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Nursing professionalism: A concept analysis

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Abstract: Nowadays rapid changes in value systems of the society caused nursing to encounter more ethical and philosophical challenges at providing care to its patients and clients. These changes also created new nursing environments that need professional nursing. Accordingly, nursing professionalism definition and its attributes need to be clarified and adapted with rapid changes. For this purpose, concept analysis is a suitable method. **Aim:** The present study was conducted with the aim of clarifying and defining the concept of professionalism, its attributes, antecedents, and consequences. **Methods:** In this study, the steps of concept analysis were as follows: Select a concept, determine the aims of the analysis, identify various definitions of the concept, determine the concept attributes and identify the antecedents and consequences. All studies between the years 2010 and 2019 were reviewed. A total of 13 studies were included in this concept analysis. **Data Collection:** For purposes of this concept analysis, PubMed, Google search engines, Ovid, and ProQuest, were scanned and searched using the keywords. **Conclusion:** The concept of Professionalism in nursing is a complex one. Professionalism is a multi-dimensional concept; there is no one simple, generalizable definition, or how to assess it. Maintaining professionalism is essential in the nursing profession so this study mentioned the antecedents and consequences of nursing professionalism. **Recommendations:** Professionalism has been described by various disciplines but there is a need to explore the determinants that persuade professionalism among nurses. Also there is a need to explore the influence of external work environment on nursing professionalism.

Keywords: Professionalism, Concept analysis, nursing.

Introduction

Achieving professional status is an important goal in nursing as in all disciplines. Professionalism is important in the establishment of nursing care standards and provision of quality services. This requires being open to advancements and possessing both intellectual and investigative backgrounds and interests which manifest through responsible leadership and effective communication. In this way, nurses can advance in the career of professional nursing (Hintistan & Topcuoglu, 2017).

Nursing profession status is an inter-profession and intra-profession challenge. Historians, sociologists, and nurses themselves struggle to determine whether professionalism is present or absent in the nursing occupation (Fantahun et al., 2014).

Gradually, development of educational standards and professional certificates led nursing move to professional status. Having stronger powerful basis for theory, practice, and professional education in nursing discipline brought about social cognition. Social understanding about

nursing made the society consider nurses as cost-benefit healthcare providers and independent decision makers. Therefore, nurses could receive more funds and governmental financial aids (Ghadirian et al., 2014). Professionalism in nursing plays an important role in meeting the goals of health systems. It is also important to have professional and value-based foundations around it. For this reason, it is one of the concerns of health systems worldwide (Fatemi et al., 2018).

Aim

The present study was conducted with the aim of clarifying and defining the concept of professionalism, its attributes, antecedents, and consequences.

Methods

The aim of concept analysis is to examine the basic elements of a concept. The process allows researchers to distinguish between similarities

and differences between concepts. The concept analysis method helps to clarify concepts used in nursing practice that have a broad scope (Walker & Avant, 2011). In this study, the steps of concept analysis were as follows: Select a concept, determine the aims of the analysis, identify various definitions of the concept, determine the concept attributes and identify the antecedents and consequences.

Data Collection

For purposes of this concept analysis, PubMed, Google search engines, Ovid, and ProQuest, were scanned. These databases were searched for the keywords "professionalism", "professional behavior", and "professionalization". All studies between the years 2010 and 2019 were reviewed. A total of 13 studies were included in this concept analysis. **Inclusion criteria were:** First, studies that contained the word "professionalism" in their title were selected. Afterward, studies which included discussions of definitions, attributes, antecedents, or consequences of professionalism, factors influencing professionalism or analyzed the concept of professionalism in nursing were included. Finally, studies that used Hall's professionalism scale (HPI), Registered Nurses Association, Ontario (RNAO), or Behavioral Inventory for Professionalism in Nursing (BIPN) as scales for data collection.

Concept of professionalism

Professionalism is a multi-dimensional concept; there is no one simple, generalizable definition, or how to assess it. Professionalism can be assessed by considering its individual (attributes, capacities, and behaviors), inter-personal (interactions with other individuals and with contexts) and societal dimensions (social responsibility and morality, political, and economic concerns), and the interactions amongst these dimensions (Hodges et al., 2011)

Professionalism in the field of environmental health is being a member of a chosen vocation founded upon specialized educational training. Professionalism is more about the promotion of a vocation and maintaining its standards (Krinn, 2011). Professionalism is the extent to which an individual identifies with a profession and adheres to its standards (Zakari et al., 2010). Nursing professionalism is the integrated belief, ideas and values for nursing and nurses as a profession. Nursing professionalism encompasses specialized and systematic body of knowledge, as well as guidelines and standards for behavioral conduct in the profession (Jang et al., 2016).

Professionalism is defined in terms of code of conduct, professional relations, and competence and communication skills. Some participants recognized internal motivation as part of professionalism and were idealistic, drawing on morals and self-determination. Professionalism is more than learning and application of technical skills. The inculcation of professional values, attitudes and behaviors requires all members of the health professions to see themselves and serve as teachers and role models (Baingana et al., 2010). There are five stages of training to professional nurse education are assigned as follows: create a practical fake identity of a professional nurse in students, trial and error, the seriousness of the conduct; transfer to the bedside, and professionalization. Some studies suggest that certain training courses such as ethics, research, or professionalization should be included in the professional training program in nursing (Walton et al., 2011).

Attributes of Professionalism

Professionalism is characterized by an integration of affective, behavioral and cognitive attributes, which must be demonstrated by individuals from a specific profession in order to claim the status of professionalism (Mottian, 2014). Nurses as members of a recognized and regulated profession form a collective group, expected to conduct themselves at specific and articulated standards. Moreover, nurses are evaluated by shared and internalized professional values, behaviors, and beliefs. This then substantiates a cultural examination of nursing professionalism when defining culture as human experiences, beliefs, patterns, and ways of living or being (Stewart, 2015). Based on these characteristics of professionalism, professionals can be distinguished from other workers (Yang et al., 2016).

There are many researchers identified the attributes of professionalism in different ways as Hall's model (1968), "Wheel of Professionalism in Nursing" is a model developed by Miller (1988), and Registered Nurses Association of Ontario, Nursing Best Practice Guidelines Program (2007).

Hall's model (1968) identifies five attitudinal attributes of professionalism as follows: use of professional organizations as major referents, belief in public service, self-regulation, a sense of calling to the field, and autonomy.

"Wheel of Professionalism in Nursing" is a model developed by Miller in 1988, to explore the concept of professionalism. This model was created in response to nurses' need to recognize attributes and behaviors necessary for the nursing professionalism. This model is represented in the

form of a wheel with essential characteristics as the hub and supporting behaviors represented as the spokes. The hub or center of the wheel represents two critical attributes including education in a university setting and a scientific background that is the basis for professionalism in nursing. The spokes depict attributes and characteristics that are inherent in the behaviors of a professional nurse. These attributes include, 'Adherence to Code for Nurses'; 'Community Service Orientation'; 'Professional Organization Participation'; 'Autonomy and Self-regulation'; 'Publication and Communication'; 'Development and use of Theory and Research'; and

'Continuing Education and Competence'(Alidina, 2013).

Registered Nurses Association of Ontario (RNAO) Nursing Best Practice Guidelines Program focuses on professionalism, which is essential for healthy work environments for nurses .The guideline summarizes various attributes that have been identified as fundamental to the concept of professionalism. The attributes of nursing professionalism include "knowledge, spirit of inquiry, accountability, autonomy, advocacy, innovation and visionary, collaboration and collegiality and ethics" (Registered Nurses Association of Ontario, 2007).

Table (1): The most frequently and commonly studied attributes of professionalism in earlier research:

No.	Professionalism Attribute	HIB***	RNOA**	BIPN*
1.	Educational preparation			√
2.	Publication and communication			√
3.	Research development, use and evaluation		√	√
4.	Participation in professional organization	√		√
5.	Community service	√		√
6.	Competence and continuing education			√
7.	Adherence to the Code for nurses		√	√
8.	Theory development, use and evaluation			√
9.	Self-regulation and autonomy	√	√	√
10.	Collegiality and Collaboration		√	
11.	Advocacy		√	
12.	Innovation and Visionary		√	
13.	Accountability		√	
14.	Knowledge		√	
15.	Sense of calling	√	√	

HPI***: Hall professionalism scale

RNAO**: Registered Nurses Association, Ontario

BIPN*: Behavioral Inventory for Professionalism in Nursing.

Review of literature on nursing professionalism

Kim-Godwin et al., (2010) in a correlational descriptive study assessed the levels of professionalism and examined factors associated with professionalism among Korean American registered nurses. Hall's Professionalism Inventory (HPI) was used for this study. Data were collected, using a mailing survey, with a convenience sample

of (221) Korean American RNs living in the United States. The level of professionalism in the United States was associated with current position in nursing, current employment status, work setting, total years of nursing experience, total years of nursing experience in the United States, location of final degree attainment, and duration of nursing education. Variables predicting professionalism included membership in professional organizations

and total years of nursing experience in the United States and they accounted for 8.6% of the total variance in the HPI score.

Çelik & Hisar (2012) in a descriptive study investigated the influence of nurses' professionalism behavior on job satisfaction using Behavioral Inventory Form for Professionalism in Nursing (BIPN) and the Minnesota Satisfaction Questionnaire. Data was collected from nurses (531) in university, private and state hospitals in Ankara, Turkey. The mean score for professionalism was low and on job satisfaction was medium. There was a significant positive relationship between job satisfaction and professionalism.

Tanaka et al., (2014) conducted a national descriptive cross-sectional survey on professionalism among (1501) Japanese nurses. The survey was conducted in large university hospitals in Japan, using a Japanese translated version of the BIPN and distributed by mail. Nurses scored low levels of professionalism. Highest score was found in 'competence and continuing education', and lowest was in 'publication and communication'. Professionalism scores were related to their experience educational level and current position.

Konukbay et al., (2014) in a descriptive cross-sectional study determined professional behavior of (115) nurses working in an educational-research hospital in Ankara, Turkey using BIPN. In this study, nurses obtained overall low scores on BIPN. Higher scores were received in the areas of competence and continuing education, education, research, use of theory, nursing code and social services and low scores in the areas of publishing, professional organization and autonomy. Higher level of education was identified as the most important factor influencing professionalism in nursing.

Fantahun et al., (2014) in a cross-sectional quantitative study assessed level and attributes of professionalism in nursing (210) in Mekelle public (Government) Hospitals, North Ethiopia using a questionnaire developed from Registered Nurses' Association of Ontario (RNAO) guidelines. Level of professionalism was high among nurses with highest mean scores on ethics, knowledge and advocacy and lowest mean scores for innovation and visionary and autonomy. The mean scores differed for nurses in different work settings and different qualification and experience. Nurses having most years of experience and diploma qualification had higher scores on professionalism. The attitude on concept of professionalism differed among groups and most had moderate attitude towards professionalism.

Solomon et al., (2015) conducted a cross-sectional study on professionalism and its predictors among (332) nurses working in a Public Hospital in South West Ethiopia using a questionnaire adapted from

RNAO guidelines to measure professionalism, Nursing Assessment Survey (NAS) to measure organizational culture and Self-image questionnaire to measure professional self-image. The study identified high level of professionalism among these nurses which was associated with gender, experience, marital status, qualification, self-image and organizational culture.

Tanaka et al., (2015) in a descriptive study with cross-cultural comparative, compared nursing professionalism among nurse leaders in the United States of America (U.S.A.) and Japan using BIPN. The Mean total score on BIPN, as well as scores in areas of community service, education preparation, self-regulation, theory development and autonomy were high among nurses in U.S.A. However, scores on research development, publication and communication were high among Japanese nurses. This study recommends that nursing professionalism should be further compared with findings at international level.

Doost et al., (2016) in a cross-sectional study examined Iranian nurses (133) level of professionalism and the associated factors. Professionalism was assessed using HPI. Results revealed a moderate level of professionalism. Higher scores were identified in autonomy and lower in sense of calling. Nurses' age and years of experience were significantly related to the level of professionalism. This study recommended similar further studies in developing countries.

Dikmen et al., (2016) in a descriptive exploratory study which carried out to determine the level of professionalism of nurses in a hospital in Turkey among nurses (89) employed in a public hospital. Data were collected using BIPN. The findings indicated low level of professionalism among nurses (5.07 ± 3.47). Highest scores of professionalism were identified in areas of competence and continuing education (1.88 ± 0.34) and the lowest scores were in autonomy (0.06 ± 0.34), publication (0.10 ± 0.25), and research (0.25 ± 0.60). There was significant difference between the overall professionalism scores and the education level and the work experience of nurses. This study discussed the possibility of negative factors impacting professionalism among nurses such as; excessive workloads, long working hours, inadequate resources, differences in educational levels, community perception about nursing profession, hierarchical structure of hospitals, focus on nursing tasks, lack of personnel, low salaries, insufficient job security and weak organized labor.

Jang et al., (2016) in a cross-sectional study conducted to identify the relationship between professionalism and professional quality of life among (285) oncology nurses working at tertiary hospitals in Korea. Data collection was undertaken

using Korean version of professionalism scale derived from HPI and professional quality of life Scale. The results indicated that the higher the professionalism leads to the higher the compassion satisfaction, the lower the compassion fatigue.

Tanaka et al., (2016) examined the perception of professional behaviors and the factors contributing towards professionalism among nurse managers (n=525) representing 15 Japanese nursing facilities using BIPN. Nurse Managers scored highest on professional behaviors in the areas of 'competence and continuing education' and lowest on 'publication and communication'. The results reveal that higher professionalism in nursing is significantly related to higher nursing experience, higher educational levels and position as nurse administrator.

Yang et al., (2016) investigated and analyzed the professionalism of (500) nurses working in a public hospital in Rizhao, China by using BIPN. Results showed low scores of nurses on BIPN (5.67 ± 3.01). The highest score was in continuing education (1.99 ± 0.98) and lowest in autonomy and research (0.11 ± 0.05). A significant difference was found between the total scores on BIPN and the education level of nurses.

Shohani & Zamanzadeh, (2017) in this descriptive cross-sectional study, the attitude among nurses to professionalism have been measured through the questionnaire HPI. The sample of (185) nurses working in training centers affiliated to Medical Sciences University in Tabriz, Iran, participated in the study through stratified random sampling. The results showed that the nurses' attitude to professionalism is at the average level. Among the five dimensions, the scores from the highest to lowest belonged to "membership in professional organizations", "a sense of calling", "self-regulation", "autonomy" and "public service". The relationship between nurses' attitudes toward professionalism and variables of work experience and participation in training courses for individual empowerment was found to be statistically significant.

Antecedents and consequences of nursing professionalism

Antecedents of nursing professionalization are identified and classified in the following groups: a) Personal factors such as; age, qualification, gender, experience, marital status, self-image and position in the organization ; b) Physical environment which includes: excessive workloads, long working hours, inadequate resources, hierarchical structure of hospitals, focus on nursing tasks, lack of personnel, low salaries, insufficient job security and weak organized labor, communication challenges, organizational preconditions and support systems and c) Social environment which constitutes

consumers', family and society/ community views/perception of nursing profession and setting (**De Braganca & Nirmalab, 2017**).

The ultimate goal of professionalism is to modify and upgrade performance at the personal and organizational levels. This modification and improvement of performance can have positive consequences such as: achieving professional identity and professional self-analysis, professional development, self-concept development, improving professional attitude and prestige in the community, enhancement of the professional authority and the power to make decisions as well (**Ghadirian et al., 2014; Dehghani et al., 2016**).

Additionally, positive health consequences (survival, treatment, and faster recovery) through the application of up-to-date and advanced scientific knowledge, development of training programs to improve educational efficiency, holistic nursing care with an emphasis on adherence to ethical codes, safe, effective, and efficient healthcare environment. Occupational and professional satisfaction, decreasing burnout, creating employment standards, Satisfaction of service recipients and increased recognition of patients are another positive consequences of professionalism. Finally, professional and organizational commitment and responsibility can be obtained (**Ghadirian et al., 2014; Dehghani et al., 2016**).

Although professionalization can be very positive for professional practice, it can create blind spots in organization and stop vital information flow in uncertain conditions. This is because professional groups form their own subculture, especially in their language and communication habits. Therefore, they tend to be separated, even if they are working with other groups in an organization. On the other hand, as the professional members of the profession must accept responsibility, self-regulation, and control of the market for their services, the foundation of professionalization is based on the competition over resources and power that are divided between the characters and organizations (**Ghadirian et al., 2014**).

Challenges in nursing professionalism

Challenges in nursing professionalism include: membership, communication, changes in nursing practice, diversity in the population, lack of autonomy, lack of leadership skills, nature of the job: long hours, health care risks, emotional load and undervalue by society, shortage of the nurses and limited opportunities (**Solomon et al., 2015**).

However, providing safe and optimal care to patients and family during their times of illness is not always simple or straightforward. Overcoming individual, systematic, and environmental barriers can be a daily

struggle for nurses. The amount and type of resources provided to support nursing work within clinical settings, directly impacts the degree of nursing professionalism exhibited within these environments. If nurses understand professionalism as grounded in building and maintaining relationships, and are not able to have these relationships due to time and workload constraints, they will not be capable of demonstrating professionalism in practice (Stewart, 2015).

Despite the recognition of factors that affect professionalization and in spite of all changes and efforts spent to develop a professional status for nursing, there is still a blurred social image of the nursing profession in people's minds. More importantly, nurses' image of themselves and the image that their colleagues, particularly doctors have of them are even much more blurred and fuzzier than those of the ordinary people's (Shohani & Zamanzadeh, 2017).

Weakness in professionalization has resulted in repeated criticism of nurses' skills and ability in providing nursing care. In some cases, this weakness is so severe that nurses have many problems in or are incompetent at offering clinical care. Many centers that provide clinical care services are faced with the problems of insufficient professional nurses, increase in the number of resignations, inability to recruit young people into the profession due to lack of job satisfaction among working nurses, low quality of the working environments and non-professional clinical environments. Besides, nurses feel that they have not become professionals in its true sense yet, and they see a lot of complicated problems and challenges on their way to professionalization. All this is going on nowadays, while the society needs nurses who accept the profession wholeheartedly, improve their professional roles and qualities and gain the ability to perform those roles in different situations (Shohani & Zamanzadeh, 2017).

Conclusion

The concept of Professionalism in nursing is a complex one. Professionalism is a multi-dimensional concept; there is no one simple, generalizable definition, or how to assess it. professionalism attributes as mentioned in this study include educational preparation, publication and communication, research development, use and evaluation, participation in professional organization, community service, competence and continuing education, adherence to the code for nurses, theory development, use and evaluation, self-regulation and autonomy, collegiality and collaboration, advocacy, innovation and visionary, accountability, knowledge, and sense of calling. Maintaining professionalism is essential in the nursing profession so this study mentioned the

antecedents and consequences of nursing professionalism. Nurses need to overcome the barriers towards their professionalism by working together and attaining a common goal.

Recommendations

Professionalism has been described by various disciplines but there is a need to explore the determinants that persuade professionalism among nurses. Also there is a need to explore the influence of external work environment on nursing professionalism. Additionally, a comparison of nurses' professionalism across public and private settings in developing countries remains unexplored. The present concept analysis can open the way for conducting more extensive research to identify the barriers, facilitators, and administrative arrangements by clarifying the concept.

References

- [1] Alidina, K. (2013). Professionalism in post-licensure nurses in developed countries. *Journal of Nursing Education and Practice*, 3(5). doi:10.5430/jnep.v3n5p128
- [2] Baingana, R.K., Nakasujja, N., Galukande, M., Omona, K., Mafigiri, D.K. & Sewankambo, N.K. (2010). Learning health professionalism at Makerere University: an exploratory study amongst undergraduate students. *BMC medical education*, 10(76), 1-10.
- [3] Çelik, S., & Hisar, F. (2012). The influence of the professionalism behaviour of nurses working in health institutions on job satisfaction. *International Journal of Nursing Practice*, 18(2), 180-187.
- [4] De Braganca, A., & Nirmalab, D. R. (2017). Professionalism among Nurses: A concept analysis. *International Journal of Business and Management Invention*, 6(7), 60-66.
- [5] Dehghani, A., Salsali, M., & Cheraghi, M. A. (2016). Professionalism in Iranian Nursing: Concept Analysis. *International Journal of Nursing Knowledge*, 27(2), 111-118. doi:10.1111/2047-3095.12082
- [6] Dikmen, Y., Karataş, H., Arslan, G. G., & Ak, B. (2016). The level of professionalism of nurses working in a hospital in Turkey. *Journal of caring sciences*, 5(2), 95.
- [7] Doost, F. H., Moghadas, T., Momeni, M., & Rafiei, H. (2016). Factors Influencing Professionalism: A Cross Sectional Study among Iranian Registered Nurses. *IOSR Journal of Nursing and Health Science*, 5 (3), 47-49. doi:10.9790/7388-0603024749
- [8] Fantahun, A., Demessie, A., Gebrekirstos, K., Zemene, A., & Yetayeh, G. (2014). A cross sectional study on factors influencing professionalism in nursing among nurses in Mekelle Public Hospitals, North Ethiopia,

2012. BMC Nursing, 13(1), 10. doi:10.1186/1472-6955-13-10
- [9] Fatemi, N. L., Moonaghi, H. K., & Heydari, A. (2018). Exploration of nurses' perception about professionalism in home care nursing in Iran: A qualitative study. *Electronic Physician*, 10(5), 6803-6811. doi:10.19082/6803
- [10] Ghadirian, F., Salsali, M., & Cheraghi, M.A. (2014). Nursing professionalism: An evolutionary concept analysis. *Iranian Journal of Nursing and Midwifery Research*, 19(1).
- [11] Hall, R. (1968). Professionalization and Bureaucratization, in: *American Sociological Review*, Vol. 33, pp. 92-104.
- [12] Hintistan, S., & Topcuoglu, B. (2017). Professionalism characteristics of nurses working in internal medicine clinics. continuing education. *Universal Journal of Public Health*, 5(1), 46-53. doi: 10.13189/ujph.2017.050107
- [13] Hodges, B. D., Ginsburg, S., Cruess, R., Cruess, S., Delpont, R., Hafferty, F., . . . Wade, W. (2011). Assessment of professionalism: Recommendations from the Ottawa 2010 Conference. *Medical Teacher*, 33(5), 354-363. doi:10.3109/0142159x.2011.577300
- [14] Jang, I., Kim, Y., & Kim, K. (2016). Professionalism and professional quality of life for oncology nurses. *Journal of clinical nursing*, 25(19-20), 2835-2845. doi: 10.1111/jocn.13330
- [15] Kim-Godwin, Y. S., Baek, H. C., & Wynd, C. A. (2010). Factors Influencing Professionalism in Nursing among Korean American Registered Nurses. *Journal of Professional Nursing*, 26(4), 242-249. doi:10.1016/j.profnurs.2009.12.007
- [16] Konukbay, D., Yildiz, D., Fidanci, BE., Yavuz, S., Akbayrak, N. (2014). Determination of Professional Behaviours of Nurses Working in an Educational and Research Hospital. *International Journal of Caring Sciences*. 7(2),633.
- [17] Krinn, K. L. (2011). President's Message: What Is Professionalism?. *Journal of environmental health*, 73(6), 4-7.
- [18] Miller, B.K. (1988). A model for professionalism in nursing. *Today's OR Nurse*, 19(9): 18-23.
- [19] Mottian, S. D. (2014). Professionalism in nursing: A concept analysis (Doctoral dissertation). Potchefstroom Campus of the North-West University.
- [20] Registered Nurses' Association of Ontario (RNAO) (2007). Nursing best practice guidelines program. Healthy work environments best practice guidelines. Professionalism in nursing. Toronto, Ontario: Registered Nurses' Association of Ontario.
- [21] Shohani, M., & Zamanzadeh, V. (2017). Nurses' attitude towards professionalization and factors influencing it. *Journal of Caring Sciences*, 6(4), 345-357. doi:10.15171/jcs.2017.033
- [22] Solomon, Y., Beker, J., & Belachew, T. (2015). Professionalism and its predictors among nurses working in Jimma Zone Public Hospitals, South West Ethiopia. *Journal of Nursing and Care*, 5(4), 292. doi:10.4172/2167-1168.1000292
- [23] Stewart, R.D. (2015). Nursing Professionalism: The View from the Starting Line (Doctoral dissertation). University of Calgary, Canada.
- [24] Tanaka, M., Yonemitsu, Y., & Kawamoto, R. (2014). Nursing professionalism: A national survey of professionalism among Japanese nurses. *International Journal of Nursing Practice*, 20 (6), 579-587,
- [25] Shohani, M., & Zamanzadeh, V. (2017). Nurses' attitude towards professionalization and factors influencing it. *Journal of Caring Sciences*, 6(4), 345-357. doi:10.15171/jcs.2017.033
- [26] Tanaka, M., Taketomi, K., Yonemitsu, Y., & Kawamoto, R. (2015). An International Comparison of Professional Behaviors among Nurse Leaders in the USA and Japan. *International Journal of Nursing & Clinical Practices*, 2015. 2,113. doi: 10.15344/2394-4978/2015/113
- [27] Tanaka, M., Taketomi, K., Yonemitsu, Y., & Kawamoto, R. (2016). Professional behaviours and factors contributing to nursing professionalism among nurse managers. *Journal of nursing management*, 24(1), 12-20.
- [28] Walker, L. O., & Avant, K. C. (2011). Strategies for theory construction in nursing (5th ed.). Boston: Prentice Hall.
- [29] Walton, J., Chute, E., & Ball, L. (2011). Negotiating the Role of the Professional Nurse. *Journal of Professional Nursing*, 27(5), 299-310. doi:10.1016/j.profnurs.2011.04.005
- [30] Yang, H., Li, N., & Li, H. (2016). The Investigation and Analysis of Nurses Professionalism Using BIPN. In 2016 International Conference on Education, E-learning and Management Technology. Atlantis Press. doi:10.2991/iceemt-16.2016.120.
- [31] Zakari, N.M., Al Khamis, N.I. & Hamadi, H.Y. (2010). Conflict and professionalism: perceptions among nurses in Saudi Arabia. *International nursing review*, 57: 297-304.