



# Research on knowledge sources used in nursing practices

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**Summary** This paper reports a questionnaire-based investigation into the knowledge sources used by nurses in two Turkish university hospitals, and whether these knowledge sources were related to sociodemographic variables.

78.5% of the nurses said that practice should be based on evidence and 75.9% stated that this evidence should come from research. 80.7% stated that evidence-based practice was useful. However, evidence that was not based on research constituted the first three most frequently used sources of knowledge. Sources of evidence-based on research were detected as being in the 4th, 5th, 6th, 8th, and 10th positions regarding the frequency of use. The nurses expressed a belief that nursing practices should be based on evidence, but did not reflect this belief in their behavior. Crown Copyright © 2007 Published by Elsevier Ltd. All rights reserved.

## Introduction

In healthwork, evidence is defined as knowledge which is accessible by decision-makers and that provides scientific evaluations of practices. Explanations such as “evidence is accurate; it is knowledge; and it is obtained from research and meta analysis” are found in the literature (French, 2002; Maljanian et al., 2002). Two types of evidence are identified: that based on research and that not based on research. The first comprises re-

sults obtained from research, whilst the second comprises experiences, intuitions, discussions with associates, and clinical observations (Estabrooks, 1998). While clinical observations constitute less reliable evidence, randomized controlled studies are said to be the most reliable evidence (Sackett et al., 1996).

Sackett et al. (1996) first used the concept “evidence-based practice” in order to express “evidence-based medicine”. Scientific data and personal experiences were integrated and used to the benefit of patients as a result of this evidence-based medicine concept. As time passed, the concept spread to that of evidence-based nursing (Maljanian et al., 2002), which can be said to be associated with research-based practice (Tierney

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and Taylor, 1991). Evidence-based nursing involves making decisions regarding patient care using the best evidence in a rational, scientific, and definite frame (Hunt, 1996). Use of evidence-based decisions in patients' care is an important issue in effective nursing practices. The purpose of evidence-based health care is to improve health services by eliminating the gap between research and clinical practices (Soukup, 2000; Upton and Upton, 2006).

## Background

Evidence-based practice involves using the best evidence obtainable to support clinical decisions. Evidence-based practice is described as "utilizing the research". However, evidence-based practice and research-based practice are not the same. When evidence-based practice is defined as those practices which integrate the best evidence obtained from systematic research with clinical expertise, evidence-based practice has a broader meaning (Estabrooks, 1998). Nurses use evidence-based practice more than research-based practice because it is claimed that there is more information not obtained from research than from scientific information in evidence-based practice. However, there are very few studies regarding knowledge sources used by nurses in their practices (Retsas, 2000).

Jennings and Loan (2001) found that knowledge derived from intuition is important in nursing. Recommendations include accepting intuition as evidence in nursing enactment of evidence-based practice. If nurses believe that knowledge is more than science, then expanding the rules of evidence to include intuition and other sources of knowledge is essential.

Estabrooks et al. (2005a) drew on data from individual and card-sort interviews, as well as from participant observations, to identify nurses' sources of practice knowledge. Their findings demonstrate that nurses categorize their sources of practice knowledge into four broad groupings: social interactions, experiential knowledge, documents, and a priori knowledge. In addition, Estabrooks et al. (2005b) found that Canadian nurses' preferred knowledge sources for clinical practice. These nurses preferred to use knowledge gained through personal experience and interactions with co-workers and individual patients rather than articles or textbooks.

Milner et al. (2006) measured information-seeking habits by examining reading behavior, conferences attendance, and participation in educational

activities. Trends in their descriptive results indicate that clinical nurse educators read professional journals more often than the other groups of nurses included in their study.

Nursing knowledge comes from a variety of sources, including teachers and lectures, practitioners from a variety of clinical backgrounds, clinical placements, books and journals, clinical representatives from health care organizations, and the media. These sources of knowledge have a direct influence upon practice and upon the development of nursing knowledge. Nursing knowledge, however, is also influenced by indirect sources. The development and construction of knowledge occur in a social context involving human interaction, and its legitimacy tends to be dependent upon the values and beliefs of certain powerful groups in society, such as doctors, managers, and politicians (Berragan, 1998).

The internet is an increasingly important source of practice knowledge. Nurses clearly lag behind other groups in workplace use of the internet. While technical expertise may be a contributing factor, especially given the older age cohort currently comprising the majority of working nurses, it is believed that other factors weigh more heavily. Four of these factors are the form of internet information, efficiency as a value in the workplace, organizational infrastructure support, and the value placed on nurses' work (Estabrooks et al., 2003; Lawton et al., 2001; Liu et al., 2000).

It is not known how nurses interpret the appropriateness and credibility of information from research, or how it is integrated with other sources of knowledge without the influence of prescribed criteria (Bahar, 1996; Eroglu et al., 1996). This article addresses knowledge sources used in nursing practice at two hospitals in Izmir/Turkey, and examines whether the nurses' selection of or preferences for knowledge sources were related to sociodemographic variables.

## Nursing in Turkey

There are approximately 80,000 nurses in Turkey, or 1 nurse per 868 people. The ratio of nurses to physicians was 1.2 in 2002. Health problems in the population are similar to those of developed countries: cardiovascular disease is a leading cause of death, along with other diseases, accidents and cancers (Prime Ministry Turkish Statistical Institute, 2004). Most nurses are still working in acute health care areas; they have an important role in the health care team and have a primary role in caring for healthy and ill individuals. Public health

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