



Psychiatric Patients' Perspective: Nursing Uniforms



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ABSTRACT

This paper studied and determined the importance of the design and color of selected uniforms of psychiatric nurses and evaluate their effects and implications for patients. In this descriptive study, a questionnaire developed by the researchers and a nursing uniforms catalog were used during the data collection stage of the research. There were 40.9% of the participants who told that the design and color of a nursing uniform is important and 31.5% of the participants selected white uniform color from the catalog for psychiatric nurses and 33.9% of the patients expressed that they find white nursing uniforms comforting.

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The history of the nursing uniform is as old as the nursing profession itself. The first nurse uniform and cap were designed by Florence Nightingale to protect nurses from contamination from patients. Although designs of uniforms have changed over the years, nurses' uniforms, scrubs, coats and caps have always reflected nurses' status both in the past and today (Spragley & Francis, 2006; Ruetzler, Taylor, Reynolds, Baker, & Killen, 2012). Such uniforms are also used to distinguish nurses from physicians and other hospital staff and to protect them from infections (Lehna et al., 1999; Spragley & Francis, 2006; Yalcin, Torun, & Kadioglu, 2014).

Although the design of the nursing uniform has changed over the years, the color used for these uniforms has been predominantly white. The effect of colors on people has been known for a long time. Colors can alter emotions, thoughts and actions of people and affect them directly (Mazlum, 2011). Additionally, colors can have different effects on people depending on their moods and mental state (Kuloglu et al., 2009). However colors do not have any meaning on their own; colors become meaningful depending on the context, position, to the extent they are used (Kuloglu, Atmaca, Gecici, Unal, & Tezcan, 2002). In studies, it was established that blue which represents the sky and is believed by some to protect from the evil eye and red which represents movement, speed and aggression are frequently chosen in daily life as favorite colors (Kuloglu et al., 2009). The color white, on the other hand is perceived as the symbol of cleanliness and pureness and leads to a more receptive attitude (Mazlum, 2011). A review of studies conducted on patients and patient relatives in different cultures reveals that white uniforms (Albert, Wocial, Meyer, Na, & Trochelman, 2008; Hartmann & Butz, 2012; Skorupski & Rea, 2006; Sebo, Herrmann, & Haller, 2014) are frequently preferred. White uniforms are preferred

for a number of reasons including insuring easy recognition and accessibility (Miller, Mann, & Grim, 2010; Hartmann & Butz, 2012), representing cleanliness, hygiene and reliability (Loveday et al., 2007; Albert, Wocial, Meyer, Na, & Trochelman, 2008; Yalcin, Torun, & Kadioglu, 2014), traditionally being the common color of uniforms (Keyser et al., 2003) and representing professionalism and power (Albert, Wocial, Meyer, Na, & Trochelman, 2008; Yalcin, Torun, & Kadioglu, 2014; Sebo, Herrmann, & Haller, 2014).

However, on the other hand, the white color uniform of nurses are considered to represent a barrier in developing therapeutic communication (Newton & Chaney, 1996; Miller, Mann, & Grim, 2010; Bright, 2014). It was also suggested that when nurses wear plain clothes instead of traditional uniforms, patients socialize more and reach out to nurses more easily (Newton & Chaney, 1996; Miller, Mann, & Grim, 2010; Bright, 2014).

Nurses' uniforms play an important role in developing a therapeutic environment and building and maintaining therapeutic relations with patients receiving treatment for mental disorders. Immediate visual clues about nurses (this could be the color of the uniform) are important for acute patients for their orientation and adaptation. Another opinion suggests that nursing uniforms in psychiatry clinics cause a paternalistic effect and plain clothes together with name tags or badges would be sufficient (Newton & Chaney, 1996; Miller, Mann, & Grim, 2010).

Although there are different studies in literature carried out in different countries (Albert, Wocial, Meyer, Na, & Trochelman, 2008; Bright, 2014; Skorupski & Rea, 2006; Miller, Mann, & Grim, 2010; Keyser et al., 2003) there are no studies in Turkey on psychiatric patients. In regards to creating therapeutic environment/communication this issue is important among psychiatric patients for which non-verbal expressions, observations and environmental factors are more significant. This descriptive study titled "Psychiatric Patients' Perspective: Nursing Uniforms" was planned to determine the significance of design and color of psychiatric nurses' uniforms and to evaluate their meaning and effects for patients. This study aims to create data on the subject in Turkish culture. Based on patients' inputs, this study evaluates to

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Table 1
Socio-Demographic Characteristics of Patient (N = 257).

	n	%
Gender		
Female	152	59.1
Male	105	40.9
Marital status		
Married	114	44.4
Single	124	48.2
Divorced	9	3.5
Widow	10	3.9
Education level		
Illiterate	7	2.7
Literate	6	2.3
Elementary school	92	35.8
High school	75	29.2
University and higher	77	30
Lives with		
Alone	23	8.9
Nuclear Family	200	77.8
With extended family	33	12.8
In an institution (nursing home, residential home...)	1	0.4
Financial status		
Very poor	6	2.3
Poor	17	6.6
Average	164	63.8
Good	67	26.1
Very good	3	1.2

determine whether nursing uniforms represent a barrier in patient–nurse communication or they are a necessity.

METHODS

Study Design

This study is a descriptive cross sectional study.

Participants

The study was conducted between November 2013 and February 2014 with 257 patients who have been treated as inpatients and outpatients in the psychiatry department of Istanbul University Cerrahpasa Faculty of Medicine Psychiatry Department based on the selection criteria.

Research Group Selection Criteria

The following criteria are taken into account when selecting the research group;

- Patients are required to meet psychiatric nurses,
- Patients are required not to have any visual impairment which prevents them from seeing the survey questions and pictures of uniforms,
- Patients are required to be open to communication and willing to participate to the study.

Study Exclusion Criteria

- Patients who are not able to give their informed consent by inability of competence of will.

Data Collection

Data were collected with the questionnaire developed by the researchers in accordance with the literature and a catalog with pictures of uniforms. In person interviews were conducted with the patients consented to participate in the study using data collection tools.

Questionnaire Information Form

The questionnaire was developed by the researchers in accordance with literature. The questionnaire form contains patients' demographic characteristics, data regarding patients' diagnosis and treatment as well as patients' opinions about their psychiatric nurse, the clinic environment and nurse uniforms. The questionnaire form included questions like “Do you prefer psychiatric nurses to wear uniform or dress casually within the clinic?”, “Is the design and color of psychiatric nurse uniforms important for you?” and “If psychiatric nurses wear uniforms in the clinic, does this constitute an obstacle in you communicating with them?”.

Nursing Uniform Catalog

The nursing uniform catalog prepared by the researchers includes 8 different colors of the same model uniform. This catalog which was developed as a data collection tool was shown to the patient during the study and the patients were asked to reply to the question, “Which uniform color in this catalog would you want psychiatric nurses to wear?”

Evaluation of Data

The analyses of the data were carried out with SPSS (Statistical Package for Social Sciences) 16.00 package software. For the statistical analysis of the data, descriptive statistics such as mean scores, standard deviations and percentages were used: chi-square test for the parametric data. The significance level was taken as $p < 0.05$.

Ethical Considerations

Research ethics committee approval was granted by the institution where the study was carried out (Scientific Research Project Ethics Committee, Cerrahpasa Faculty of Medicine, Istanbul University, 14.11.2013/31877), and written consent was taken from the participating patients.

RESULTS

The average age of the participants of the study was 36.58 ± 14.36 (min: 16, max: 86) and the mean number of treatment years was found to be 5.97 ± 7.28 .

Patient socio-demographic characteristics are shown in Table 1. While the total sample size was $N = 257$, 59.1% ($n = 152$) of the patients were female, 48.2% ($n = 124$) of the patients were single, 35.8% ($n = 92$) of the patients had elementary school education level and 77.8% ($n = 200$) of the patients live with their nuclear families and 63.8% ($n = 164$) of the patients had an average income.

Table 2
Clinical Characteristics of Patients (N = 257).

	n	%
Diagnosis groups		
Schizophrenia	54	21
Bipolar disorder	92	35.8
Anxiety disorder	79	30.7
Other	32	12.5
Number of hospitalization in a psychiatry clinic		
No Hospitalization	148	57.6
1 hospitalization	42	16.3
2 hospitalizations	31	12.1
3 hospitalizations	16	6.2
4 hospitalizations	5	1.9
5 hospitalizations	7	2.7
6 and more hospitalizations	8	3.2
Presented to hospital		
Voluntarily	212	82.5
Brought by the family	37	14.4
Brought by judicial authority	3	1.2
With a physician's recommendation/referral	3	1.2
Voluntarily and according to their family's wishes	2	0.8

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