



Evaluation of the validity and reliability of the Korean version of the Nursing Professional Values Scale—Revised

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SUMMARY

Background: The development of professional values is a significant factor in improving nursing practice. It is important to develop nursing curricula for establishing and investigating nursing students' professional values. Professional values of Korean nursing students may differ from those of nursing students in other countries, and research on the professional values of Koreans using a validated scale is needed.

Objectives: The purpose of this study was to test the validity and reliability of the Korean version of the Nursing Professional Values Scale—Revised.

Methods: Convenience samples of 1077 baccalaureate nursing students were recruited from four universities in Korea. Construct validity and internal consistency reliability using explanatory factor analysis were examined.

Results: The validity was obtained using a principle component analysis of a five-factor structure (variance explained 58.90%). The five factors were labeled human dignity, professionalism, innovation, contribution, and advocacy. The Cronbach's alphas were .93 for the total scale and .89–.62 for the subscales.

Conclusions: The overall Korean version of the Nursing Professional Values Scale—Revised was valid and reliable for measuring nursing professional values. Criterion-related validation of the Korean version of the Nursing Professional Values Scale—Revised and the development of items congruent with Korean culture are needed to support the validity and reliability of the Korean version of the Nursing Professional Values Scale—Revised.

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Introduction

The values of nursing are the guidelines of nurse behavior, and clarifying professional values is essential for the discipline of nursing. Values are active standards that guide social and professional behaviors and affect moral judgment (Rassin, 2008), and the valuing process promotes critical thinking, empathy, communication and relationships with others (Altun, 2002). Therefore, developing professional values is a significant factor in improving nursing practice.

Value formation has cognitive and affective components, including both intellect and feeling, and student values are changed during the education process (Weis and Schank, 2002). The development of professional values differs according to education and experience and begins in formal educational programs (Weis and Schank, 2002).

Subsequently, nurse educators need to facilitate value development of nursing students and socialization into the profession. Many studies have supported the notion that professional values are cultivated according to the level of education. Secrest et al. (2003) argued that the professional values of freshmen and senior baccalaureate nursing students were significantly different, and Leners et al. (2006) suggested that the professional values of nursing students changed significantly throughout the course of the program. Therefore, it is important to develop nursing curricula for the establishment of professional values and to investigate nursing students' professional values. In addition, a valid scale for measuring the professional values of nursing students is crucial because of the importance of their development.

Background

Professional values are standards for action that are accepted by the practitioner and/or professional group and provide a framework for evaluating beliefs and attitudes that influence behavior (Weis and Schank, 1997). Values in nursing encompass not only what is considered important for recipients of nursing services, but also provide an appreciation for what is considered most important to the professional nurse (Milton, 2007). There have been a number of

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studies on the content of professional values. Yarbrough et al. (2008) recommended that professional values include respect for human dignity, protection of patient privacy, protection from harm, and personal and professional responsibility and accountability. In addition, Altun (2002) argued that the prevailing values in nursing are esthetics, altruism, equality, freedom, human dignity, and truth. Shaw and Degazon (2008) recommended core professional nursing values, including altruism, autonomy, human dignity, integrity and social justice, and emphasized student integration of professional nursing values. Altruism refers to the concern for the welfare and well-being of others. It is the expression of selfless concern for others when there is no obvious reward to be gained for oneself, except the belief that someone else will benefit or avoid harm (Gormley, 1996). Autonomy refers to the right to self-determination and self-direction, even amid challenges, obstacles, and disadvantages (Farenwald et al., 2005). Human dignity refers to respect for the inherent worth and uniqueness of individuals, families, and communities and characterizes all interactions a nurse should have with patients and co-workers (Farenwald et al., 2005). Integrity refers to nurses acting in accordance with an appropriate code of ethics and accepted standards of practice (Farenwald et al., 2005). Social justice refers to upholding moral, legal and humanistic principles. It serves as the underpinning for how decisions are made in terms of the equitable distribution and allocation of health care services and resources such as education and safe workplaces (Boudain, 2005).

In addition, values emerge from the cultural environment, social groups, education and past experiences (Rassin, 2008), and a professional culture arises from shared professional experiences based on attitudes influenced by nursing values, education, and regulation by means of social control (Altun, 2008a). As a result, culture, professional education, training, and experience affect nurses' values. Although the professional work of nurses is representative of a global nursing culture, some activities reflect unique values and traditions that are rooted in nurses' cultures of origin (Rassin, 2008).

Korean nursing as a specialized job was adopted from Western countries and established through the Korean War and economic development period (Yi, 2002). Although Korean nurses contributed to the health improvement of Koreans during the Korean War and the time of economic hardship, Korean nursing encountered difficulty becoming accepted as a profession because of the traditional Confucianism tenets of obedience in Korean culture, which holds that women are inferior to men (Yi, 2002). Therefore, the professional values of Korean nursing students could be different from those of nursing students in other countries, and research on the professional values of Koreans using a validated scale is needed.

The Nurses Professional Values Scale (NPVS) was developed in the USA by Weis and Schank to measure professional nursing values based on the 1985 American Nurses Association Code of Ethics for Nurses with Interpretive Statements (2000). The Nurses Professional Values Scale—Revised (NPVS-R) is a revision of the original scale and was necessitated by changes to the American Nurses Association Code of Ethics for Nurses with Interpretive Statements, which was validated by Weis and Schank (2009). The NPVS-R is widely used to measure professional values and has been translated into other languages. However, the factors in the factor analysis differ according to language, and it is unclear whether or not the Korean version is valid. Therefore, the purpose of present study was to validate the Korean version of the NPVS-R.

Methods

Subjects

A convenience sample of a total of 1077 baccalaureate nursing students from four universities was selected to participate in this study from September to December in 2011. Excluding the questionnaires

with missing values in the Korean version of the NPVS-R, a total of 1024 questionnaires were appropriate for analysis. In total 95.5% of the sample population was female, and the mean age was 20.90 years (SD: 2.05, range: 18–34). Among all subjects, junior ($n = 233$) and senior ($n = 226$) students had clinical practice experience, sophomore students ($n = 268$) had fundamental nursing practice experience in the laboratory, and freshmen ($n = 297$) were enrolled in introduction to nursing classes.

Instrument

The NPVS-R (Weis and Schank, 2009) was used to measure nursing professional values. The NPVS-R is a revised version of the original NPVS developed in 2000 to reflect the 2001 American Nurses Association Code of Ethics for Nurses with Interpretive Statements. The NPVS-R was structured with five factors supported by psychometric evaluation in 2009: caring, activism, trust, professionalism, and justice. The NPVS-R consists of a total of 26 Likert-type items rated with a score of 1–5, where 1 = not important, 2 = somewhat important, 3 = important, 4 = very important and 5 = most important. Possible NPVS-R scores range from 26 to 130 and a higher score indicates a stronger professional value orientation. The Cronbach's alpha of the total 26-item scale was reported to be 0.92, of which five factor scores ranged from 0.70 to 0.85.

Procedures

We obtained the author's permission to use the 26-item NPVS-R. A Korean bilingual translator with a major in nursing translated the NPVS-R from English to Korean. Next, two nursing professors reviewed the translation and determined if it was relevant to Korean situations, both semantically and culturally. Minor revisions, such as changes in verbs, adjectives, or adverbs, were performed in this step. Next, the Korean translation was translated back to English by another bilingual translator who has lived in the USA for over 20 years. The back-translated version was very similar to the original version, and therefore it was not necessary to further correct the Korean version. Next, six nursing professionals with PhD degrees examined the Korean version as part of the expert validation and returned the questionnaire with a few comments. This Korean version of the NPVS-R was tested by ten nursing students (three freshmen, three sophomores, two juniors, and two seniors) to identify whether the meaning of the items could be clearly understood and whether or not there were vague terms.

Data Collection

This study was approved by the Institutional Review Boards of the Catholic University of Korea and Seongshin University. We visited lecture rooms at the end of class to distribute the Korean version of the NPVS-R questionnaires. Before distribution, we explained the purpose of the study, that there was no requirement to participate, and that participation had no influence on school life or grades. Also, we explained that students who wanted to participate in the study should read and sign the informed consent which was located at the cover of the questionnaire. We went outside the room after placing the questionnaires on a desk. Students who wanted to participate in the study voluntarily picked up a questionnaire, signed the informed consent, and filled out the questionnaire. The completed questionnaire was put on the desk. We retrieved the completed questionnaires after all participants had finished filling out the questionnaires.

Data Analysis

The Statistical Package for the Social Sciences (SPSS) 19.0 was used for the data analysis. The Kaiser–Meyer–Olkin (KMO) test, Bartlett's test of sphericity, communality measures, and anti-image correlation

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