 95% CI
Gender	-1.690	0.777	4.723	0.030	$0.185 \ (0.040; 0.847)$
Work Motivation	0.920	0.392	5.526	0.019	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
Constant	2.665	1.579	2.850	0.091	

## **Discussion**

The characteristics of nurses in this study include age, gender, length of work, education levels, marital status, working unit, and employment status. Nyamwata et al. (2017) argue that social demographic factors can affect nurses' behavior and ability to work. Socio-demographic factors contribute to determining nurses' perception at work so that the emergence of positive or negative thoughts is closely related to a person's background. Nurses' characteristics refer to internal factors affecting their perception, motivation, and behavior when providing patient care.

This research has revealed that nurses aged 26 – 35 years shows a good caring behavior of 68.9%. The statistical analysis has discovered no significant relationship between the nurse's age and caring behavior in inpatient wards. This result is inline with study by Khanade and Sasangohar (2017), that revealed no relationship between a person's age and his caring behavior (Khanade and Sasangohar, 2017) explain that age cannot ensure nurses' maturity or experience. Nurses in the productive age are also influenced by other factors when responding to stimulation from their work. Therefore, younger ages do not always show better caring behavior provided for patients, and vice versa.

The relationship analysis of the gender characteristic has found a significant relationship between nurse associates' gender and behavior caring. This result agrees with the basic theory of nursing, which discusses a mother's instinct or kindness (Drama et al., 2019). Female nurses can show care to their patients. Moreover, this study has discovered that nurses who earned a diploma or bachelor in nursing show nearly the same caring behavior. Nurses' knowledge, attitudes, and skills are related to work experience and can also be influenced by their educational backgrounds.

Supriatin (2015) argue that is no relationship exists between nurses' education and caring behavior. Education is one of the individual characteristics that can describe nurses' formal knowledge and indirectly affect their attitude and caring behavior. The relationship analysis has found no significant relationship between nurses' education and caring behavior.

Robbins and Judge (2017) state that a more extended period of work can result in adverse effects of adaptation, namely fatigue and boredom; meanwhile, a shorter period of work tends to result in positive effects, namely the presence of good performance and the absence of excessive work tension. Nurses who have worked for less than five years tend to show excellent quality of work for several reasons: just experiencing performance appraisal, still working in the orientation stage, just serving as permanent employees, and not feeling bored with their profession. The results show that nurses who have worked less than five years show good caring behavior (71%). The statistical analysis has found no significant relationship between nurses' length of work and caring behavior.

According to Robbins and Judge (2017), several case studies have found that unmarried workers can have high-stress levels due to the absence of a partner who can be a discussion partner when returning from work. The statistical analysis has revealed no relationship between nurses' marital status and caring behavior (p > 0.05). This finding is supported by Lumbantobing et al. (2019), who have discovered no relationship between a person's marital status and caring behavior.

This condition can occur because marital status does not always affect a person's work performance (Fang, 2017). Unmarried nurses can experience problems from internal and external work factors, and their ways to solve the problem ultimately depend on their coping mechanisms.

In this study, the researchers involved two work units: the COVID-19 unit and the non-COVID-19 unit. Meanwhile, seven workspaces used in the research were inpatient units. Of the 137 research respondents, the majority were from non-COVID-19 work units (75.9%). The statistical analysis has found no significant relationship between nurse associates' work units and caring behavior. This finding is supported by Negussie (2014), who argue that all care work units should provide care with caring and empathy regardless of the type of workplace. Caring behavior should be implemented in all units so that caring behavior becomes a characteristic of a hospital and is perceived by patients.

Motivation and ability are two aspects that greatly affect nurses' performance (Ratanto et al., 2013). Work motivation can include nurses' internal and external factors. Nurses' intrinsic motivation includes demographic aspects, abilities, skills, and commitments that can affect their work attitude. Extrinsic motivation refers to a motivation emerging from outside factors of nurses. Caring behavior and motivation are two influential factors because high work motivation can stimulate a person to behave well in his work environment. Work motivation is an essential psychological process to determine a person's attitudes, perceptions, and decisions.

This research has revealed that 49.6% of nurse associates have low work motivation, while 50.4% have high motivation. The percentages between the two groups are almost equal. This study has also found a significant relationship between nurse associates' work motivation and behavior caring (p-value of <0.05). When intrinsic and extrinsic work motivations were separated, there was a significant relationship between nurse associates' intrinsic motivation and caring nurse behavior (p-value of 0.001). Work motivation is the most related factor to nurse's caring behavior in nursing

care. Work motivation is an inseparable combination between intrinsic and extrinsic motivation. Toode et al. (2014) states that work motivation, one of which is intrinsic motivation, is significantly related to nurses' work behavior. Macphee et al. (2017) argue that nurses can be loyal if they have a sense of involvement and satisfaction with their work. A loyal attitude can increase nurses' work motivation and balance between their perceived workload and capabilities.

The logistic model application of this research has obtained a regression equation, stating that if the nurses have high work motivation, their caring behavior will increase by 0.920 times. Other factors that influence nurses' work motivation are the patient factor and the external work factor of the nurses. These results are supported by Mediawati et al. (2016), who argue that nurses must have adequate motivation to perform safe control; thus, they do not suffer from fatigue when working. Work motivation is the most influential factor because it is closely related to nurses' behavior and performance when providing nursing care. Moreover, work motivation can indicate internal stress (stimulus-driven inner), which moves and guides a person to respond to things emerging in his life (Batson & Yoder, 2012). Marquis and Huston (2015) state that the best work process is working by involving emotional intelligence. Emotional intelligence consists of five components, one of which is motivation.

Motivation enables a person to work with desire without money or status and achieve other goals with high self-commitment. Nurses can build a rational perception of mental workload so that they do not perceive any pressure from their responsibilities (Bansal & Malhotra, 2016). This pressure can become a source of their mental workload. McClelland postulates a motivation theory explaining that motivation can lead a person to act (Marquis & Huston, 2015). Motivation is based on an individual's basic needs so that he will voluntarily work without being pressured. The source of motivation in each nurse is different. Nurses with high work motivation voluntarily perform their best efforts and skills when working and do not feel physical or mental pressure. As a result,

they can show a sense of caring, empathy, and sensitivity to patients during nursing care.

Conclusion

The results of the relationship analysis found that there was no relationship between age, education level, years of service, marital status, work unit, employment status and the caring behavior of the implementing nurses. There is a relationship between gender and work motivation with the caring behavior of practicing nurses with the most related factor being the work motivation of nurses. A limitation of the research is that caring for nurses in this study was measured by subjective assessments of nurses, while assessments of patient factors could not be assessed in this study. Further recommendation that can be given to hospital management are to pay attention to the creation of a motivational work climate, so that workers have high work motivation at work.

#### References

Arofiat, S. M. (2017). Hubungan Karakteristik Perawat dan Karakteristik Organisasi dengan Perilaku Caring Perawat Pelaksana di Ruang Rawat Inap Rumah Sakit Kartika Husada Pontianak. *Jurnal Keperawatan Soedirman (The Soedirman Journal of Nursing)*,12(3). Retrieved from: https://jks.fikes.unsoed.ac.id/index.php/jks/article/view/727.

Bansal, R. N., & Malhotra, M. (2016). A Case Study of Motivational Levels among Personnel Working in a Government Teaching Hospital of Punjab. *Biomedical and Pharmacology Journal*, 9(2), 585–591. Retrieved from: https://doi.org/10.13005/bpj/976.

Batson, V. D., & Yoder, L. H. (2012). Managerial coaching: A concept analysis. *Journal of Advanced Nursing*, 68(7), 1658 - 1669. Retrieved from: https://doi.org/10.1111/j.1365-2648.2011.05840.x.

Drama, S. M., S, Y., & Muliyadi. (2019). Hubungan self efficacy dengan perilaku caring perawat di ruang rawat inap. *Jurnal Berita Ilmu Keperawatan*, 13(1), 40–47. Retrieved from: https://journals.ums.ac.id/index.php/BIK/article/view/4490.

Fang, Y. X. (2017). Burnout and work-family conflict among nurses during the preparation for reevaluation of a grade A tertiary hospital. *Chinese Nursing Research*, 4(1), 51–55. Retrieved from: https://doi.org/10.1016/j. cnre.2017.03.010.

Khanade, K., & Sasangohar, F. (2017). Stress, fatigue, and workload in intensive care nursing: A scoping literature review. Proceedings of the Human Factors and Ergonomics *Society Annual Meeting*, 61(1), 686–690. Retrieved from: https://doi.org/10.1177/1541931213601658.

Lumbantobing, V. B., Susilaningsih, F. S., & Dadi, M. (2019). Perilaku caring perawat pelaksana rawat inap rumah sakit di Kabupaten Indramayu. *Jurnal Ilmiah Keperawatan Sai Betik*, 15(2), 129–133. Retrieved from: http://dx.doi.org/10.26630/jkep.v15i2.1379.

Macphee, M., Dahinten, V. S., & Havaei, F. (2017). The impact of heavy perceived nurse workloads on patient and nurse outcomes. *Journal of Administrative Sciences*, 7(7), 1–17. Retrieved from: https://doi.org/10.3390/admsci7010007

Marquis, B. L., & Huston, C. J. (2015). Leadership roles and management functions in nursing: Theory and application (Eight Edit). Wolters Kluwer Health, Lippincott Williams & Willkins.

Mediawati, A. S., Nurachmah, E., Mansyur, M., & Eryando, T. (2016). Pengembangan alat ukur beban kerja mental perawat dalam interaksi asuhan keperawatan. *Jurnal Persatuan Perawat Nasional Indonesia*, 01(02). Retrieved from: http://dx.doi.org/10.32419/jppni.v1i2.20.

Negussie, N. (2014). Relationship between rewards and nurse's work motivation in Addis Ababa hospitals. *Ethiopian Journal of Health Sciences*, 22(2), 107–112. Retrieved from: https://www.researchgate.net/publication/230639036\_Relationship\_Between\_Rewards\_and\_Nurses%27\_Work\_Motivation in Addis Ababa Hospitals

Nyamwata, J., Donald, K., & Sanga, P. K. (2017). Prevalence of depression and related socio demographic factors among nurses workingatMoiTeachingandReferralHospital, Uasin Gishu County, Eldoret. *Journal of Psychiatry and Mental Disorder*, 2(1), 2–6. Retrieved from: https://www.researchgate.net/publication/323119844\_Prevalence\_of\_Depression\_and\_Related\_Socio-Demographic\_Factors\_Among\_Nurses\_Working\_at\_Moi\_Teaching\_and\_Referral\_Hospital\_Uasin\_Gishu\_County\_Eldoret

Ratanto, Mustikasari, & Kuntarti. (2013). Pengembangan karier sebagai faktor paling mempengaruhi kinerja perawat pelaksana. *Jurnal Keperawatan Indonesia*, 16(2), 114–119. Retrieved from: https://doi.org/10.7454/jki.v16i2.10.

Robbins & Judge, Y.(2010). *Perilaku organisasi*. (Terj. D. Angelica, R. Cahyani, dan A. Rosyid) Edisi 12. . Jakarta : Salemba Empat.

Sembiring, A. F. (2019).Hubungan Demografi Dengan Segmentasi Caring Behaviour Perawat Dalam Praktek Keperawatan Di RSUD Dr.Pirngadi Medan Tahun 2019. Program Studi Ners Sekolah Tinggi Ilmu Kesehatan Santa Elisabeth Medan, 69. Retrieved from: https://repository. stikeselisabethmedan.ac.id/wp-content/ uploads/2019/08/APRILIANI-FRISKA-SEMBIRING-032015003.pdf

Supriatin, E. (2015). Perilaku caring perawat berdasarkan faktor individu dan organisasi. *Jurnal Keperawatan Indonesia*, 18(3), 2354–9203. Retrieved from: https://doi.org/10.7454/jki.v18i3.425.

Syisnawaty, W. E. (2017). Faktor-Faktor Yang Berhubungan Dengan Perilaku Caring Perawat Di Ruang Perawatan Interna. *Journal Of Islamic Nursing*, 2(2). Retrieved from: https://doi.org/10.24252/join.v2i2.3977.

Toode, K, Routasalo, P, Helminen, M & Suominen, T (2014). Hospital nurse' work motivation. *Scandinavian Journal of Caring Sciences*, Volume 29, 2, P. 248 - 257. Ditelusuri dari: https://doi.org/10.1111/

## Rina Fitriani: Factors Related To Nurses Caring Behavior In Inpatient Unit

scs.12155

Wakhid, U. S. (2016). Hubungan Karakteristik Individu Dengan Perilaku Caring Perawat Di Rumah Sakit Jiwa Prof. Dr. Soerojo Magelang. Jurnal Kesehatan Keperawatan STIKES Ngudi Waluyo Ungaran , 1.

Retrieved from: https://doi.org/10.26714/jkj.6.2.2018.98-105.

Watson, J. (2012). Measuring Caring International Research On Caritas As Healing. New York: Springer Publishing Company.