

PREDICTING FACTORS OF PROFESSIONAL BEHAVIOR OF INDONESIAN NURSES, WEST JAVA PROVINCE, INDONESIA

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ABSTRACT:

Background: The understanding of how nurses perceive the concept of professionalism has always been fundamental in terms of creating appropriate policy. However, Indonesia managed to pass the updated Nursing Act in 2014 and has been struggling to create proper policy regarding nurses so far. It is apparent that the main problem is due to the lack of clarity in giving meaning towards the perception of professionalism. As a result, there is an immediate need to properly describe and analyze several factors that may be significantly related to nurse professionalism in general. This study aims to examine and identify the predicting factors of professional behavior of Indonesian nurses, in West Java, Indonesia.

Methods: A descriptive predictive study was conducted at three type A hospitals in West Java. A total of 160 participants were recruited for the study. The personal factor questionnaire, General Self-Efficacy scale (GSE), Survey of Perceived Organizational Support (SPOS), Psychological Empowerment Questionnaire, and Registered Nurses' Association of Ontario (RNAO) professionalism questionnaire were used to collect the data. Descriptive statistics, Pearson's r correlation, Chi-square test, and Stepwise multiple regression were used to analyze the data.

Results: Study results indicate that perceived organizational supports had a low relation with professional behavior in nursing ($r = .210$; $p = .008$). Both self-efficacy and psychological empowerment showed a moderate relation to professional behavior ($r = .576$; $p < .001$; $r = .558$; $p < .001$, respectively). Furthermore, personal factors which consist of level of education ($\chi^2 = 20.363$) and years of experience ($r = .499$; $p < .001$) also showed moderate relationships. The overall perception of professional behavior by Indonesian nurses had a good ranking score ($M = 3.81-4.26$) for each component of professional behaviors. The Stepwise multiple regression resulted in four variables being selected for the model: self-efficacy, psychological empowerment, years of experience and education explained 49.1 % of the variance of professional behavior, ($R^2 = .478$).

Conclusion: The conclusion for this study indicates that self-efficacy, psychological empowerment, years of experience and education together can statistically predict professional behavior of Indonesian nurses in West Java. Greater effort, however, is required to improve self-efficacy and psychological empowerment due to such average results. Notably, the weakest relationship variable found in this study was organizational support, which implies an immediate need to construct a policy to improve and maintain various forms of institutional support channels for nurses in West Java.

Keywords: Self-efficacy; Organizational support; Professional behavior; Personal factors; Empowerment

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INTRODUCTION

The nursing profession is well aligned with the characteristics of professionalism. In one of his seminal works, Miller et al. [1] stated that nurses

should be able to depart from the traditional analysis

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of profession and professionalism by other disciplines as the only method to determine the definition and characteristics of professionalism in nursing. Of course, professionalism in nursing is very important to achieve a healthy work environment. A good working environment for nurses is in a place that maximizes the health and well-being of nurses, and has quality patient outcomes, and organizational performance. This study utilized the attributes defined in the RNO Nursing Best Practice Guidelines [2]. The perception of the professionalism of the nurses in this study was measured with eight components; (1) Knowledge, (2) Spirit of Inquiry, (3) Accountability, (4) Autonomy, (5) Advocacy, (6) Innovation and Visionary, (7) Collegiality and Collaboration, and (8) Ethics and Values [2].

Factors that were predicted to have significant impact on the level of professional behavior were education and work experience. Educational background needed for professional practice is determined to ensure safe and effective practice. Leaders in nursing education today are trying to change the nursing workforce in ways that respect the social contract with the community, giving recognition to nurses' education, which obviously plays an important role in their ability to achieve optimal results for their patients, and to practice safely [3]. In nursing, the basic education required for entry into the profession varies, with the difference between the baccalaureate, associate degree, diploma, and even some entry-level graduate programs. In this study, participants comprised of those who have a bachelor's degree or master's degree.

Apart from personal factors, such as education and work experience, it is important to understand how the perception of self-efficacy, organizational support, as well as psychological empowerment variables, relates to the professionalism of nurses. Perceived self-efficacy and its link to performance and empowerment have been analyzed in various studies but none has been pointed specifically in Indonesian nurses circumstances. In other studies, this variable tends to be associated with job satisfaction, such as in a study by Tyler et al. [4] or research about the school nurse in New Jersey [5].

Burnout and work-related stress may lead to problems in the field of nursing. Hence, there is a need to create buffer mechanisms to cope with this occupational stress. The proposed solution is to empower nurses in order to reduce job retention and

decrease the possibility of burnout [6]. As the result of the empowerment, they should feel more powerful [7]. Not only that, they might experience less job stress, have more satisfaction in their work, and provide higher-quality care [8]. Psychological empowerment itself is a task to bring motivation towards a group or an individual by increasing the personal sense of meaning and control [9, 10]. This study follows the empowerment models of Spreitzer.

Organizational support is assumed to increase the employee's effective attachment to the organization and the employee's expectancy that greater effort toward meeting organizational goals will be rewarded [11]. According to the organizational support theory, organizational support reflects the degree to which employees believe that their work organization values their contribution and cares about their well-being [12].

METHODS

A descriptive predictive study was conducted among all 203 professional staff nurses at three type A hospitals. There were 155 participants from Hasan Sadikin Hospital, 38 participants from Cicendo Hospital, and 10 participants from Rotin Sulu Hospital. Hospital type A has been set as the highest referral service or top referral hospital and is also known as the central hospital, academic or university hospital. It has the facilities and extensive service capabilities of many professional nurses and specialists such as hemodialysis nurses, NICU nurses and specialist nurses. Only 160 or 78.8 % filled in the self-administered questionnaire. Descriptive statistics, Pearson's *r* correlation, Chi-square test, and Stepwise multiple regression were employed to analyze the data [13].

Measurements

The demographic characteristics questionnaire was created by the researcher. This demographic data consisted of (1) level of education and, (2) years of experience of the participants. The form provided a measurement for personal information including age, sex, and working unit.

Self-efficacy

The 10 item General Self-efficacy Scale (GSE) developed by Schwarzer and Jerusalem [14], used a five-point Likert scale (ranging from 1 = not really true to 5 = really true) and was utilized in this study. The responses to all 10 item are summed up, yielding one score. The mean score ranged from

1-5. Higher scores indicate strong belief in one's self-efficacy. The content validity index was acceptable (1) and the reliability was 0.74.

Psychological empowerment

The psychological empowerment questionnaire by Spreitzer [10] was used in this study. Psychological empowerment dimensions namely meaning, competence, self-determination, and impact are the independent variables. The questionnaire has 12 items (3 items for each of the four dimensions). The items were measured using a five-point Likert scale (ranging from 1 = strongly disagree to 5 = strongly agree). The mean score per item which ranged from 1-5 [15]. Higher scores indicate a better psychological empowerment. The questionnaire was back translated to the Indonesian language by the experts from the Faculty of Linguistic Studies from Andalas University, Indonesia. The content validity index was acceptable (1) and the reliability was 0.88.

Organizational support

Organizational support was measured by using a Survey of Perceived Organizational Support (SPOS). The 8 item scale was used and the questionnaires were back translated to the Indonesian language by the experts. The 8 item scale included questions nos. 1, 3, 7, 9, 17, 21, 23, 27 [11, 16]. The mean score per item ranged 1-5. Higher scores indicate a better perception on organizational support. The content validity index was acceptable (1) and the reliability of the questionnaire was 0.70.

Professional behavior

The professional behavior questionnaire was developed based on the RNAO guideline. The instrument, which utilized using a five-point Likert scale, was prepared in English and then it was translated into Indonesian language. The questionnaire was validated by experts in the profession and pre-test was done also to assess the reliability of the questionnaire. The rating scale responses allowed participants to describe how well their opinions of and attitudes toward nursing agree with the item statements [15]. The instrument has 38 items developed from eight attributes of professional behavior in nursing according to the RNAO [2]: knowledge (1-6), spirit of inquiry (7-12), accountability (13-17), Autonomy (18-21), Advocacy (22-25), Innovation and visionary (26-30), collegiality and collaboration (31-34), ethics and values (35-38). An average score per item of each

attribute and overall professional behavior was obtained. The higher score indicated the better professional. The content validity index was acceptable (1) and the reliability 0.97.

The content validity of all the original English version questionnaires was assessed by a panel of five experts in the field of nursing administration in Indonesia. They were four lecturers and one advanced practice nurses who have expertise in nursing administration. The five experts evaluated the content validity of the instruments and its relevance with a four-point item rating: 1 = not relevant, 2 = somewhat relevant, 3 = quite relevant, 4 = highly relevant. Relevant indicated whether the item on the scale was congruent with the construct [17]. Then, for each item, the I-CVI was computed as the number of experts giving a rating of either 3 or 4 divided by the total number of experts [18]. The item that was rated as quite and highly relevant by the five experts would have a minimum an I-CVI of .80 [17]. The result of content validity was satisfactory (1). The internal consistency reliability of the questionnaire was analyzed by using Cronbach's alpha coefficient [17]. The acceptable level of Cronbach Alpha coefficient for newly developed psychosocial instruments is of .70 and is of .80 for well-developed instruments [18].

Ethical consideration

Two of the Institutional Review Board (IRB) ethical committee in Indonesia approved the proposal of this study. A representative from University of Sumatera Utara Medan approved it on May 12, 2016 (Approval no. 850/V/SP/2016). Then, it was also approved by the Institutional Review Board (IRB) ethical committee as the representative of a clinical setting field from Hasan Sadikin Hospital (Approval no: LB.04.01/A5/EC/191/V/2016) on 27 May 2016.

Data analysis

The level of significance of the study was set at $\alpha = .05$. Descriptive statistics, including frequency, percentage, mean, and standard deviation, were used to describe demographic characteristics and professional behavior of participants. A Chi-Square test was executed to analyze relationship between educational level and professional behavior. Furthermore, Pearson's r correlation was executed to analyze the relationship between years of experience, self-efficacy, psychological empowerment, organizational support and professional behavior. Stepwise multiple regression was adopted to

Table 1 Mean and standard deviation of professional behavior of Indonesian nurses, West Java, Indonesia (n= 160)

Professional behavior	Mean	SD
1. Spirit of inquiry	3.81	.61
2. Collegiality and collaboration	3.91	.72
3. Knowledge	3.95	.49
4. Innovation and visionary	3.99	.55
5. Autonomy	4.02	.61
6. Ethics and values	4.02	.64
7. Accountability	4.12	.58
8. Advocacy	4.22	.55
Total	4.00	.59

Table 2 Pearson correlation coefficients of personal factor years of experience, self-efficacy, psychological empowerment, and organizational support and professional behavior of Indonesian nurses, West Java, Indonesia (n =160)

Personal factors	Pearson correlation coefficients	p-value
Organizational support	.210	.008
Years of experience	.499	<.001
Psychological empowerment	.558	<.001
Self-efficacy	.576	<.001

Table 3 Relationship between educational attainment and professional behavior of Indonesian nurses, West Java , Indonesia (n=160)

Educational attainment	Total participants	Level of professional behavior					
		Moderate (2.50-3.49)		Good(3.50-4.49)		Very good(4.50-5.00)	
		Number	Percent	Number	Percent	Number	Percent
Bachelor degree	135	16	11.9	101	74.8	18	13.3
Master degree	25	1	4.0	11	44.0	13	52.0
Total	160	17	10.6	112	70.0	31	19.4

p-value < 0.001 by Chi-square

identify the predictors of professional behavior. The assumptions regarding normality of data distribution of independent and dependent variables, the linearity of relationship, and multicollinearity were validated.

RESULTS

A total of 160 participants were recruited for this study: 22% male and 78% female nurses. In the education section there were two classifications of education: 135 (84.4%) participants with a bachelor's degree and 25 participants (15.6%) with a master's degree. In addition, survey participants were divided into four age groups. The 30 to 39 age group was the most dominant in this study, which amounted to 86 participants (54%). Similarly, of the four working units, the inpatient unit contributed the most nurses at 86 participants (54%). In terms of years of experience, the data were classified into five groups. In this section, the number of participants was spread quite evenly; however, there were more experienced nurses (>12 years) compared to

beginner nurses participating in this study.

Table 1 shows the average score per item for professional behavior of nurses expressed as the attributes categorization by the RNAO [2]. An average score of >3.2 is considered reflect better professional behavior. Of the eight attributes of professionalism, 'advocacy' scored the highest mean on the scale (M=4.22, SD=.55). This result could indicate that these nurses appreciate the autonomy of the patient and the uniqueness of the nurse-patient relationship. The 'accountability' dimension ranked second (M=4.12, SD=.58), indicating that the nurses will accept the consequences of one's behavior. Ethics and value of profession got the same score as 'autonomy' and both came in third (M=4.02). This finding leads us to believe that the nurses value the ability to provide safe, competent and ethical care to the people they serve. They also relish the opportunity to work independently and exercise decision-making within their scope of practice. Details on the study sample are reported in Table 1.

Table 4 Predictors of professional behaviors of Indonesian nurses in West Java province (n = 160)

	b	SEb	b Adj	95 % CI		p-value
				LB	UB	
(Constant)	1.669	.238		1.199	2.138	.000
Self efficacy	.290	.069	.328	.152	.427	.000
Psychological empowerment	.234	.063	.406	.110	.359	.000
Years of experience	.085	.022	.457	.041	.129	.000
Education (0= bachelor degree, 1= master degree)	.202	.076	.478	.052	.351	.009

$R^2 = .491$; $\text{Adj } R^2 = .478$; $p\text{-value} = <.000$

Correlation between selected factors and professional behavior

Pearson product-moment correlation for all quantitative variables and Chi-Square for qualitative variables were generated to gain an understanding of the relationships among variables. The research question was answered by testing the null hypothesis. Thus, the answer of the research question could be explored by detailing the results of the p-value of each variable. Namely, p-value of years of experience, self-efficacy, and psychological empowerment, ($r = .499$, $p < .05$; $r = .576$, $p < .05$; and $r = .558$, $p < .05$, respectively) which indicated that the null hypothesis should be rejected; that is, there were moderate but statistically significant positive relationship between years of experience, self-efficacy, psychological empowerment and the professional behavior of Indonesian nurses in West Java. However, a weak or low positive relationship between organizational support ($r = .210$, $p < .05$) with professional behavior was found. The correlation coefficient is presented in Table 2. To understand the relationship between education and professional behavior, Chi-Square analysis was used. Educational attainment correlated with professional behavior $p < .001$. The result obtained a participant who graduated from master degree is emphasized the better professional behavior compared with bachelor degree. The correlation coefficient is presented in Table 3.

Predicting factors of professional nursing behaviors

From the stepwise multiple regression, self-efficacy was the first variable entered into the model and followed by psychological empowerment, years of experience, and educational attainment. They explained 49.1 % of the variance of professional behavior, (adjusted $R^2 = .478$), as shown in Table 4. The results indicated the better the self-efficacy, psychological empowerment, and the higher the years of experience and educational attainment, the better the performance was for professional behavior.

DISCUSSION

One hundred and sixty nurses completed the professional behavior questionnaire in this study. The results showed that participants who scored highest on the level of professional behavior were nurses who had a master's degree in nursing and had many years of experience in nursing practice. The findings are consistent with the hypotheses. Several explanations can be discussed regarding personal factors (education and years of experience).

Education

Education is significantly correlated with professional behavior of the Indonesian nurses studied in West Java. Based on data analysis, the average score of the ratings of the 5 Likert-scale of the professional values for the nurses was 4.004. This study suggests that overall, nurses, whether with a bachelor degree or master's degree, do feel that professional values are important in nursing. With the rating in the range of 0.366, the study defines these as "moderate relationships". In general then, one can suggest that at both levels, nurses involved in this study feel that concepts such as respect for spirit of inquiry, collegiality and collaboration, knowledge, innovation, and visionary, autonomy, ethics and value of profession, accountability and advocacy to meet needs of the public were "important to very important".

There were apparent overall differences in the nurse's professional behavior when the bachelor degree and master's degree nurses were compared. For example, the number of those with a master degree that were categorized as 'the better (M=4.5-5.0)' is 13 out of 25 (52.0%). On the other hand, nurses with a bachelor degree who were categorized as 'the better' number 18 out of 135 (13.3%). This shows that the level of education has significant impact on the level of professional behavior.

Participant who holding a master degree notably highlighted the significant relationship between education and professional behavior:

almost half of the participants attained a very high level of professional behavior. The reason is that continuing education can improve knowledge and skill and then make a person have more confidence in performing their job [19]. Another reason is by continuing their education professional nurses can acquire their knowledge and skills in nursing practice [20].

Relatively comparable results were obtained from other researchers who found that nurses with a master's degree had higher scores in professional behavior [20]. These findings are consistent and confirmed previous research findings by Tanaka, et al. [19] that the nurses with higher levels of education had higher professional behavior scores ($F = 138.62, p < 0.0001$). Another result of the present study also confirmed the importance of education for professional behavior. Wynd [20] found that nurses with a graduate degree had higher total professional behavior scores. Those studies found that nursing education needs to consider the changing nature of the nursing profession concerning professional behavior in clinical practice.

Years of experience

The number of participants based on years of experience was spread quite evenly. However, the more experienced nurses had over 12 years of experience (35.6%), compared to the beginner nurses participating in this study with 0 to 2 years' experience (10%). Then, findings of this study showed that there was a moderate relationship between years of experience with professional behavior ($r = .49, p < .001$). This indicated that the more experienced they were, the more professional nurses would behave in the field. This study is confirmed by most of the previous studies, which concluded that there was a strong relationship between professional behavior in nursing and the number of years of experience [19-21]. Therefore, the results of the study also confirmed by previous research regarding working experience by Wynd [20] that found nurses with more experience (31 years or greater) had a significantly higher score for professional behavior. In addition, other results which got the same result with this finding [22, 23] state that a great deal of professional behavior is learned from work experience. The reason why years of experience is important and associated with professional behavior is because as nurses become more experienced they begin to view their work at the same level of professional behavior shared by

multidisciplines and physicians; hence, maturity of practice could be a key to developing as a full professional behavior in nursing practice [19].

Self-efficacy

Self-efficacy itself is a positive factor in human personality quality, meaning that greater self-efficacy generally leads to greater belief in self and greater personal successes [24]. These study findings showed that self-efficacy was significantly and positively correlated with professional behavior ($r = .576; p < .001$) emphasizing that the more participants had higher self-efficacy, the better professional behavior could be performed. Additional findings from a non-experimental survey design indicated that self-efficacy partially mediated the relationship with professional behaviors [25]. Five hundred randomly selected practicing nurses were invited to respond to the survey, resulting in a participation rate of 75% ($n = 376$). The results demonstrate that self-efficacy partially mediated the relationship with professional behaviors ($p < .001$) [23].

Indonesian nurses' perceptions toward involving their beliefs about their capabilities to produce or accomplish their task in this study were at a better belief in one's self efficacy ($M = 3.794; SD = .52$). It showed from the highest result statement "I can always manage to solve the difficult problem if I try hard enough" ($M = 4.04; SD = .64$), "If I am in trouble, I can usually think of a solution" ($M = 3.98; SD = .61$). Thus, interpreted as Indonesian nurses belief in what they capable of, and always try hard to achieve their goal and task. This is because if someone believes that she/he is capable of doing it, the chances are that she/he will try the new behavior is greater [26]. Congruently, a previous research found and suggested, "It is a belief in one's ability to get the job done or self-efficacy that must be fostered in order for nursing to have a more powerful influence in healthcare" to mediated professional behavior in nursing practice [25]. In the nursing field, for nurses, the concept of a strong nursing self-efficacy may embody exactly what nurse managers hope staff will achieve during work; they will believe that they have choices available to them and also that they must take responsibility for their actions and for their decisions. That can be found in the statement "I am confident that I could deal efficiently with an unexpected event" ($M = 3.68; SD = .75$), and item "I can solve most problems if I invest the necessary effort" ($M = 3.85; SD = .66$). Thus interpreted as a better belief in one's self-efficacy.

As a summary, the self-efficacy variable in this finding is interpreted as having a moderate correlation; this is indicated by the value of the correlation coefficient of 0.576 with a p -value < 0.001 . It is related to another research, which found correlation between self-efficacy and professional behavior. That study found those with strong self-efficacy have an enhanced personal well-being and an increased ability to accomplish goals [27, 28]. This ground theory is supported by the finding of the study that said, "It is easy for me to stick to my aims and accomplish my goals" ($M=3.63$; $SD=.82$). Conversely, those who have a low sense of self-efficacy doubt their capabilities, shy away from difficult tasks and do not have confidence in their decisions. Such difficult tasks or activities are perceived as personally threatening and therefore to be avoided [27-29].

Psychological empowerment

Psychological empowerment was defined as Indonesian nurses' perception of head nurses when empowering nursing staff with an increased sense of meaning and controlling the cognitive state of power of the individual staff nurse. The result showed psychological empowerment was significantly and positively related to professional behavior ($r=.576$; $p < .001$). The psychological empowerment variable of this study at a better result which can be interpreted from the average mean score ($M=3.8$; $SD=.525$). The mean score from the highest to the lowest in this study are; impact, meaning, self-determination, and competence ($M=3.71$; $M=3.78$; $M=3.83$; $M=3.84$, respectively). Indeed, this relationship could be interpreted that the more staff nurses empowered by their leader the more professional behavior implemented by the staff nurses.

These relationships are similar to the result of previous studies by the concept of Spreitzer which found physiological empowerment is positively related to innovative behavior $p < .001$ [10]. It was found that informal power through networking and effective collaborative relationships and support from managers, colleagues, and other health professionals are important to nurses' perceptions of respect, as is professional autonomy. Laschinger [30] also found a relationship between psychological empowerment with autonomy, which is as one of component behavior in this study. The author stated a particularly important way for nurse managers to create empowering conditions was by promoting collaborative working relationships and providing

support to staff, thereby fostering greater feelings of autonomy, meaning, and impact, and ultimately, augmenting nurses' feelings of respect [31].

Organizational support

Organizational support is significantly and positively related to professional behavior ($r=.210$, $p=008$), signifying that if staff nurses perceive higher organizational support they are more likely to behave professionally in clinical practice. Otherwise, the correlation between that variable is the lowest if we compare with the others ($r=.210$). These results support that participants will have behavior that is more professional if they perceive more organizational support. The nursing department can view these outcomes and offer more support for staff nurses to increase their professional behavior. These findings support the concept of organizational support theory; employees believe that organizations have a generally positive or negative attitude concerning the extent to which they value employees' contributions and their growth and welfare [32]. It also creates favorable work experiences for its employees. Employees who feel supported by their organizations and supervisors tend to be more committed, autonomous, and have a sense of belonging and accountable, increase their involvement (both with the organization and their own professional behavior), pursue personal and organizational goals more fully, and desire to remain with the organization [32].

A few studies supported organizational support associated with the professional in nursing practice. Aiken and Patricia found that nurses functioning in such an organization support could apply resources as appropriate for best meeting patient needs and for communicating problems to the physician in a timely manner [33]. The reason is based on the notion that when the workplace is personally pleasant and socially satisfying, people will be more productive, perform better and be more professional in their given tasks and responsibilities. The notion of organizational support is used to explain how work environments influence employees. The organization will support the initiation and development of new ideas and innovation of their employee. Organizations that tend toward decentralization encourage the personal and professional development of its employees, thereby encouraging autonomy and creativity.

All the findings of this study are consistent with all the hypotheses proposed in the background of the study. They are all associated with

professional behavior.

CONCLUSION

The purpose of this descriptive predictive study to examine and investigate predicting factors relating to professional behavior of Indonesian nurses in West Java. The result showed that personal factor (education, years of experience), self-efficacy, organizational support, psychological empowerment were significantly related to professional behavior. Furthermore, the regression result indicates that self-efficacy, psychological empowerment, years of experience and education together can statistically predict professional behavior of Indonesian nurses.

LIMITATION AND RECOMMENDATION

Several limitations of this paper should be acknowledged. First, the low number of participants, which is very likely to be small compared to the expected numbers to make this study representative in describing the real situation of the nurse in a large country such as Indonesia. Hence, it is more appropriate to generalize this study as the representation of current condition in West Java instead of one that represents Indonesia as a whole. While this is common in organizational research, it is nonetheless problematic. Furthermore, there is still a possibility that this study would be far more comprehensive if it is done with longitudinal approach than cross-sectional nature. One of the expected advantages of the previously mentioned approach is to observe the changing perspective in professionalism, particularly when it is related to education and working experience. Despite its limitations, this study has contributed to the continuing research on nurse professionalism. Naturally, more research is needed to increase our understanding of the exact nature of this relationship. This study is just a starting point.

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