UNIVERSITY OF KUOPIO
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ENSIO ANNELI. Modelling of nursing interventions.

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In the 1980s there could be acknowledged a breaking phase in the knowledge of nursing science, in which it sought for its own roots and starting points. It has thus encouraged to build a model of di-anöigöst classification system, which is based on the very own philosophy of nursing science. Through philosophic-theoretical approach it has been examined how the nurse receives information on the meanings that the patient has given to his experiences. The phenomenon is being described with the concept “to open” (anoigoo, Greek). The di-anöigöstic process that pursues to obtain enforcement for the anöigöstic object, is derived from this. The concept “diagnosis”, which emphasises positivistic interpretation, is being replaced by the concept “di-anöigosis”, which then emphasises phenomenological experience and humanistic understanding. The conceptual analysis is being mirrored through the evolutionary view of Beth Rodgers, in which the concepts are examined according to their use, application and meanings.

The purpose of the present study is to create a di-anöigöstic model that is based on the holistic concept of man, its roots being in philosophy; to illustrate a phenomenological-existentialist and di-anöigöstic model of meanings; to construct a monoplastic model of anoigöstic objects; to illustrate a model of di-anöigöstic indicators based on the general concept on health; to form a structure and process model on the basis of a multi-paradigm; to apply scientific conclusion methods to the di-anöigöstic process by using cases as examples; to create a systematic classification based on substance and classification regulations in order to form a di-anöigöstic upper structure and a code directory; with the help of an ideal type model to examine the possibility to make the coded information systematic, as the ADP-files are combined for netting.

The main method to develop a di-anöigöstic classification model is scientific conclusion. When examining the anoigöstic objects of the upper structure, the access of di-anöigöstic information is based on the qualitative method. Furthermore, the di-anöigöstic properties of the lower structure are examined qualitatively. On the basis of the criteria of use, application and meaning, a health continuum was selected. The continuum was used to indicate the intensivity degrees of the qualities. The diagnostic statement is based on the structure and the process.

The research generated a significant result; a new concept of hermeneutic methodology, “avainto” (“opening up”), which, as related to the concept of man, enables us to understand the subject-subject relation and its interpretation. The concepts “anoigosis” and “di-anöigosis” formed a clear conceptual structure for the model. Furthermore, there
were found 26 anoigostic classes for the di-anoigostic upper structure. However, two of the classes of the conscious have no relation to the real world. The other 24 classes form a combination with the components of the real world; consisting of the body and life situation.

The di-anoigostic upper structure was formed examining the relation between perception and experience on the basis of Charles Peirce’s analysis. Those phenomena produced by the elements that are connected to knowledge, emotions and will can be seen to have a connection with Virginia Henderson’s philosophical elements. On the basis of Peirce’s categories of relations, the relations of the anoigostic objects were prioritised, which is the prerequisite of class formation. The language of the di-anoigostic lower structure was found to be connected to each culture, whereas the di-anoigostic upper structure represents intercultural language. Further research can be carried out on the formation of di-anoigosis, based on the created model.

Medical Subject Headings: philosophy; nursing; nursing care/classification; science; methods; concept formation
The purpose of this study was to describe the nursing practice, to prepare the test version of the classification of nursing interventions and to evaluate how it functions in the electronic nursing care plan. This study is connected with the usefulness of information technology in nursing practice. In the study the nursing practice is modelled in a way that it is possible to use the nursing intervention classification in patient care documentation and to transfer the unified information during the patients’ period of care.

The data were collected at Kuopio University Hospital in 1993 in two surgical and two medical wards. Nursing staff described their interactions with the patients by documenting the intervention and events before. The descriptions were tightened up by contents analysis and these new descriptions were classified by Home Health Care Classification (HHCC). The expert group modified the test version of Finnish nursing intervention classification, which was evaluated in MIRANDA-nursing care plan software. The evaluation was introduced into practice in one surgical and one medical wards at Kuopio University Hospital in 1995. The functionality of the system was evaluated by the experiences of the staff, suitability of the electronic nursing care plan program and the convenience of the technical environment. The evaluation included training of the staff in the use of classification and in the use of the software.

According of the results 92% of the data were classified according to the component-structure, 82% according to the main categories of interventions and 63% according to the types of the interventions in HHCC. The interrater reliability between two classifiers was in components 63% and in main categories 68%. The test version of the Finnish nursing intervention classification consists of 16 components, 54 main categories and 68 sub categories of the interventions. In the beginning of test period the nursing staff evaluated the use of the classification in patient care documentation to be inconvenient. Also the problems in the response time in the beginning made it difficult to evaluate the system. However, in time, when the familiarity with the classification grew and the functionality of the technical environment improved, the judgements of the suitability of the classification in documentation changed positive. The testing environment should be expanded before the applicability of the classification can be generalized. The domain completeness encourages the use of classification in nursing documentation. The change into structured nursing documentation in patient care is a wide educational challenge to the nursing profession. The results of this study can be used in the development of computer based patient records.
Medical Subject Headings: nursing care/classification; nursing records; terminology; nursing process; medical informatics.
The aim of this study was to describe the knowledge of nursing staff about pain, pain assessment and pain alleviation in premature babies. A further concern was with the actions taken by care givers in nursing procedures and examinations related to the treatment of pain. Finally, a pain management process was drawn up.

The research data comprised responses to a semi-structured postal questionnaire, observations and theoretical material. The questionnaire was completed by all registered nurses, practical children’s nurses and laboratory technologists who take heel blood samples at premature infants' intensive care units in four university hospitals, i.e. Helsinki, Oulu, Tampere and Turku (N = 280). The response rate was 70.4%. The quantitative material was analysed using statistical methods, while responses to the open-ended questions were interpreted by method of content analysis. The observation material was collected at the neonatal intensive care unit of Kuopio University Hospital by videotaping the nursing procedures and examinations of three premature babies (gestational age < 37 weeks) and their care givers' (N = 70) actions during a period of one week. The material ran up to 60 hours in total and it was interpreted by content analysis. The theoretical material was collected from the PubMed/Medline and Cinahl databases and from systematic surveys of the Cochrane Library since 1993 - 1999. The processing of this material was based on the method of content analysis.

The results show that nursing staff have quite extensive knowledge about premature babies’ pain, its assessment and management. Registered nurses and children's nurses are more knowledgeable than laboratory technologists. Pain assessment was based on physiological and behavioural changes. According to the care givers the most common way to alleviate procedural pain in premature babies was caressing and stroking the babies while talking to them. However carers' knowledge about pain assessment and its management was not completely consistent with their actions. They showed excellent technical skills and abilities at various stages of the nursing process, but direct interaction with the babies and their pain management was insignificant. Nonpharmacological interventions were rarely used during the procedures.

Procedural pain management in premature babies was described by researcher as a process comprising 1) an environment that is favourable to effective pain management, 2) the baby's safe preparation for the procedure, 3) pain alleviation during the procedure and 4) restoring the baby's sense of security after the procedure. Pain management has
to be used alone or together with pharmacological interventions. Additionally, systematic pain management requires documentation of the whole pain management process.

The results of the research provide valuable information for the development of procedural pain management in premature babies. Further studies should aim to establish how well prepared nursing staff currently are for managing premature babies' pain and how they alleviate it. It is important to identify the cultural, religious and functional obstacles to optimal pain alleviation in various organisations. It is also important to find out how concepts of human beings and ethical thinking modify nurses' conceptions of the necessity of pain alleviation. More research is still needed into the efficacy of nonpharmacological and pharmacological interventions (e.g. the use of EMLA cream).

Medical subject Headings: infant; premature; pain; pain measurement; pain: therapy; nursing
A purpose of this study was to describe the expertise of occupational health nurses in health promotion among the working-age population. The study also yielded a model of expertise for health promotion among the working-age population.

The data for the study were collected from five sources. The first of these comprised 20 international articles concerning the expertise and work of occupational health nurses. The data were analysed using Rodgers’s evolutionary concept analysis method. The second source of data was essays handwritten by occupational health nurses (n=20) from eastern Finland. The third source of data was e-mails from occupational health nursing teachers (n=4) in four polytechnics and from researchers (n=5) working in four Finnish institutes of occupational health. All of them had earlier worked as occupational health nurses. The fourth source of data was employees’ interviews (n=26). All of these three qualitative sets of data were analysed by content analysis. Then, on the basis of these four qualitative analyses, a questionnaire with structured and some open-ended questions was created and, following two pre-tests, sent to 468 occupational health nurses. The questionnaire was returned by 373 (80%) of the nurses. Statistical analyses were performed using frequencies, means, chi-squares, the Mann-Whitney U-test, the Kruskall-Wallis test, variance analysis and factor analysis. The reliability of the questionnaire was investigated by Cronbach’s alpha and split-half correlation. The qualitative data were analysed by content analysis.

In their essays, occupational health nurses described their tasks and the nature, prerequisites and consequences of their expertise widely. Teachers and researchers stressed the development of occupational health nurses’ work in their descriptions. Employees stressed the importance of a client-centred approach in the interviews. The functions of an occupational health nurse were grouped into five categories focusing on employees, the work community and workplace, office and administrative duties, collaboration, and other duties. As a result of the inquiry, the concept of professionalism was used in the same meaning as expertise in the occupational health nursing context. The most typical characteristics of expertise were effective, preventive and ethical action, situation-related action, and client-centredness as well as knowledge and skills. In addition, wider responsibilities, new demands of work, changes in activities and goals and the changed needs of clients are typical of occupational health nurses’ work now and in the future. In future, occupational health nurses should develop their social skills, the content and quality of their work and strengthen their professional identity and self-confidence. An expert occupational health nurse requires good health, a positive attitude, mental
strength, experience, appreciation of her work, and should maintain her skills. Expert occupational health care brings not only potential economic and health benefits to companies and employees, but also economic benefits to occupational health care units and society as well as economic benefits and job satisfaction to occupational health nurses.

There were some important connections between variables concerning expertise areas and demographic knowledge. Good training opportunities and possible higher economic productivity were linked in occupational health care units. On average, occupational health nurses spent half of their working hours on preventive tasks. Most working hours on preventive tasks were spent by occupational health nurses in health care centres. Limited resources as well as the high number of health risks among clients were the most typically encountered problems in health care centres, too. Moreover, occupational health nurses in health care centres were more frustrated and pessimistic in their work than their other colleagues.

The results of this study can be of benefit in the development of occupational health nursing and health care education, practice, administration and research. It is important to investigate occupational health nurses’ expertise from the point of view of employers and other occupational health workers. Further research should also focus on the effectiveness of occupational health nurses’ work and the health-promotive methods used by them.

Medical Subject Headings: professional competence; occupational health nursing; health promotion; occupational groups.
UNIVERSITY OF KUOPIO, Department of Nursing Science

TÖYRY EEVA: Humane caring in specialized health care. The development and use of an instrument.

Doctoral dissertation, 231 pages

Advisors: Professor Katri Vehviläinen-Julkunen and Professor Pirkko Meriläinen

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With decreasing resources, it is all the more important to discuss the treatment of patients. The aim of Kuopio University Hospital is to give patients professional and humane caring. The purpose of this study was to develop a reliable instrument to evaluate systematically the implementation of human caring. The study consists of five original publications and the summary. In this first and second phase of the study there were described the content of the concept of humane caring and the development of the Humane Caring Scale (HCS). In the third and fourth phase the reliability and validity of the HCS were evaluated and in the fifth phase the HCS was used.

The data of the studies were collected at Kuopio University Hospital in 1991-1997 via open ended interviews and different questionings. The first data were collected from patients, staff and political decision makers (n=376, response rate 71%). The sample was purposive. The second data were collected from a random sample of inpatients (n=501, response rate 77%). In the third and fourth phase two random samples were drawn among inpatients (n=1046, response rate 73%) and (n=100, response rate 70%). The basic material was compiled through the structured HCS, in which the statements were given both in positive (46) and negative (20) form. The reference material was compiled by using the same scale, but all the statements were given in a positive form. In the fifth phase postal questionnaires were sent to a random sample of inpatients (n=862, response rate 47%). All the statements (59) of HCS were given in positive form.

According the results five key areas of humane caring could be named: patient’s social relationships and privacy; patient’s human growth and development; patient’s emotional life; the promotion of patient’s physical health and the structure of the organization that is promoting humane caring. At first the HCS had 66 items, 46 positive and 20 negative. Majority of the items were important to the patients. The shapes of the distributions of negative statements were slightly bimodal. When the scale incorporated both negative and positive statements, its reliability was lower than when it had positive statements only. The factor solution of the scale which only incorporated positive statements supported the content of the HCS. The HCS which contents only positive statements is more reliable and valid than with negative statements. The validity and reliability of the HCS will continually be evaluated.

Patients’ care was evaluated to be individual and the staff was deemed professional. The short stay patients and those who were dissatisfied with their life in general were critical...
about their care on different sub-areas of the HCS. Particularly one ought to pay atten-
tion to the structure of the organization that is promoting the implementation of human
caring and to support patients to take part in planning of their care.

Medical Subject Headings: nursing care; nursing evaluation research; quality control;
methods; patient care; patient satisfaction; ethics; nursing; interviews; hospitals; hu-
mane caring
THE PURPOSE OF THE STUDY: The purpose of the study was to describe the conceptions that social and health care professionals in primary health care hold of their expertise in recognising the clients' needs for special services, cooperation with specialist services, and teamwork. The specialist services discussed in this study were: child protection, mental health work, substance abuse, disability and rehabilitation.

THE DATA: The data were collected using focus-group interviews. Social and health care professionals in primary health care were interviewed in 3 cities and 5 rural districts with different population sizes. The sample (n=25) consisted of representatives of different social and health care professions who work in different areas of primary social and health care. The data was analysed using phenomenographic method.

THE RESULTS: The interviewees described the changes of the working environment as changes in the operations and changes in the clientele. The larger municipalities were relatively self-sufficient in producing specialist services but the smaller municipalities had to buy their services. Problems were caused by costs and distances to the specialist services providers. According to the analysis, expertise in recognising the need for specialist services was primarily a characteristic of the individual and was broadened when combined with the expertise of other professionals in the work place. The interviews showed that the central area for development is professional expertise. The interviews also showed that ability to recognise special needs was made more difficult on the individual level by a limited knowledge of the subject and fragmentation of the area of responsibility, lack of courage when counselling the clients to seek treatment, and the lack of resources for the promotion of co-operation. The contact with the client remained brief, which made it difficult to recognise the need for special services. There was not enough time for the professionals to evaluate and plan their work. According to the research, the concept of co-operation varied and presented in conceptions that either weakened or strengthened co-operation. The concept of teamwork was unclear and none of the groups had a unified understanding of teamwork. The different views ranged from pair work to more developed or multi-professional form of teamwork. The different conceptions differed from each other on the basis of the significance of teamwork and the relationship between the team members. The smaller the municipality, the more developed was the concept of teamwork.
USE OF THE RESULTS: The results of this study will be used when developing the education of social and health care experts and to develop the practices in the workplace to become more client oriented, and to improve the availability of specialist expertise in social and health care.
Health choices, interventive interview, life control

The purpose of this research was to describe the development process and experimenting of a health portrait indicator in the work of public health nurse. The aim is to develop a practical working tool for the public health nurses. With the tool they can assess health choices of young people in changing life situations. The indicator experiment took place in a comprehensive school during the school’s medical check for pupils (N=129) consisting of seventh, eight and ninth graders. Interventive interview was applied in the experimenting process.

According to the pupils and public health nurses, the health portrait indicator used in the interventive interview was a useful tool in the assessment of health choices. The method facilitated identification of certain elements in the life situations, the resources, the processes of change and the life control of the young people. The method helps to find the young people who need special support. Similarly, the interventive interview helps public health nurses to develop their work and manage the quality of health promotion. Public health nurses emphasized the fact that in using the indicator the user has to remember to listen to the young and to trust their own ability to debate. Young people expressed their willingness to take part in discussions. However, they were of the opinion that in schools, and with adults in general, they seldom have opportunities to freely express their opinions. The public health nurses, the teachers and the pupils, who participated in the project, gave empirical and experiment based information about the applicability and the practicability of the working tool.

The reliability of the tool was secured during all the development stages by giving description about the contents, the structure and the application of the indicator. In reference to the experiment, preliminary criteria references were developed as the basis for assessment.

The development process of the health portrait indicator into a practical working tool requires years of research, experimenting and testing. The development process is based on deductive and logical inference. In order to further develop a practical working tool we must continue testing the contents, the structure, the criteria validity and the reliability of the indicator.
The purpose of the study was to describe the life situation and support mechanisms of single mothers who are clients of parish nurses. This is done with the help of empirical data. Based on the data, a hypothetical model was created to describe the support process given to single mothers by parish nurses. The starting point in this study was the changes in society over the last ten years and their influences on families with children. The economic depression has caused distress to many families and increased bad feelings of both adults and children. The number of single parents has also increased all the time, and the chances of risks and crises happening among them have especially grown. The data was collected by interviewing fourteen parish nurses and five single mothers. The data was analysed based on the grounded theory method. The life situation and supporting of the single mothers were viewed from the view point of family nursing, but they were also integrated not only with health care but also with state’s social work and the social work of the church. The context of the study was the social work of the church and the state’s social work is referred to as a co-operative partner.

The result of the study is the model which describes the supporting of a single mother at a deadlocked life situation. The key concept of the process describing interaction is encountering, which is a requirement for the development of a successful support process. In the first stage of encountering, the parish nurses meets with her deadlocked life situation of a single mother. Typical features of a life situation at a deadlock are economic distress, difficulties in social relationships, exhaustion, difficulties with health, and experiencing negative feelings. The parish nurses need to have skills to encounter and share the distress of the situation, convey acceptance, and to offer comfort, while they also view their clients’ situation in a comprehensive way. In the stage of negotiating agreements, the parish nurse and the client find solutions to the difficult life situation, set goals, and make mutual commitments. In the stage of increasing empowerment, parish nurses try to support life carrying factors, listen and talk, encourage hope, ponder questions of life, deal with emotions, and enable rest and relaxation. The life situation at a deadlock means the entanglement and accumulation of negative matters. This situation needs a holistic attempt, mutual trust, and various support forms, which support the single mother. The model of encountering created in the study is a substantive, practical theory, which helps to analyse and develop actions in practise. The model can also be used in teaching family nursing in training social and health care personnel. The hypo-
Theoretical model of encountering can be developed further in future studies and it can be tested empirically with quantitative methods.
Coronary heart disease is a common cause of death among Finnish middle-aged men. Elevated blood pressure (BP) is a risk factor for coronary heart disease. Biological and behavioural components are associated with individual’s BP level. Everyone can contribute to his own preventive health by his lifestyles and decisions.

The purpose of the study was to examine the associations of BP with biological and behavioural components and to compare two different BP measuring methods. The present data were obtained in 1992 from random sample of 132 men with the age range of 50-60 years living in Kuopio area. The study was a part of the DNASCO-Study (DNA polymorphism and carotid atherosclerosis) of the Kuopio Research Institute of Exercise Medicine. The lead-in period data 1994-1995 are presented here.

Clinical measurements, interviewing, food and alcohol diaries were used to collect the data for this study. BP level of the subjects was measured using office and ambulatory methods. Means of three BP pressure values in supine position were used as results of the office BP. Means of all the 24-hours measurements, means of day and night time measurements and means of four-hours periods’ measurements were used as results of the ambulatory BP. Serum lipoprotein factors, plasma insulin and blood glucose were used as biological factors. Examined nutritional factors were analysed as absolute values of total of dietary energy, fat, cholesterol, protein, sodium and fibre and as absolute values per body weight. The association of BP level with alcohol consumption and smoking were examined. The association of physical activity were studied by measuring aerobic and anaerobic state and maximal oxygen uptake. Body overweight was assessed as a body weight, body mass index (BMI), waist-to-hip ratio (WHR) and sum of skin folds. The statistical analyses (ANOVA, MANOVA, Pearson's correlation, analysis of variance and t-test for independent groups) were performed by Windows SPSS 9.0 software.

Blood levels of total-, LDL- and VLDL-cholesterol, insulin and glucose had association with men's high BPs (p<0.05). Association between nutritional factors and BPs was not clear. All nutritional factors per body weight had negative correlation with diastolic office BP in men without medication (p<0.05). In ambulatory measurements day times low diastolic BPs associated with high amounts of sodium, fat and protein in men without medication, and high systolic BPs associated with high amounts of protein and cho-
oder cholesterol in men using medication. Ambulatory diastolic BP correlated directly with amount of protein in men using medication (p<0.05). Men's consumption of alcohol had direct correlation with ambulatory systolic BP. High maximal oxygen uptake had association whit lower systolic BP (p<0.01). Elevated body weight and BMI were associated with diastolic office and ambulatory daytime BPs (p<0.05). Differences between BP measuring methods were statistically (p<0.05) but not practically significant.

To conclude, high lipoprotein levels in blood, heavy alcohol consumption and body overweight are risk factors for hypertension. Physical activity may help to prevent the elevation of BP. Standardised office and ambulatory BP measurings give results, which are valid of comparing. These results are useful in patient's preventive care, his commitment and participation to the treatment and education of health care staff.
The purpose of the study was to describe the sphere of activities, the capabilities of counselling and readiness to further development of Russian nurses in the area of Sortavala in the counselling process of diabetic patients. The data were gathered in March 2000 from 196 nurses in the area of Sortavala using survey questionnaires that include mainly structured questions. The response rate was 72%. The results of the study are described by using frequencies and percentage distributions.

According to the results of the study counselling of diabetic patients was to some extent included in the work of nurses. Nurses were most responsible for the implementation phase of the counselling process. They participated less in assessment, planning and evaluation of counselling. Doctors were mainly responsible for all other sectors of counselling. Patient’s choices were respected, but the patient was seldom participating in planning or evaluation of counselling.

Nurses estimated that their capabilities as counsellors of diabetic patients were mainly sufficient. They estimated their knowledge of the counselling process to be better than their practical skills. Nurses were willing to develop as instructions of diabetic patients and to improve the counselling of patients in their own work places.

The results of the study can be utilised especially in the area of Sortavala when developing the further education of nurses and improving the counselling of diabetic patients. In further studies it would be necessary to measure the knowledge level of nurses involved in the counselling of diabetic patients by using a knowledge level indicator. To understand the different culture of nursing it would be useful to study the hope connected to counselling from the point of view of nurses and patients. It would also be necessary to study how nurses who have received further education have been able to influence the development of counselling.
The aim of this study is to describe the establishment of mutual trust in the nurse-patient relationship as estimated by surgical patients. The patients were asked to evaluate which qualities of nurses’ working methods of aspects of the care environment were significant factors for the establishment of trusting nurse-patient relationship. The study also presents the patients’ evaluation of how well these factors were realised and, in addition, the link between these variables and establishment of trust in the relationship.

The material in this study was gathered using a semi-structured questionnaire from 150 adult patients who had been receiving treatment in the surgical wards of one university hospital. The wards involved were urology, gastroenterology, traumatology, neurosurgery and two orthopaedic wards. The response rate was 87% (n=130). The largest age groups were age 45-54 years (20%) and age 55-64 years (20%). 53% of respondents were women. The average length of treatment on the ward was 3-6 days (51%). 44% of respondents felt that their health was quite good at the end of the treatment period.

On the basis of the study findings the nurse’s willingness to help was felt to be the most important quality in the nurse (89%). 78% of the respondents felt that this had been realised very well. As for nurses’ working methods, the most important were considered to be acting appropriately in the situation (82%) and safe working practise (82%). 71% of the respondents felt that these had been realised very well. When it came to the care environment, tidiness was regarded as the most important factor. This had been realised very well in the opinion of 79%. The emerged no statistically significant link between these variables and the establishment of a trusting nurse-patient relationship.

Open questions were used in order to obtain more comprehensive information about the subject. Interactive skills were felt to be an important quality in a nurse. Talking to patients, relieving pain and comforting patients were felt to be important working methods. In considering the care environment, significance attached to communicating information and taking visitors into account.

Although the findings of this study show that the care of patients in the hospital concerned was of a high standard, patients noticed an atmosphere of hurry prevailing on the wards, and also thought that the wards were understaffed. The focusing of resources deserves more attention than it has received to date. The results of this study can be utilised in the basic training of nurses, practical nursing and administration. In the future it
will also be necessary to gather information about whether the establishment of a trust-
ing nurse-patient relationship differs in various fields of nursing, various societies and
between different cultural groups.
The purpose of this study was to describe and explain parents’ experiences of the support they received from the school health nurse for their parental resources in the context of health check-ups on children in year of the Finnish educational system (age 8-10). This study is a part of a project investigating resource-oriented nursing actions in the health care of adolescents and adults in Kuopio University at the Department of Nursing Science.

The data was gathered from parents who were invited to take part in the regular health check-up of their primary school year 3 children. The sample consisted of 225 parents. The questionnaire was completed by 111 parents and response rate was 44%. For data description frequencies and percentages were used. Crosstabs, Chi square –test and Fisher exact –test were used on analysing the differences between the groups.

The parents felt they had most resources in respect of their self-esteem and social networks. The factors causing parenting strain reduced parental sense of resourcefulness. Parents who had sufficient resources also felt empowered. Creating a good relationship between the parents’ and the school health nurse is important in strengthening parents’ resources, especially in enhancing parents’ self-esteem. A good relationship was created by having an equal opportunity to influence the health check-up process and from the experience of being understood and respected as a parent. It was very important to enhance parents’ positive and realistic self-assessment in order to strengthen trust and the sense of capability as a parent. In the estimation of almost all the parents, enhancing social networks was least successfully carried out. The health check-up was important for parents’ experiences of being empowered. The parents were very satisfied with the opportunity to take part in their child’s health check-up and hoped it would be possible again in the future.

In this study information was received about for school health care and school health nursing practice. The outcomes of this study can be used in recognizing the factors behind parents’ experiences of being resourceful and in allocating support for parental resources based more parents’ own assessments. It would be important in future research to explore more closely the parents’ experiences of their parental resources and interventions promoting those resources in order to support child’s healthy development toward adolescence and adulthood.
UNIVERSITY OF KUOPIO, Department of Nursing Science

KOHONEN ARJA: Emergency activity as an object of the change. – Case study from a university hospital

Master’s thesis, 104 pages, 14 appendices

Advisors: Professor Katri Vehviläinen-Julkunen and Researcher Eija Kattainen

Change, planning of change, management of change, culture of nursing

The purpose of study was to describe the planning of fusion of the emergency activities in Kuopio and in Pohjois-Savo's nursing district, and the removal of activities of children's deceases in the hospital KYS Alava to Kuopio university hospital (KYS). The planning of change is described from a point of view of nursing staff, nursing managers and doctors in Pohjois-Savo's nursing district.

The material of study was collected by the structured inquiry between 29.1-12.2.2001. The target group of study was personnel of the hospital KYS Alava: in the emergency service of the children's clinic, in the department five, in the policlinic and personnel of the hospital KYS Puijo: in the emergency district (policlinic, control department), in the department of clinical chemistry and radiology (N=268). 145 people answered to the inquiry (54%), 118 of them belonged to nursing staff, 9 of them were nursing managers and 17 were doctors. The quantitative data was analysed using a SPSS 6.1 programme. Material representation by frequency and percent.

All the personnel groups mainly took a positive attitude towards the future. Changes in the people's own work were experienced important and as an interesting incentive in the change process. Nursing staff and doctors experienced the information of changes in the emergency activity insufficient. Also the interaction between superiors and staff would be needed more according to these groups. The management of change strategy turned out to be the strength of nursing managers.

The data of study can be used for developing the nursing management. The data produced in the study is also important in guiding the staff to plan and develop their own work in the community of many profession.

In the later studies the meaning of dialogue between superiors and staff should be cleared up in the different stages of the change process. It would be also interesting to know, how the implementation of the change succeeded.
Hopelessness, depression, hope, inpatient, adult, nurse-patient relationship

The purpose of this study was to describe hopelessness among depressed inpatients and the factors associated with their hopelessness. The aim was to develop depressed and hopeless inpatients’ care in nurse-patient relationship.

The study is part of the Clinical Quality Project at the Department of Psychiatry in Kuopio University Hospital. The data were collected by structural questionnaires from the depressed patients who were admitted to hospital between March 1997 and December 1998. The patients were selected from four adult psychiatric wards (n=194) and one psycho-geriatric ward (n=12) at the Department of Psychiatry. The main diagnosis for the patient defined depression at admission. They were over 18 years old and hospitalization lasted 12 days at the minimum. The patients suffering from some organic brain disease were excluded from the study.

Hopelessness level was measured with Beck Hopelessness Scale after the admission and before the discharge. The study aimed at defining the relationship between hopelessness and depression, suicidal intent, life satisfaction, recent life events, socio-demographic variables, social support, fulfilment and satisfaction of the nurse-patient relationship. The data were analysed by SPSS program using dependent and independent t-test, non-parametric tests, correlation coefficients, crosstabs and logistic regression. Factor analysis was used to evaluate the construct validity of the Beck Hopelessness Scale and the measure concerning the fulfilment of the nurse-patient relationship.

Hopelessness decreased during the hospital care. In spite of the alleviation in hopelessness the average hopelessness of the moderately or severely hopeless inpatients was still considerable at discharge. At admission the moderately or severely hopeless inpatients were more depressed, more dissatisfied with their life and they had more suicidal intents than the more mildly hopeless inpatients. The males were slightly more hopeless than the females. According to the patients the nurse-patient relationship was fulfilled well or fairly well. The nurse-patient relationship assisted better the non-hopeless or mildly hopeless patients than the moderately or severely hopeless patients to understand their difficulties, to find coping strategies, to get along with their own feelings and with those of other people and to find hope in the future.
The results of this study may be utilized in nursing practice, administration and education. This new information can be utilized in understanding the care of depressed patients suffering from hopelessness. Deeper understanding will improve the quality of nursing. The information of hopelessness and depression helps the nurse to identify better these phenomena. It also assists to select and to develop the nursing therapeutics inspiring hope in the nurse-patient relationship. The study supplements the previous knowledge in nursing science about the hopelessness of the depressed inpatients.
Prehospital personnel prehospital care, social support, death

The aim of this study was to describe the kind of needs prehospital personnel have for social support in situations ending in death during prehospital care, and whether they obtained such support. The sample consisted of 171 prehospital workers who were working in the fire departments and the private ambulance services in 31 municipalities in Finland. The data were collected by using a structured questionnaire by mail in January 2000.

The data were analysed using the SPSS/Windows statistical analysis programme. The results are described in frequencies, percentage distributions and statistical correlations. The internal consistency of the instrument was estimated using Cronbach’s alpha. The reliability was quite satisfactory.

Most of the prehospital personnel had no difficulties with unsuccessful resuscitation, decision making or procedures of resuscitation. Most of them also had no difficulties in interacting with bereaved persons after the death of a patient. The death of a child produced strongest feelings in the prehospital personnel, and the death of a pediatric patient is commonly difficult for them. There were no significant correlations between demographic variables and need for social support.

The respondents had obtained social support fairly well. Talking to co-workers about situations ending in death, and concrete help from co-workers in emergency situations were important, and they came off well. Most of the prehospital personnel considered it important that they could get debriefings (or defusing) after very difficult emergency situations ending in death. The debriefing and defusing were poorly organized in the prehospital setting. The prehospital personnel needed social support most after the death of pediatric patients. The respondents thought that they needed education about the resuscitation of children, resuscitation in general, and how to interact with bereaved persons. In future, debriefing or defusing should be organized after very difficult emergency situations ending in death. Further research is needed about the death of pediatric patient and what kind of support bereaved persons feel to get from prehospital personnel after the death of the patient.
The purpose of this qualitative study is to describe the factors that influence adolescents who are trying to cope with Rheumatoid arthritis. The interviews on adolescents (N=15), 15 to 19 years old, were used as research material in this thesis. The patients were interviewed in the adolescents’ ward in Reumasairaala (the hospital for rheumatic patients) in Heinola between November 1999 and February 2000.

Resources and developing functions, which puberty demands, affect the lives health of adolescents who have Rheumatoid arthritis. Their lives are also influenced by a health problem – a chronic disease. In this case the Rheumatoid arthritis. Adolescents’ lives include some critical transitional stages such as transition from comprehensive school to post graduate studies, finishing school or leaving home. It is very important that adolescents are coping with, not only these transitional stages at puberty, but also with the disease, which is a part of their every-day life. This study was trying to look for the important factors that help coping with both critical changes at puberty and, moreover, the chronic disease.

According to this study, the factors, which promoted coping with the disease, were the emotional support and concrete helping hand of the closest relatives or friends at home and at school as well as the patient’s tolerance for stress. With friends and hobbies the aspects that were supportive were respect from and equality with friends along with a positive attitude to life. The understanding of one’s limits, sufficient motivation and the confidentiality of the treatment improves managing with the frequent visits to the hospital and the medical procedures. The factors that promoted coping helped these adolescents to control their lives and resolve their health problems. They also diminished the adolescent’s unpleasant physical and emotional feelings.

The issues that promoted coping should be taken into account and made possible, when employees are advised and educated to nursing and developing. It is vital that the employees who treat the adolescents have the information on the factors that help coping with the disease. Post-graduate research should be done from the adolescents’ own point of view; which of the factors that promote coping would be those that actually help in dealing with problems. Those problems should not be solved temporarily thus creating a wrong belief for the future. There should also be a study from the nurses’ point of view; how they see the coping of the adolescents.
The purpose of this study was to describe and explain the perspectives of nurses concerning nutrition counselling of patients with type 2 diabetes and the abilities of nurses to carry out the counselling compared to Diabetes nutrition recommendation y. 1999, and to describe how nutrition counselling in health centres could be developed. The study also aimed to investigate if the background of the nurses had an influence on their abilities, knowledge, counselling and the usage of different education methods and material. The study is a part of an interdisciplinary research project "Nutrition therapy of a diabetic in Eastern Finland" of the departments of Clinical Nutrition Science and Nursing Science at University of Kuopio.

The data was collected by sending a questionnaire in April / May 2001 to the nurses involved in the nutrition counselling of patients with type 2 diabetes in primary health care of Eastern Finland (n = 229). The data was analysed with SPSS / Windows programme by using percentages, crosstabs and Spearman correlation. The open-ended questions were analysed by grouping.

Most of the nurses appraised their abilities to carry out the nutrition counselling of patients with type 2 diabetes good or fair. The strongest elements were the knowledge of diabetes and the assessment of the dietary habits of a patient. The weakest was the ability to carry out group counselling. Compared to Diabetes nutrition recommendation, the nurses on average had a satisfactory knowledge of central guidelines of diet therapy and counselling of patients with type 2 diabetes. According to the results, the nutrition counselling was carried out fairly well, except clear deficits in the assessment and documentation of the nutrition counselling and diet therapy. The most general counselling method used by the nurses was individual counselling and the material the nurses most utilized was written instructions of the therapy and recipes as well as pictures.

According to the nurses, the facilitative things in nutrition counselling were the understandable content of the diabetic diet, varied range of counselling material, a good knowledge and counselling skills of a nurse and motivation of a patient. The counselling was impeded by a lack of motivation, overweight and old age of the patient, lack of time and the defects in the knowledge and education of the nurses. The nutrition counselling of patients with type 2 diabetes could be developed by additional education to nurses, better availability of dietitians, increasing time to nutrition counselling and di-
versifying counselling more practical as well as increasing group counselling. Also the collaboration in nutrition counselling should be developed.

The results of the study indicate that nutrition counselling still needs to be improved in some respects like a knowledge of nurses, group counselling, documentation and valuation. It is important to increase resources at primary health care and invest in varied range of counselling methods.
Resources, family with children, empowerment, maternity and child health clinics, public health nurse

The study is part of an action research called "Maternity and child health clinics in support of families with children in Eastern Finland". The purpose of the study was to illustrate and explain the resources of families, their need of support and their satisfaction with the support provided by the public health nurses. The data were collected at nine maternity and child health clinics in Eastern Finland during the period of time from March 2000 to August 2000. Public health nurses gave the questionnaires consisting of structured and open-ended questions to the childbearing and child-rearing families (N=960), and they returned the questionnaires directly to the researchers. The questionnaires were answered by 467 families with children, which was 48 % of the original sample. The study was limited to cover the questions measuring the family background, family dynamics, strain factors, need of resource-centred activities provided by the public health nurse, its implementation, and its usefulness for the action. Reliability of the questionnaire was good by the Cronbach alpha coefficients. Validity of the strain factors was fairly good by exploratory factor analysis. The results were analysed by SPSS 11.0 and the data were analysed by frequencies, percentages, Spearman's correlations, and cross-tabulations. Summative scores and Mann Whitney test were used to compare differences between the groups. One open-ended question was analysed by quantitative content analysis (n=1) and six by using qualitative content analysis (n=6).

Most of the families were doing well, but about 10 % of the families reported that childbirth had increased role conflicts and isolation in the family. Most of the factors decreasing resources of families with children were related to the use of time in the family (400/0). The families had too little time for partner relationship, for the other members of the family, and for their own individual affairs. A quarter of the families regarded issues related to pregnancy and childbirth to be most straining. Decrease in family income was a considerable strain for every fifth family and ten per cent of the families had financial difficulties. Factors decreasing family resources piled up in families with strain related to the use of time, partnership, financial situation, social relations, and state of health. Emotional support was the support, which was mostly provided by child health clinics. Families with children expected that public health nurses should give more support for their efforts to find out better resources and help and, similarly, support for discussions about feelings concerning uncertainty and stress. Children with families expect to get more positive feedback concerning parenthood and their own
strengths as parents. Families with strain factors in their partnership, use of time and state of health of the family were dissatisfied with the collaboration relation. Support for the whole family, availability of the services and with the emotional, appraisal, informative, and instrumental support received from the clinic. The activity of the public health nurse was regarded as most useful in issues concerning caring and bringing up the child, parenthood, and factors of health. Only few families were of the opinion that the activity of the public health nurse had been useful for empowerment of family resources and partner relationship.

It is of utmost importance that the public health nurse identifies the resources of the family, so that she can empower the families with less resource. The families with small children need more instrumental support in everyday life. In the future, more peer support groups should be organised, support for partner relationship and co-ordinated home help services to families should be developed. The research measure, particularly for the variables of the strain factors, must be evolved. Further investigation is needed so that families with less resources can be found more easily. More information about families needing more support must be provided and the process of empowerment and factors related to the process have to be studied through the experiences of all those involved in the process.
RAAPPANA MAARIT: Pain and instruction of pain management as assessed by adult day surgery patients

Master’s thesis, 70 pages, 3 appendices (13 pages)

Advisors: Professor Anna-Maija Pietilä and Professor Katri Vehviläinen-Julkunen

April 2001

Postoperative pain, day surgery, pain-related instruction

The purpose of this study is to describe post-operative pain, pain management and pain-related instruction as assessed by adult day surgery patients. The subjects of the study are day surgery patients over 18 -years old who have undergone either knee or varicose vein surgery or herniorrhaphy in two hospitals in Central Finland (N=170). The material was gathered through structured questionnaires given to patients upon their return home during May – August 2000. The response rate was 60%. The data were analysed using quantitative statistical methods and the SPSS statistical software. The results are given in tables, figures, percentages and frequencies.

The visual analogy scale (VAS) was a tool used to measure pain intensity in this study. During the last 24 hours 26% of the patients had severe pain (VAS 6-9). Afternoon and evenings were most painful times for the patients. The least of pain after the operation was VAS 2 but 10% of the patients had severe pain in the least (VAS 5-7). The preoperative information of pain and pain management was very important for 76% of the patients. Only 68% of the patients evaluated having received enough information.

The information leaflets were concerned to helpful in pain relief for 75% of the patients. However, 37% of the patients would have liked to get more information of pain relieving. Half of the patients evaluated that nurses underestimate their pain. A quarter of the patients experienced that they couldn’t take part in planning their pain management.

The aim of the study is to develop the instructions of pain management given to patients according to their individual needs. Lack of pain and the significance of pain control are emphasised when the day surgery patient evaluates the quality and success of care provided. The results gained in this study will be used in the development and training of day surgery nursing. The study can be used in developing instructional material for patients as well in the planning of nursing staff’s orientation programme and their training.
Sense of coherence, long-term oxygen therapy, chronic obstructive pulmonary disease, thematic interview

The purpose of this study is to describe experiences and views of a sense of coherence and need of support with it on patients using long-term oxygen therapy. The theoretical approach in this study is based on phenomenology. The study represents preventive and clinical nursing science. According to Antonovsky's theory, which was used in this study as a framework, the sense of coherence includes comprehensibility, manageablebility and meaningfulness. Study material consisted of 14 patients living in Helsinki, suffering chronic obstructive pulmonary disease and using long-term oxygen therapy. The patients were interviewed with themes of the sense of coherence. The patients, 11 men and 3 women, aged from 55 to 82, had been using long-term oxygen therapy for 0,5-11 years. The study material was analyzed with content analysis.

Patients using long-term oxygen therapy reflected that their physical, psychological and social level of functioning, as a part of sense of coherence, was limited. Support from other people affected more to patients' coping ability than their own coping resources, and the most important aspect of meaningfulness was their experience of holistic health. Self-confidence and acceptance of limitations with the level of functioning represented patients' coping resources. Feeling of giving up was typical in difficult disease-related situations, and patients' comprehension of being understood by the others was conflicting. Disappointments in support were mostly associated with actions of authorities. Coping resources of patients with long-term oxygen therapy were mostly concrete and situation-oriented. Patients used them almost daily, but only few were able to use them flexibly. Yet, according to the study participants, they were able to affect their coping with activity and self-consciousness. Positive aspects of life were associated with meaningful human relationships, maintenance of self-sufficiency and the will of life. Satisfaction with one's life was also associated with health. Patients' wishes of future were directed to preserving their physical condition and they wanted to have individual support for the sense of coherence. For that, it is important to identify the individual resources of the sense of coherence. Patients' need of support with the sense of coherence should be evaluated using rehabilitation plan with multi-professional co-operation. Need of support was especially high with patients living alone and in the beginning of long-term oxygen therapy.

With the patients using long-term oxygen therapy, it is important for nurses to support their self-reliance and to disseminate information about their disease and its self-care. It
is also important to recognize and take care of patients' depression as well as organize rehabilitation of aged, seriously injured patients. The concept of sense of coherence is suitable for nursing science, focusing on meaning of health and level of functioning with chronically ill patients. In the future, nursing science should pay more attention to recognition of typical aspects of the sense of coherence with different marginal groups, such as seriously handicapped persons.
The physical care environment, people with dementia, nursing

The purpose of this study was to describe views of nursing staff concerning how a good and appropriate physical care environment of demented patients in special care unit is like. In addition to this study examines in what way good feeling, the functional ability and safety of demented patients can be supported with the help of the physical care environment.

The study was taken part in 22 nurses having education in the field of nursing from four special care units, which are located in different parts of Finland. The data were collected by using three open-ended questions and were analysed by qualitative content analysis.

As a result of this study was formed a model describing the environmental features of the physical care environment. These features are maintaining the atmosphere of homeliness, development of orientative and clear environment, creating occupational of communal areas and preventing patients to damage themselves. They make the good care of demented patients possible.

By creating the homelike atmosphere concerning the physical care environment the life story of the demented patients is taken into consideration. The physical care environment will be meaningful to the patient through the feeling of familiarity. The meaning of nature is an important element in creating occupational environment to the demented patient. The clear, orientative and safe physical care environment supports the functional ability and independent initiative of the demented person. Occupational of communal areas make the daily life and activities possible improving the quality of the life of people with dementia.

Results of this study can be used in developing nursing of the demented person in special care units, in basic and further education of nursing staff and further more in planning and renovation of special care units. It is important for the nursing staff to understand that the physical care environment is an essential part of the good care of the demented patient. In the future it is important to research patients opinion of his own physical care environment. The subject of further study rises changes caused by technology and possibilities in developing the physical care environment of the demented patient. Above all the ethical issues connected with use of technology in nursing of demented patients should be sorted out. Research information is also needed concerning
the use of nature in nursing and improving the lifestyle of patients being in institutional care.
Decision making in nursing, ambulance service, accident and emergency nursing

The purpose of the study was to describe and explain approaches of decision making of ambulance service personnel in the area of the North Carelian Central Hospital.

The data were collected from North Carelian ambulance service personnel (n=81) in February 2000. The instrument of decision making used in this study was developed earlier by professor Sirkka Lauri at the University of Turku. The instrument of decision making was based in theory of information processing and contents systematic and hermeneutic approaches of decision making. (Lauri & Salanterä 1994, 18-19). The response rate was 55%. In the data analysis were used percentage distribution, means, standard deviations, factor analysis and tests of significance. It was made new variables of variables describing decision making of ambulance service personnel. Association with decision making of background variables, age, working experience, professional education, working place, knowledge structure and the time since professional graduating, was analysed by Kruskall-Wallis’s one way variance analysis and Mann-Whitney’s U-test.

The result of this study were six factors describing decision making of ambulance service personnel. The factors were autonomous and intuitive decision making, decision making based on extensive theoretical knowledge, systematic decision making, checking decision making, patient oriented decision making and decision making targeting continuance of nursing.

Theoretical background of all six factors is the theory of immediate and goal-directed decision making. Factors have features of theories of rational decision making, information processing and intuitive decision making.

Professional education was the main background variable, which showed association with decision making of ambulance service personnel. Decision making was more extensive and more advanced and had more arguments among them who had higher professional education than among them who had lower professional education.
Clinical physiology, laboratory work, patient investigation, medical laboratory, technologist, nurse

The purpose of this study was to describe, what kind of knowledge and skills the medical laboratory technologists and nurses need in their clinical physiological laboratory work, how the necessary information has been acquired, as well as whether they felt need for more information regarding their work. Additional purpose was to observe the sort of knowledge they find important when guiding patients and determining the accuracy of examination results.

The data are based on a half-structured questionnaire drawn for this research. The total number of respondents was 65 (74 %). From these 53 were included in the research, i.e. 24 biomedical laboratory technologists and 29 nurses working in Central University Hospital or Central Hospital clinical physiological laboratories, which adds up to 60 % of the original sample. The results were analysed using SPSS for Windows program and are presented as frequencies, percentage distributions and cross tabulation. Content analysis was used for the open questions deductively.

Both biomedical laboratory technologists and nurses needed extremely wide knowledge of respiratory and blood circulation functions, of research equipment, methods and their principles as well as of calibration and servicing the equipment. All nurses estimated their own knowledge of clinical physiological laboratory work to be either good or fairly good.

The majority had gained their information on clinical physiological investigations in their practical work. More than half of the biomedical laboratory technologists had acquired very much information during their basic training and nearly everyone by reading professional literature. The majority of nurses had gained very much or fairly much information during seminars and by reading professional literature. Laboratory technologists in University Central Hospitals had gained more information by reading professional literature than those working in Central Hospitals. All nurses needed more knowledge of clinical physiological examinations.

Patient guidance can, according to respondents, be given by anyone, but the guidance must always be in accordance with that obtained from a clinical physiological laboratory. Earlier graduated laboratory technologists and nurses emphasized the importance
of informing patients of the purpose of the research in order to minimise their fears and thus faults in results.

When evaluating the reliability of the examinations the laboratory technologists more often than nurses found it important to check preanalytical factors and calibrations before the research. The nurses emphasized the importance of patients following exactly given guidance. Nearly all nurses considered the co-operation between a nurse and a patient very important for the reliability of the investigation.
The aim of this study was to form on the basis of early research in nursing science the criteria of primary nurse’s work and to evaluate the importance, clarity and concrecticy of the criteria to describe primary nurse’s work. The goal was to make the criteria of primary nurse’s work, which can help us to evaluate nursing practise.

First, we formulated on the basis of early primary nursing studies the criteria, which describe primary nurse’s work. The important themes were: the function of nursing, responsibility, autonomy, authority and the ability to work as a primary nurse. We made the measuring instrument for the validity of the contents of criteria and the importance, the concrecticy and clarity.

First five experts of primary nursing evaluated the validity of the contents of criteria. Then we reformed these criteria. After that, 56 nurses from Tampere University Hospital’s Internal Medical Clinic evaluated, if the criteria were important and covering to describe primary nurse’s work and if they were clear and concrete. They evaluated the criteria by using a four-part scale. The covering of the four part of the criteria they evaluated by using a five-part scale. In addition, in one of the open questions primary nurses described their opinions of the self-evaluation of their own work.

We have investigated the research material by using SPSS-program. The importance, concrecticy and clarity of every criterion was described by frequencies, percentages, averages and standard deviation. To the agreement on evaluations we used Imle’s and Atwood's agreement scale. The covering of the four parts of the criterion scale was described by percentages. The question including self-evaluation was analyses by using qualitative content analysis method.

The nurses evaluated that the criteria of all parts were important. The most important, clear and concrete criterion was a criterion, which included functional skills in the part of the ability. The nurses considered the criterion which handled the responsibility of patients care during 24-hours the least important, concrete and clear. When the nurses evaluated the covering of the criteria, they were waiting for more family centred care. The experts of nursing and the nurses described, that self-evaluation was the base of all professional action and the base of development in the profession. The criteria we can use to evaluate primary nurses’ work and to develop the primary nursing.
The purpose of the study was to describe university-level nursing students orientations to studying in learning situations and the relationship between orientations and student’s background and studying environment. The aim of the study was to give information for the development of the nursing science education.

The research sample (n=141) was formed of nursing science students studying in universities of Kuopio and Oulu during term 1999-2000 (N=456). Research data was collected using structured questionnaire developed by Raija Yrjönsuuri (1995). The questionnaire was modified suitable for the research group. Four questions regarding students experiences about their self-directiveness in studying were added. The data were analysed using statistical analyse methods like factor analysis, independent samples t-test, one-way analysis of variance and cross tabulations.

Students background was described by age, sex, earlier studies, working experience and family situation. The study environment was described by studying university, training programme, phase of the studies, full time – part time nature of the studying and by student’s experiences about self-directiveness in the education.

University-level nursing science were mainly meaning orientated in their studying. Factor analysis revealed two meaning orientations: orientation to learning assignments and orientation to study environment. The characteristics of the meaning orientated students were self confidence in studies and in resolving problems and dependence in other students. Factor analysis revealed also three non-meaning oriented approaches: use of old study strategies, overcoming the degree and giving up in study situations. The characteristics of non-meaning orientated students were avoiding difficult matters, lack of independence, following directives, concentration difficulties and rapid forgetting of the acquired.

A relationship was found between nursing science students earlier work experience and meaning orientation. Students having work experience outside nursing were more meaning orientated than others. Non-meaning orientations were in relationship with students age and family situation. Young, under 30 years old students orientated more than others to overcoming the degree. Students living alone orientated more than others to giving up in study situations. Students experiences of their self-directiveness in studying were also in relationship with both the background and study environment.
The results of the study are trend-setting because of the small sample size and convenience sample. The results of the study can be used in development of teaching methods that support students meaning orientation in their studies.
The objective of the study was to describe the experiences of female health care lecturers concerning co-operation in a multidisciplinary polytechnic environment. The study included a group interview with lecturers from polytechnics. All lecturers were women and had experience of co-operation within a multidisciplinary polytechnic. The research topics included co-operation within a polytechnic environment, female lecturers’ co-operation skills, and their experiences of the skills required in co-operation situations. The interview samples were collected during March – April 2001. The samples were analysed using a qualitative content analysis method inductively.

The experiences of co-operation were limited to certain areas as the lecturers did not cooperate with every field of study within a polytechnic. The most significant co-operation partners were lecturers in other fields of study. It was shown in this study that the present co-operation situations were experienced positively but the lecturers were not satisfied their own action in these situations. They felt that they did not have enough courage to bring forward their own skills and strengths in co-operation situations. They also considered that the skills required of them concerned strength of character, assertiveness, persistence, and courage to present opinions and suggestions regarding their own profession and professional competence. As regards the required working skills, they mentioned, among other things, skills relating to project work, planning, and economy and finance. The new requirements arising in a multidisciplinary polytechnic environment were mainly experienced as factors that consume resources and create contradiction in the teacher’s profession.

The creation of the polytechnic system was the most notable educational reform in the 1990s and, at the same time, it offered the most significant channel of developing diversified learning and teaching. The results from this study can be utilized in nurse teacher training in universities, in health care unit at polytechnics and various co-operation situations in multidisciplinary polytechnics. The most important topics for further researches include the over all developments of polytechnics, because the new educational institution is still establishing its operation and practices. In addition health care as a field of where the majority of professionals are women, needs research focusing with women.
The purpose of this study is to describe spousal caregivers experiences' changes in marital relationships in dementia and describe how the roles of spouses change during the progress of dementia. Eleven spousal caregivers who took care of their demented spouses at home participated in this study. The data was collected by theme interviews and analyzed inductive by qualitative content analysis.

Marital relationships prior dementia had been similar to a traditional Finnish marriage where wife and husband have their own roles and duties. Illnesses leading to dementia changed marital relationships notably. Relationship changed to a monologue and the typical elements of a relationship existed no more since the relationship wasn't equal. Some of the spousal caregivers felt the marital relationship as a duty and a job she/he is responsible of. Personality changes in the spouse who had taken ill was so dramatic that she/he could no longer be recognized by the spouse as the same person she/he was prior dementia. Still the relationship is more that just taking care of the ill spouse because of the emotions and affection involved. Female caregivers often felt the roles and duties inherited from their demented husbands hard and stressful. Male caregivers on the contrary sometimes even enjoyed the new responsibilities. Even though caring for spouse is usually hard work the marital relationship is very happy.

The status of marital caregivers should be made easier by arranging sufficient services at home. Vacations are important in order to assure marital caregiver's well being. This means that a nurse must be provided for the time of vacation. Taking care of the ill spouse at home demands support and active development of services from the society. Good communication between spouses gives the caregiver strength. The subject of the next study could be to do research work on spousal interaction during dementia and the importance of the interaction between spouses in the quality of marital relationship and the well being of caregivers.
The aim of this study was to examine how parents support the health learning of their children in age range of 13-16 years. This study is part of the European Network of Health Promoting Schools (ENHPS) programme in Finland, which aims at achieving healthy lifestyles for the total school population by developing supportive environments conductive to the promotion of health.

The research data was collected using a questionnaire approach addressed to parents of pupils in two secondary schools both participating on ENHPS programme. The response rate was 63% (298 parents out of 472 families). The questionnaire included 165 structured, 21 half-structured and 5 open-ended questions. The collected data were analysed mainly by statistical methods using SPSS/Windows –program. Answers for the open-ended questions were analysed using contents analysis method. The data and the results are presented in study report in straight text and in tables with percents and means.

The results of this study indicates, that the parents have clear upbringing values and they know quite a much about adolescents’ health and development matters. The parents’ knowledge about symptoms of depression and use of drugs as well as changes in adolescent’s feelings and thinking was modest. Parents evaluated themselves as good models in health behaviour for their adolescent. Parents reported to have discussed quite much about adolescent’s health and development with them. However, only few health topics were very well covered in those discussions. Communication was focused mostly on the social development of adolescent whereas sexuality was the least covered subject. Only a little treated health subjects in parent-adolescent communication were also snuffing and sniffing, physical changes during the puberty and deepening of self-knowledge.

Atmosphere between parents and adolescent was quite democratic and open and the parents showed relatively well their positive feelings towards adolescent. Most parents (76%) were very interested in health and development matters of their adolescent. In spite of that they weren’t very alert in taking health matters up with adolescent and they didn’t guide her/him very much to promote his/her health. Only one out of ten parents did vigorously set limits for adolescent’s health behaviours and only 6% of them had made agreements for health behaviours with their adolescent. Parents with high school as the basic level education were more alert in taking health matters up with adolescent than parents with lower basic education. The parents discussed more with boys than
girls about maintaining their health and they also guided clearly more boys than girls in health promotion. The objective of this study was to produce information about adolescents’ health learning, which would be helpful in developing nursing to provide guidance to parents while supporting their children’s health learning. Based on the results of this study parents need support to develop their skills to communicate with adolescents and to guide and to set limits for adolescent’s life. It is necessary to develop nursing more family-centred and to make parent supporting as basic nursing intervention. Also it is important in nurse-education to underline the parent supporting as well as the development of parenting skills as lifelong learning process. Further research has the challenge to clarify how the parents’ upbringing values, level of health knowledge and knowledge in generic adolescent’s development influence the way parents are supporting the health learning of their adolescent in daily life. In addition, profoundness and continuity in parent-adolescent communication needs further clarification. Finally, it would be of great interest for further research activities to expand the study to clarify the role of communication between siblings for the health learning process of the adolescents.
UNIVERSITY OF KUOPIO, Department of Nursing Science

KANALA ANNE & LEINONEN PÄIVI: Challenging behaviour of demented patients and nurse’s mode of action related to it in private and local-authority institutions.

Master’s thesis, 75 pages, 24 appendices

Advisors: Professor Arja Isola and PhD Paula Naumanen-Tuomela

August 2001

Demented patient, challenging behaviour, nurse's mode of action

The purpose of this study was to describe incidence and severity of challenging behaviour of demented patients and nurse's mode of action related to it, in private and local-authority institutions assessed by nursing staff.

The data for the study were collected between November 2000 and January 2001 by structured questionnaire from the staff taking care of demented patients in 15 private special care units, one local-authority nursing home and two health centres (N=332). 217 (65%) nurses returned the questionnaire. 97 nurses were from private and 120 from local-authority institutions. The data were analysed by statistical methods using SPSS for Windows 10.0 -programme. Statistical analyses were performed using frequencies, percents, cross tabulations, the Mann-Whitney U -test, the Kruskall-Wallis test and factor analysis. The reliability of the questionnaire was investigated by Cronbach's alpha(0.65-0.92).

The incidence of challenging behaviour was divided into seven and its severity into eight factors by factor analyses. The factors describing the incidence of challenging behaviour were movement, speech pattern, self-injurious behaviour, search of attention, behaviour related to functional incompetence, aggressive behaviour and sleeping disorders. The severity of challenging behaviour was also described by these same seven factors and by destructive or withdrawn behaviour. Nurse's mode of action related to challenging behaviour of demented patients was divided into six factors of professional action and two factors of unprofessional action. The factors of professional action were flexible and therapeutic action, acting according to plan and the circumstances, verbal interaction, warm, empathetic and individualistic action, calm and encouraging action and preventive action. Correspondingly the factors of unprofessional action were restrictive and routine like action and indifferent and evading action. Challenging behaviour of demented patients was quite common in both sectors. The most common form of challenging behaviour was behaviour related to functional incompetence e.g. restlessness, incontinence and communication problems. Although challenging behaviour was slightly more common in the private institutions, it was assessed somewhat more severe in the local-authority institutions.

Nurses were mostly acting in appropriate and professional ways. Nevertheless a little more flexible and therapeutic modes of action were used in the private institutions and somewhat more often restrictive and routine like action was taken place in the local-
authority institutions. There were some connections between variables concerning nurses' background and their modes of action related to challenging behaviour of demented patients. Nurses who had taken care of demented patients less than 10 years used more flexible and therapeutic modes of action than nurses with longer expertise in dementia care. On the other hand, unlike some results of former studies also over 40 years old nurses were acting more professionally than their younger colleagues.

The results of this study can be used as tools of reflection and assessment as well as basis of developmental projects in nursing education, practise, administration and research. Further research about the phenomenon of challenging behaviour of demented patients is needed from the point of view of patients suffering from dementia and their relatives. More information about the contents and effectiveness of nursing education as well as the effectiveness of nursing interventions is also needed to decrease incidence of challenging behaviour.
The purpose of the study was to describe the work assignments and health education tasks included in dental hygienist’s professional image and how they are emphasized in nursing practice and what kind of nursing helping methods does the dental hygienist use in practice.

Data were collected to describe the professional image using structured questionnaires which were posted to all of the dental hygienists of the sample (n=85). In purpose to clarify the helping methods data were collected using two open questions, which were presented in addition to structured questions to a part of the sample (n=30). The response rate of the study was 77. The quantitative data were analysed using SPSS for Windows 10.0 computer statistical program and the results were presented using percent and frequency tables. The qualitative data were analysed by inductive content analysis.

The results showed that the dental hygienist’s professional image emphasized the health education tasks, dental examinations, parodental care and prevention of dental diseases. The main categories of the helping methods were the observation of the body and it’s function, the principles of nursing care and the helping methods related to the improvement of the quality of life.

The knowledge produced by this research can be utilized in developing helping methods and collaboration in education and nursing practice and in developing the work delegation between dentists and dental hygienists.

Suggestions for further research are to study the work delegation in dental care and the helping methods among different patients.
Ageing, need of help, use of social- and health services, expectations

The purpose of this study was to illustrate experience of 65-year-old people about health and functional activity today, measures of support needed in every-day-life and knowledge of social- and health services. Furthermore, the study examined expectations of ageing people about their health, functional activity and living after ten years. Expectations about social- and health services and preventive- and rehabilitative services in the future were also examined. Health, functional activity and expectations were compared with sex, housemate (living alone or with someone), education and financial situation.

The research was carried out by randomised sample among people who were living at home and were born in 1935. Response rate of 300 questionnaire was 66 %. Data was assembled with structural questionnaire form and analysed with statistics method. Some open questions were used too. The results were presented as frequencies, percentages and cross tabulations.

According to the results the majority of the 65-year-old people felt that their health and functional activity were at least on the moderate level despite 71% of them had some chronic disease or disability. They managed to live independently with their common daily activities. Medical services were mostly used within health services. On the other hand, domestic help were mostly used within social services. The majority of respondents had weak knowledge of social- and health services; medical care, meal on the wheel- and domestic services were best known services.

The majority of respondents wanted to live at the home of their own as long as possible. Close to half of people did not believe that their health would be good any more after ten years. In spite of that one third of respondents believed that they could cope with their daily activities independently. The importance of non-institutional social- and health care, independence and continuity of care were underlined by the expectations of social- and health services. Significant statistics result was men's pessimistic expectation about their health in the future. Another significant result was positive influence of education to expectations of respondents about their health and management in their common daily activities.

In further studies it is important to research and develop co-operation between public and private social- and health services. Further examination should be done in order to
develop home care, continuity of care and information. With futurology it is possible to research expectations of clients and develop client-oriented social- and health services.
Feelings: learning to nurse, critical incidents technique, content analysis

This study is part of an international research project, “The Development of the Content and Methods and Evaluation of Health Care Education” of the department of Nursing Science at the University of Kuopio. The aim of this study was to describe nursing student experiences of the importance of feelings for interaction between nursing student and nursing teacher.

Twenty nursing students at the final stage in their studies participated in the study. The study data consisted of nursing students descriptions of the negative and positive feelings occurred in their experiences of interaction with nursing teacher. The student also described why these incidents had been important for their learning. The data was gathered through the critical incidents technique and processed with qualitative content analysis.

According to the study constructive interactionship between nursing student and nursing teacher include nursing student experiences of joy to learn nursing, nursing teachers and care and trust of interactionship. Constructive interactionship supports nursing student ability to learn nursing and trust in her professional competence. According to the study breaking interactionship between nursing student and nursing teacher include nursing student experiences of loneliness, control of nursing teacher and nursing student’s insecurity of her professional competence. Breaking interactionship debilitates interaction between nursing student and nursing teacher and nursing student’s professional growth. However, reflection of negative feelings confirms nursing student’s ability to learn nursing.

The feelings, as seen by the nursing student are important in interactionship between nursing student and nursing teacher. The student’s caring interaction and self- awareness will be advanced by recording the importance on feelings for interactionship between nursing student and nursing teacher. The study may be used in the education of nursing teachers and developing tutoring in nursing education.
The purpose of this study is to describe the role of personal development in the curricula of health care education units. It also aims at describing the nurse educator as a supporter of the student’s personal development and the students’ experiences of the support they have received from their teachers. The aim of this thesis is to understand better the personal development of a student when studying health care and to produce information to help develop the nurse educators’ work.

The research material consisted of the curricula for the 1999-2000 term of health care education units of polytechnics (n=5), of essays written by nursing educators (n=11) and essays written by student nurses (n=9). The research material was analysed using a qualitative content analysis.

In the curricula personal development was described as the aim, content and object of evaluation of learning. It is the view of both nursing educators and student nurses that a student’s personal development means professional and personal development to become a health care professional. The most important feature in personal development is the student’s self-image, which develops as a result of personal development. The realistic self-image of the educator and the student is also a prerequisite for being able to support the student’s personal development. Educators support the student’s personal development by directing their learning, supporting reflection and learning through feedback, by using teaching methods that help the student ponder on personal development, by developing in their own work, by having interaction with the student, by treating the student respectfully and, with their own personality. What is important in supporting personal development was the student’s will to develop and the educator’s will act as a supporter of personal development. A part of the students did not recognize the support they received or felt that they were left without it. Personal development is significant when learning nursing and in nursing itself. It is the basis for professional development, a prerequisite for the development of professional skill, work and work community, coping at work and constant learning and the aim of the education and a tool for the nurse.

From the results of this study it can be suggested that personal development, its aims and support should be more clearly defined in the curricula. Personal development should also be studied from the viewpoint of social development, and the possibilities of
educators to take part in the practical training should be increased. Supporting personal development requires a long educational relationship, so it is recommendable that the same educator acts as the group leader as long as possible. Educators need to use more student-oriented teaching methods and different types of students motivated and committed by studying and self-development need to be selected to health care education.
Family, caregiver, demented, quality of life.

The purpose of the study was to describe the quality of life, and the factors connected with it, of family caregivers, who were caring for demented persons at home. The data were gathered from nine (N=9) family caregivers of demented persons, who were attending a rehabilitation and adaptation course. Informants were interviewed during the course. The information was analysed by content analysis.

According to the caregivers, the quality of life involves close relatives and friends, health, hobbies, and free time. The family caregivers estimated themselves their own quality of life individualistically; it was good, satisfactory or poor. Their quality of life was lowest in the areas of health, hobbies, and free time. The most important factors connected with quality of life were gathered into five categories: functional ability of the demented person, bound to caring, adaptation to situation, giving up the past, and social support. According to the results of this study, the family caregivers were quite satisfied or satisfied with their lives. The most unsatisfaction were caused by dementia of relative and the strain of caring.

The family caregivers regarded different things as hard, and the extent of the strain they experienced depended on the symptoms and characteristics of the demented person. The quality of life of the caregivers changed over time. Three turning points in caregivers’ lives affected their quality of life: getting ill, sharing the caring, and death of the demented person. According to the results, the quality of life of caregivers who cared for demented persons at home could improve. The most important thing is to give them opportunity for respite regular.
The purpose of this study was to describe the practical nurse student's practical training in care and caring from the point of view of the preceptor, the nurse responsible for the on-the-job portion of the training. This research also attempted to define the role of the preceptor during the orientation phase of the vocational nursing student's training, determine what kind of guidance was needed during the practical training, and clarify the preceptor’s role in the evaluation phase of the experience.

The study groups consisted of 16 preceptors from wards in the Health Centre of Lappeenranta. The focus group method was used and the data were collected by 3 group interviews which were tape recorded. The interviews progressed in three theme areas which formed the basis for the research which was analysed through inductive content analysis. Sentences were used as the unit of analysis and were arranged according to content. Subgroups were revealed: criteria for a positive beginning of the practical training for vocational nursing students; guidance of vocational nursing students during their practical training; evaluation of the practical training of vocational nursing students. The results were presented in categories and illustrated utilizing statements made by the subjects.

The preceptors found giving guidance and training to the vocational nursing students during their practical training to be a positive and challenging experience. They related that the students were fearful and nervous about care and caring when they came to the wards, but that the orientation visit removed those feelings. The success of the practical training was promoted by the positive atmosphere on the wards as exhibited by the time and commitment given to guidance. The voluntary nature of the preceptor-student relationship affected the quality from the beginning of the experience. Preceptors found that evaluation was demanding, and that in this area they would like more training.

Further areas for study revealed by this research would be the influence of the educational training of the preceptor on the quality of the student guidance, and an investigation into the co-operative relationship between the preceptor and the nursing teacher assigned to the students in practical training. A challenging area for development would be the co-operation between the vocational school and the preceptors during the planning stages of vocational nursing curriculum.
The principles of the mental health work are to help clients cope as independently as possible and live in outpatient care. The enhancement of self-esteem is a resource-orientated nursing intervention. High self-esteem promotes health and is a sign that a mental health rehabilitee is able to cope independently. The purpose of this research was to describe the enhancement of the mental health rehabilitee’s self-esteem and the demands it sets in nursing and the consequences of strengthened self-esteem. This research is a part of the project called “Resource-orientated nursing actions for health promotion of adolescents and adults”.

The data was collected by interviewing nine mental health rehabilitees in the rehabilitation unit of Moisio hospital in Mikkeli. Three of the rehabilitees were interviewed twice and the rest of them once. The data was analysed by the inductive qualitative content analysis. According to the results, it was possible to enhance the self-esteem of the rehabilitee, but it sets demands to the nurse as well as to the nurse-rehabilitee relationship. In this study, many nursing strategies to enhance the self-esteem of the mental health rehabilitee were identified. The most important strategies covered the acceptance of the rehabilitee, working for his/her personal goals, going for different actions with him/her, encouragement, supporting his/her strengths, supporting him/her to manage with his/her illness and cope with everyday life at home and supporting his/her existing human relationships. The findings indicated that consequences of increased self-esteem included increased responsibility, feeling of success and activity in human relationships.

The results of this study could be used in nurse-rehabilitee relationship as well as in the planning of mental health rehabilitation in various organizations. In addition, recommendations for further nursing research were presented.
Professional nursing, co-operation, collaborative working methods, learning organisation

The purpose of the present study was to describe the forms of the professional co-operation of the nurses working in a central hospital, nurses' opinions of their own co-operative facilities and the meaning of co-operation, also the managerial support for developing the professional co-operation.

The data was gathered in August, September and October 2000 from nurses (N=300) of four different nursing sectors in the hospital by using structured questionnaire, divided sampling and relative quotas. The response rate was 58. The quantitative material was analyzed with the SPSS statistics software. Statistical tests which were used are tests of Khii, Kruskall-Wallis and Mann-Whitney. The results are described as distributions, percentages, tables and figures. The part of answers in the open-ended questions were analysed with the method of content analysis.

According to the study the nurses estimate that their own facilities for co-operation are mostly good. The most important partners in co-operation were the other nurses in their own units. Nurses took very well part in the activities of different voluntary, nursing and patient organisations, instead of local politics and working abroad, which hadn't been common.

Nurses criticized the style of leadership and management in their units and in the organization. The ways of co-operative evaluating professional activities were not in general use in the researched organization. Self-assessment was mostly used, but peer review and evaluations in groups and teams were more uncommon. Nurses were satisfied with the sufficiency of their own profession meetings in general, whereas the meetings with physicians and with the whole personnel were considered insufficient. In different units the common meetings and the improving functions as well as the use of ways of feedback and assessment were carried out in very different ways.

Nurses quite agreed on the meaning of co-operation to their own learning and also to the development of the ward and the nurse profession. Improving the professional co-operation could according to the study have most effect on increasing knowledge, art of interaction and confidence, on extending one's total conception learning new habits of working from the others and also making the social state of nursing stronger. Multidisciplinary co-operation in different forms was mostly mentioned in the descriptions of
the nurse's own learning situations. In the second place was learning from consulting the nurse expert and from another nurse's better way to work.

According to the study there was a need to improve both the multidisciplinary co-operation and the co-operation between the different areas of nursing in the researched organization. In future one way to integrate the managerial habits and to develop the activities in different wards in the hospital would be to carry out successfully the common strategy of the organization. Nurses also had very many proposals for developing the co-operation in the researched organization.
Breastfeeding, emotional support, health care provider

The purpose of this study was to describe and explain the breastfeeding mothers’ experiences and expectations of the emotional support given by health care providers in the hospital and the community. Structured questionnaires, with some open questions, were used to collect the data. The respondents were 72 mothers approx. Two months after delivery. The survey took place June 1998. Methods of statistical description included frequencies, percentage distributions, cross-tabulation and factor-analysis. The open questions were analysed by content analysis.

Mothers found that the emotional support given by health care providers was satisfactory: the realization of equality, kindness and supporting mothers’ self-confidence, safety, and trust. It also gave hope for mothers in satisfying baby’s needs. Mothers felt that emotional support given by health workers was lacking effective communication, active instructions and support of the mother to commit in the care of her baby.

The expectations of the mothers for the emotional support given by health care providers were mainly focused on the presence of the health care provider when giving instructions to the breastfeeding mother. According to mothers, the positive attitude of the mother and health care provider towards breastfeeding, the health care provider’s presence at the time of breastfeeding and the support of mother’s self-confidence has proved in effectiveness in breastfeeding success.

The research results indicate the essentiality to provide support and instructions also for multiparous breastfeeding mothers in the community, childbirth education classes and hospitals. Also whole community needs alter their attitudes towards breastfeeding on the whole, so that mothers could feed their babies when and where ever need occurs.

Further studies might focus on finding out what kind of support significant others as spouses and other family members need to be able to take part as supporters of the mothers’ breastfeeding. Also, it would be good to look into what kind of breastfeeding experience mother’s mother has had and what kind of influence it has had on supporting her daughter’s breastfeeding. The qualitative study would clarify the concepts of the emotional support.
The purpose of this study was to describe, from the viewpoints of nursing personnel and care assistants, the nature and frequency of incidences of challenging behaviour in demented elderly patients from the geriatric units which were the object of this study, and also the use of nursing methods to deal with this challenging behaviour.

The study involved the collection of data, using a structured questionnaire, from 97 nursing personnel and care assistants working in six long-term care units and one dementia unit of a local hospital and one dementia unit of a health care facility. The quantitative data were analysed using the SPSS 9.0 statistical program and the qualitative data by content analysis. Frequencies and percentages were used in the analysis. The Mann-Whitney U test and the Kruskall-Wallis test were used as statistical tests.

The results show that challenging behaviour occurred daily in ward units. The commonest forms of challenging behaviour found were restlessness, repetitive questioning and screaming. Many modes of challenging behaviour were commoner in the dementia units than in the long-term care units. For the purposes of the study nursing methods were classified as preventive, calming and protective nursing methods. The commonest forms of preventive nursing method employed were ensuring the physical welfare of the demented patient and the use of methods based on co-operation with other personnel who participated in the care of the patients. Various kinds of intervention methods were also often used. The commonest form of calming methods was to touch the patient. Protective nursing methods were employed less often than preventive or calming methods. Ignoring the challenging behaviour occurred from time to time.

The results of this study can be utilised in developing the nursing of demented patients; in addition, they present a challenge to nursing education and management. Further studies will be needed in order to examine the nursing methods to deal with challenging behaviour using qualitative research methods and to evaluate the effectiveness of the nursing methods used for different types of challenging behaviour with the aim of reducing the incidence of such behaviour.
Qualification, emergency medical services, emotional awareness, emotional know-how, emotional responsibility, ethical know-how

The purpose of this study was to describe the human qualifications of professional skills under control with emergency medical technician’s (EMT) and paramedics and to increase the awareness of the human qualifications in emergency medical services.

The data were collected from the personnel (N=261) working at five fire department in different parts of Finland in February 2001 by using semi-structured questionnaire. The questionnaire consisted of Likert-type items. The response rate was 49 (n=127). The data were analysed using SPSS 10 statistical analysis programme, using frequencies, percentages and cross-tabulations as aid. The tests used in this study were Kruskall-Wallis and Mann-Whitney U in order to analyse whether background variables are related with the human qualifications. The results are described in tables and figures.

According to this study the human qualifications of professional skills are pretty well under control with EMT’s and paramedics. The best area was ethical know-how and the weakest was emotional responsibility. Education affected to emotional awareness, age to both emotional awareness and emotional responsibility, working mainly in emergency medical services affected to both emotional awareness and emotional know-how. Being a paramedic affected to emotional awareness and emotional responsibility.

The results of this study can be utilised in planning the education of paramedics and in thinking the ways to help EMT’s and paramedics to develop and avoid burn out in their work. Further research is needed to study how the human qualifications of professional skills are taught and evaluated, are these skills in curriculum and is the teaching common with all nursing areas. The patient’s point of view would bring valuable information.
NYMAN LEENA: Girls’ weekend leisure time and non-intoxication – narratives in the diaries of girls at the eight grade.

Master’s thesis, 94 pages, 1 appendix (2 pages)

Advisors: Professor Kerttu Tossavainen and Senior Lecturer Hannele Turunen

May 2001

The aim of the study was to describe, how the girls at the eighth grade in the primary school spend their weekend and their non-intoxication. The task of the study was to find the factors, which support their non-intoxication or the factors, which are associated with their substance abuse.

The research data was gathered with diaries: 14-15 years old girls kept diaries about events during six weekends in the spring 2000. The data was analysed by using qualitative content analysis.

The results indicate, that specially important for the girls was their relation with their mothers. The attitude towards the non-intoxication of their daughters or substance abuse appeared to be of three kinds: 1) the strong, controlling and responsible attitude, 2) the permissive or even indifferent attitude and 3) the hesitant attitude. The mothers' strong and responsible attitude became apparent in caring and minding and in up-bringing with conversations. The permissiveness and indifferency was evident, since the mothers did not pay attention to the evening gatherings of their daughters and they offered alcohol to the daughters. The hesitant attitude was shown, when the mothers were not able to interfere in the substance abuse of their daughters. If the family attitude was clearly negative towards intoxication, and the atmosphere of the up-bringing was positive, it contributed with the non-intoxication of the girls. Reaching an agreement about the time when to arrive home and staying awake when the girls arrived home were the simplest and most effective ways of controlling the daughters' evening gatherings.

Non-intoxication in the peer groups was also a contributive factor with non-intoxication of the girls. The girls sought company of peers with values like their own. The girls' own good self-esteem encouraged them to stand the social pressure in the peer groups. In situations, when somebody offered intoxicants to them, their own decision about non-intoxication, was most effective. The pressure to get intoxicated during weekends was increased by the planning of partying that happened at the schools and the exaggeration about getting intoxicated.

The girls' active leisure time, their ability to enjoy the school and the alcohol-free disco parties that were controlled by adults contributed the non-intoxication of the girls. It was allowed for the under aged girls to use alcohol or to smoke in public places. Alco-
hol was used especially in disco parties in Friday nights, where it was not restricted. The girls got the intoxicants from their friends, siblings and parents.

The girls in the age of this focus group express often, how they want to be independent and self-sufficient. According to the results of this study, the girls appreciated their parents' interest in their leisure time in weekends and their caring about them. A close relationship with the parents is connected with non-intoxication. In further research it is important to find out, how non-intoxication and also substance abuse will affect on the course of their lives, and also what are the problems, that the girls are trying to solve by intoxication so early.
This study is a part of the project "Structural and methodological development and evaluation of healthcare education" lead by Professor Kerttu Tossavainen at the Department of Nursing Science in the University of Kuopio. The aim of this study was to evaluate whether e-learning based on information technology is an effective training method for professional development and the compilation of the portfolio among nurses. The portfolio training aimed to the operative nurses took place between October 2000 and January 2001. The portfolio training consisted of five tutoring sessions, co-operative / interactive e-learning sessions and independent portfolio development.

The data consisted of three different parts. Before the portfolio training the participating nurses (N=31) filled in a questionnaire which evaluated their e-learning skills and their attitudes to professional portfolios. They were asked to fill in the same questionnaire after the training. The questionnaire data was analysed by content analysis and the variables were expressed by per cents and frequencies. The third part of the data comprised the portfolios that the nurses had compiled. Portfolio content analysis evaluated action plan, professional strengths, areas for further professional development and future career plans.

The results show that co-operative teamwork, tutoring sessions and e-learning practices benefited the professional training and development among the participating nurses. The nurses regarded e-learning as a useful method for compiling portfolios and for receiving professional training. Before the training they felt nervous, even fearful, about e-learning and using computers. However, afterwards they reported that e-learning was a beneficial experience and their computing skills improved considerably. They also felt that compiling their portfolio was rewarding and challenging both professionally and personally, but they found the compiling process laborious. In their action plans the values and principles guiding nursing, job responsibilities and team work were considered as the most essential issues. In their self-assessments the nurses reflected on their attitudes to their patients, colleagues and students. Everybody recognised their professional strengths and areas that needed further development. They also realised the essential role of life-long learning on maintaining their professional competence. In their career plans they emphasised the personal and professional development, especially in issues like defining their work responsibilities and work sharing.
We conclude that e-learning based on information technology is an effective method for portfolio training and the professional development. Interactive teamwork and tutoring enhanced the participants' proficiency in e-learning and their computing skills improved considerably during the training. Compiling portfolios is a challenging and professionally rewarding process in which healthcare professionals reflect on their careers and learn to recognise their strengths and further need for professional development.
The purpose of this study was to describe and explore Occupational Therapists career motivation, career stages, Occupational Therapists possibilities to create a desired career and what kind of desires Occupational Therapists have for their careers in the future. The aim of the study was also to investigate the importance of specific individual difference variables in predicting career motivation and career behaviours and how career motivation is related to career stages and Occupational Therapists possibilities to create a desired career. The theoretical background of career motivation is based on London's (1983) theory of career motivation.

The target group of the study consisted of 112 Finnish Occupational Therapists in working life. The data was collected in March and April 2001 by means of a structured questionnaire, which included one open-ended question. The Response rate was 75%. The career motivation measuring part of the questionnaire was based on Professor Ruohotie's measure of career motivation. Professor Ruohotie gave me permission to use this measure in my Master's Thesis 15th of November 2000. The SPSS 10.0 software was used in the statistical analysis of the data. The variables' frequency and percent distributions were used for describing the data. Sum variables of career motivation were developed by a factor analysis and Spearman's correlation coefficient was applied to analyse the correlations between the sum variables. Mann-Whitney and Kruskall-Wallis tests were used to examine the statistical differences in career motivation in those groups that were formed on the basis of the background variables, Occupational Therapists career stages and their possibilities to create a desired career. Cross tabulations were used to find out how specific individual difference variables were related to Occupational Therapists career stages and Occupational Therapists possibilities to create a desired career. The responses to the open-ended question were analysed by means of content analysis.

According to the results of this study Occupational Therapists had high self-confidence, clear professional role, their ability to collaborate with others was high and they were interested in problem solving. Occupational Therapists had a clear career insight. Occupational Therapists did not have a high need for leadership role at work, and neither was recognition much sought after. More than a half were at the exploration or trial stage in their career development. Occupational Therapists found their possibilities to create a desired career low. Desires for their careers in the future were related to hierarchical, expert, horizontal and protean careers. In addition Occupational Therapists' desires for their future career development were associated with situational variables at work, like
the continuity of work and avoiding burn-out. Occupational Therapists were satisfied with their professional choice but found their possibilities to create a desired career low. Especially those working in public services were dissatisfied.

In the future it would be important to study how Occupational Therapists career motivation could be supported and improve their professional development and career success.
UNIVERSITY OF KUOPIO, Department of Nursing Science

PIRRTIMÄKI SÄDE: Life control potential of young women with rheumatism

Master’s thesis, 136 pages, 7 appendices (13 pages)

Advisors: Professor Anna-Maija Pietilä and Senior Assistant Jari Eskola

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Young women, life control, chronic disease

The purpose of this study is to describe how young women (aged 17-33) with rheumatism experience their life control potential. The study is based on Antonovsky's (1987) theory of the sense of coherence. The data were selectively collected with essays written by the subjects, focused interviews, and questionnaires concerning the interview between October 2000 and March 2001. The essays, together with previous knowledge and research, offered a guideline on the focuses of the interview. The results of the study are based on the interviews, and the answers to the questionnaires. A total of 12 young women with rheumatism took part in the interview. The data were analysed with methods of qualitative content analysis.

The subjects were satisfied with their lives. Family, relatives, friends, health, hobbies, studies, and work were important to them. The subjects could express themselves through hobbies and work, although rheumatism, lack of time, rules, and routine work were considered restrictions. Rheumatism changed the subjects' physical, psychological, and social life. Rheumatism brought negative things in their lives, but it also gave possibilities for mental growth. As their resources, the young women named experiences of succeeding, health that was considered good, hobbies, work, their own inner strengths, and social support. Thus, the resources were strained by uncertainty of the future, rheumatism, problems in interpersonal relationships, financial difficulties, setbacks, lack of time, studies, everyday tasks, and caring for other people.

Through personal life control, the subjects could affect their health care, everyday life, hobbies, interpersonal relationships, well-being, and how they experienced their disease. They could not control unexpected things, breaking out of illnesses, some matters of interpersonal relationships, and restrictions on applying for certain jobs and schools. Most of the subjects had found the purpose of their lives, and their most important tasks. They felt they could affect their futures, and they believed they would manage in the future. Their goals were set in studying, educating themselves, well-being, starting a family, and material things. Similarities were found in different aspects of the subjects' life control. Thus, four ways of life control were classified: coping with support, struggling forward waveringly, courageous coping, and considering oneself healthy.

The findings of this study can be used in planning and improving the methods of caring that support and improve the health and life control of young people with chronic disease. In the future, it is important to study the life control potential of young people of different ages, its development, and whether one or more factors especially improve it.
In order to develop individual care, it would be important to learn how people understand life control.
The aim of this study was to describe how student nurses studying at a polytechnic experienced their learning of manual skills in laboratory-work situations. An additional aim was to examine how the physical and social learning environment supported the learning of manual skills. This topic was seen as an important object of study because representatives of the work community have voiced criticism over the rather poorly developed manual skills of nurses who have graduated from polytechnics.

The research data were gathered by means of a questionnaire, devised specifically for this study, in which the opinions of the respondents were gauged on a Likert scale. The respondents were student nurse (N=150) at two polytechnics in Eastern Finland. They filled the questionnaire during class time, and response rate was 87%. The data were processed statistically by means of the SPSS statistical package. The responses, presented below as frequencies and percentages, were cross-tabulated with the background variables.

The results indicated that in the main, nursing students regarded their social learning environment at the polytechnic as good. In regard to the physical learning environment, however, it turned out that there is no time to practise the manual skills. The atmosphere made the respondents feel secure, and they had been encouraged to adopt a critical view of their own action. The interaction and supervision were felt to be good in the main, and so was teacher-student cooperation. The goals of the curricula were mostly unclear to the respondents, who also reported that inter individual differences in knowledge and skills were not taken into account in the laboratory classes.
Envy, institute of higher education, culture of an organisation, teachers, projective techniques

The aim of this study is to find new information on envy and how it manifests itself in teachers’ work in institutes of higher education, and to describe how envy affects teachers’ interaction in schools and what strategies teachers have to help them to deal with envy.

The data for this study was collected from four institutes of higher education: two institutes of health and security and two polytechnics. Thirty teachers took part in this study. The informants received a so-called framework story on the basis of which they wrote their own story following the given instructions. The acquired data were classified and analysed according to themes.

According to the stories, envy is felt because of self-esteem. Poor self-esteem may manifest itself in several ways; the teachers reported feelings of lack of respect by others, fear of one’s position as member of the work community, and fear of new teaching methods. Poor co-operation and one’s own dissatisfaction influence the manifestation of envy. Lack of communication and dissatisfaction with the leadership weaken co-operation and atmosphere in schools. Alternatively, teachers with high self-esteem and a positive attitude towards their future experienced less feelings of envy in schools. Experiences during childhood, youth and the family’s role were significant for new teachers’ professional growth.

The results of this study can be utilised in institutes of higher education’s working environment and in understanding a school’s working culture. More information is needed on feelings which cause envy in institutes of higher education and more knowledge on how teachers could help to speak openly about their feelings and matters relating to their work and lives. This would enhance the creation of a safer and better work environment.
Quantitative methods have mainly been used in nursing science for investigating depression of ageing people. The aim of this study was to illustrate depression experienced by an ageing lady staying in sheltered accommodation and, furthermore, to describe the meanings she associated to this phenomenon. An effort was to reproduce the lived experience and, accordingly, phenomenological method was chosen for the research method. The final goal of the study was to find out information which could be used for planning and assessing treatment of ageing people's depression.

Six women, 68 -93 years of age, living in sheltered accommodation were interviewed for the study. The interviews were carried out by using the narrative method without any preplanned structure. Ageing women told freely about their experiences of depression. The data were analyzed by using the phenomenological method of analysis by Giorgi.

According to the research results depression of an ageing women consists of four content areas: lived depression of those interviewed, character of depression, form of manifestation of depression and recovery from depression. Depression was seen as a phenomenon of many dimensions, with its effects on all sectors of life. The paradoxical character of depression is described by eleven pairs of polarity: personal experience - experience illustrated through another person, empathic attitude -negative attitude, scenes -reality , no background factors -factors in the background, biological explanation -significance of lived experiences, restricted length -lifelong depression, darkness -light, life -death, aloneness - isolation, hopelessness -hope and getting stuck -getting detached. These polarities illustrate the contradiction of depression in the way that no specific criteria can be defined for depression, it is always a very individual experience for every one.

Research results may not be generalized, but they bring challenges for practical nursing, training and leadership. In practical nursing of old people the nurses have the key position to find out depression of old people. In nurse training patient-centred approach should be increasingly emphasized, similarly, holistic meeting of the person particularly in issues of old people's mental health should be emphasized. One of the challenges in nursing administration is fostering such nursing practices, where the special needs of the elderly are taken into account, particularly when the patient permanently moves from home to sheltered accommodation. In the future, it is necessary to clarify depression lived by an ageing man. In order to make services for older people more effective, com-
parative research between different kinds of sheltered housing has to be conducted. This is necessary in order to find out how moving from home to sheltered accommodation can be facilitated.