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ARAŞTIRMA MAKALESİ / RESEARCH ARTICLE

Nursing Students' Attitudes Toward Person-Centered Perioperative Care and Related Factors

Hemşirelik Öğrencilerinin Birey Merkezli Perioperatif Bakıma Yönelik Tutumları ve Etkileyen Faktörler

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ABSTRACT

Introduction: This study aimed to determine nursing students' attitudes and behaviors toward person-centered perioperative care and to examine whether these attitudes differ across sociodemographic variables.

Material and Methods: This descriptive and cross-sectional study was conducted in 2024 with 303 nursing students enrolled in a faculty of health sciences. Data were collected using the "Person-Centered Perioperative Nursing Scale" and a demographic questionnaire. Independent-samples t-tests and one-way ANOVAs were used for statistical analyses.

Results: The mean age of the participants was 21.20±1.66, and 72.3% were female. The mean total scale score was 86.13±10.42, indicating generally positive attitudes toward person-centered perioperative care. No significant differences were found according to gender, willingness to choose the profession, or having a nurse in the family ($p>0.05$). However, significant differences were observed across class levels in the total, Respect, and expertise subscales ($p<0.05$). The reason for choosing the nursing profession also revealed significant differences in total and all subscale scores ($p<0.001$).

Conclusion: Findings indicate that nursing students have positive attitudes toward person-centered perioperative care, and these attitudes are associated with clinical experience and professional motivation. Based on these findings, it is recommended that the concept of person-centered perioperative care be strengthened in nursing education and that students be supported during clinical practice in terms of patient communication, empathy, Respect, information sharing, and professional care behaviors.

Keywords: Person-centered care, perioperative nursing, nursing students, attitude.

ÖZ

Giriş: Bu araştırma, hemşirelik öğrencilerinin birey merkezli perioperatif bakıma ilişkin tutum ve davranışlarını belirlemek ve bu tutumların bazı sosyodemografik değişkenlere göre farklılık gösterip göstermediğini incelemek amacıyla yapılmıştır.

Materyal ve Metodlar: Tanımlayıcı ve kesitsel nitelikteki araştırmaya 2024 yılında bir sağlık bilimleri fakültesinde öğrenim gören 303 hemşirelik öğrencisi katılmıştır. Veriler, "Birey Merkezli Perioperatif Hemşirelik Ölçeği" ve sosyodemografik özellikleri içeren anket formu ile toplanmıştır. Veriler bağımsız örneklem t-testi ve tek yönlü varyans analizi (ANOVA) ile değerlendirilmiştir.

Bulgular: Öğrencilerin yaş ortalaması 21,20±1,66 olup, %72,3'ü kadındır. Ölçek toplam puanı 86,13±10,42 olarak bulunmuş ve öğrencilerin birey merkezli bakım tutumlarının genel olarak olumlu olduğu belirlenmiştir. Cinsiyet, mesleği isteyerek seçme ve ailede hemşire bulunma durumuna göre anlamlı fark saptanmamıştır ($p>0,05$). Sınıf düzeyine göre toplam, saygı ve uzmanlık alt boyutlarında anlamlı fark bulunmuştur ($p<0,05$). Mesleği seçme nedenine göre ise ölçek toplam puanı ve tüm alt boyutlarda anlamlı farklılık saptanmıştır ($p<0,001$).

Sonuç: Araştırma bulguları, hemşirelik öğrencilerinin birey merkezli perioperatif bakıma yönelik tutumlarının olumlu olduğunu ve bu tutumun klinik deneyim ve meslek seçme motivasyonu ile ilişkili olduğunu göstermektedir. Bu sonuçlar doğrultusunda, hemşirelik eğitiminde birey merkezli perioperatif bakım anlayışının güçlendirilmesi; öğrencilerin klinik uygulama sürecinde hasta ile iletişim, empati, saygı, bilgi paylaşımı ve profesyonel bakım davranışları yönünden desteklenmesi önerilmektedir.

Anahtar Sözcükler: Birey merkezli bakım, perioperatif hemşirelik, hemşirelik öğrencileri, tutum.

Introduction

Perioperative nursing is a specialized field of nursing that encompasses patient-centered care practices before, during, and after surgical interventions, aiming to preserve and enhance the individual's physiological, psychological, and social well-being (1). This process affects not only the success of the surgical treatment but also the patient's overall quality of life. Based on the scope and standards of practice defined by the American

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Nurses Association (ANA), the Association of Perioperative Registered Nurses (AORN) published the Perioperative Nursing Standards in 2015, emphasizing that these standards are binding for all perioperative nurses. These standards focus not only on fulfilling professional roles and responsibilities but also on ensuring safe, effective, and patient-centered care (2).

Patient-centered care is a fundamental component of perioperative nursing practice (3). This approach emphasizes considering individuals' cultural, racial, and ethnic differences in the care process, as well as the holistic assessment of needs across disease prevention, health promotion, treatment, and palliative care (4). Rooted in Florence Nightingale's philosophy of nursing that "focuses on the person rather than the disease," this approach was further strengthened by Hildegard E. Peplau's emphasis on the central importance of the nurse–patient relationship and the individual's autonomy in their own care process (3,4).

In the literature, patient-centered care has been reported to play a significant role in reducing complications and improving patient outcomes in perioperative nursing (5,6). Moreover, the Association of Perioperative Registered Nurses (AORN) emphasizes that, in addition to teamwork, collaboration, evidence-based practice, quality improvement, safety, and informatics, patient-centered care should be considered a fundamental component of nursing education curricula (2).

Recent studies have also highlighted the importance of preparing nursing students for patient-centered perioperative care. Siah et al. reported that virtual-reality simulation in a perioperative setting improved nursing students' efficacy, attitudes, and confidence (7). Similarly, McNamara et al. emphasized that perioperative clinical placements provide nursing students with valuable opportunities to observe preoperative, intraoperative, and postoperative care processes and to develop professional awareness of the perioperative nursing role (8). In addition, Oyediran et al. found that nursing students' perceptions, attitudes, and willingness to specialize in perioperative nursing are closely related (9). These findings suggest that patient-centered perioperative nursing should be supported not only as a clinical care approach but also as an essential component of undergraduate nursing education.

Patient-centered care forms the foundation of patient- and family-centered care models, supporting not only physical health but also psychological well-being. Evidence-based studies have demonstrated that implementing this approach shortens hospital stays, reduces infection rates, and strengthens nurse–patient interactions (10-11). In addition, patient-centered care has been reported to facilitate adaptation to the surgical process, reduce anxiety, and improve overall care outcomes (12,13). Therefore, adopting patient-centered care in perioperative nursing is a contemporary approach that enhances surgical safety while promoting patients' holistic well-being.

Although patient-centered perioperative care has been addressed in previous studies, research examining nursing students' attitudes toward this concept remains limited. In particular, few studies have evaluated these attitudes alongside educational and motivational variables, such as academic year, willingness to choose nursing, reasons for choosing nursing, and the presence of a nurse in the family. Therefore, this study differs from previous research by examining nursing students' attitudes toward patient-centered perioperative care in relation to both educational and motivational factors.

This study aimed to determine nursing students' attitudes toward patient-centered perioperative care and to examine whether these attitudes differ according to gender, academic year, willingness to choose nursing, reason for choosing nursing, and the presence of a nurse in the family.

The research questions were as follows:

1. What is the level of students' attitudes toward patient-centered perioperative care?
2. Do students' attitudes toward patient-centered perioperative care differ according to gender, academic year, willingness to choose nursing, reason for choosing nursing, and the presence of a nurse in the family?

Material and Methods

Study Design and Sample

The study was conducted as a descriptive, cross-sectional study. The research was conducted in the Department of Nursing at a university in Burdur, Türkiye.

The study population consisted of 408 students enrolled in the 2nd, 3rd, and 4th years of the Nursing Department at the Faculty of Health Sciences of a university. Without employing a sampling method, all students who were reachable and agreed to participate were included in the study. Data collection was conducted between October 15 and November 15, 2024, and the study included 303 students who voluntarily agreed to participate. Thus, 74.26% of the target population was reached. Students in the 2nd, 3rd, and 4th years who had taken the *Surgical Diseases and Nursing* course were included in the study. First-year students who had not yet taken this course were excluded from the research.

Data Collection

The data were collected face-to-face by the researchers through questionnaire forms during the students' free time, without disrupting their class schedules.

Data Collection Tools

Two instruments were used for data collection: the Descriptive Characteristics Form and the Patient-Centered Perioperative Nursing Scale.

The *Descriptive Characteristics Form* consisted of nine questions designed to examine the students' sociodemographic characteristics, including age, gender, type of high school graduated from, marital status, place of residence, employment status, presence of a nurse in the family, willingness to choose the nursing profession, and reasons for choosing the profession (3).

The Patient-Centered Perioperative Nursing Scale was developed by Shin and Kang (2019) to evaluate the nurse–patient relationship within the perioperative nursing process through a patient-centered care perspective (14). The scale was adapted into Turkish by Göktaş et al. (2022). The scale consists of 20 items and is structured as a five-point Likert-type instrument comprising five subdimensions. The Emotional Interaction subdimension (6 items) includes statements related to establishing effective communication with the patient, developing empathy, and reducing patient anxiety. The Respect subdimension (5 items) covers aspects such as maintaining privacy, responding to patients' questions, and demonstrating sensitivity in communication. The Comfort subdimension (3 items) addresses interventions to ensure patient comfort, including monitoring and managing positioning, cold, and pain. The Information Sharing subdimension (3 items) involves providing explanations and information regarding the surgical process and planned interventions. Finally, the Expertise subdimension (3 items) reflects the nurse's participation in professional education and quality improvement activities, as well as collaboration with other departments (4,11). The possible score ranges for the subdimensions of the scale were as follows: 6–30 for *Emotional Interaction*, 5–25 for *Respect*, 3–15 for *Comfort*, 3–15 for *Information Sharing*, and 3–15 for *Expertise*. As the score obtained from the scale increases, it indicates that students'/caregiving nurses' attitudes and behaviors regarding person-centered perioperative care are more positive in the dimensions of compassionate interaction, Respect, providing Comfort, information sharing, and Expertise. The Cronbach's alpha values for the scale subdimensions were 0.78, 0.75, 0.78, 0.75, and 0.80, respectively (4). In this study, the Cronbach's alpha coefficient of the scale was found to be 0.82.

Data Analysis

Data were analyzed using IBM SPSS Statistics for Windows, Version 20.0 (IBM Corp., Armonk, NY, USA). Before the statistical analyses, the normality of the data was evaluated using the Kolmogorov–Smirnov test and skewness–kurtosis values. Since the data met the assumption of normal distribution, parametric tests were used. Descriptive statistics, including numbers, percentages, means, and standard deviations, were used to summarize the data. A Student's t-test was used for comparisons between two groups, and a one-way analysis of variance (ANOVA) was used for comparisons among more than two groups. Cronbach's alpha was calculated to assess the scale's internal consistency. The level of statistical significance was accepted as $p<0.05$.

Ethical Considerations

The study was conducted in accordance with the principles of the Declaration of Helsinki. Ethical approval was obtained from the Non-Interventional Clinical Research Ethics Committee of a state university (Date: 06.07.2022, Decision No: GO 2022/823). In addition, the necessary institutional permissions were obtained from the university where the research was conducted. Permission to use the Turkish version of the Person-Centered Perioperative Nursing Scale was obtained from Goktas, Gezginci, and Oymaagaclio, who conducted the scale's Turkish validity and reliability study. To inform participants about the study, the researchers read a "Voluntary Informed Consent Form" to them before participation, and written consent was obtained from all students.

Results

A total of 303 students participated in the study, with a mean age of 21.20 ± 1.66 years. Most participants were female (72.3%), and the largest group consisted of second-year students (36.6%). More than half of the students reported having a nurse in their family (64.0%). As for the reasons for choosing the nursing profession, 49.5% (n = 150) stated *job opportunities*, 20.8% indicated *interest in the health field*, 15.8% reported *family influence*, 10.6% expressed a *desire to help others*, and 3.3% described *coincidence* as their reason (Table 1).

Table 1. Sociodemographic Characteristics of the Students (n = 303)

	$\bar{X}$ ±SD	Min-Max
Age	21,20±1.66	18-33
	n	%
Gender		
Female	219	72.3
Male	84	27.1
Grade		
2	111	36.6
3	107	36.3
4	85	28.1
Presence of a Nurse in the Family		
Yes	75	24.8
No	228	75.2
Choosing the Profession Willingly		
Yes	194	64
No	109	36
Reason for Choosing the Profession		
Coincidence	10	3.3
Desire to help others	32	10.6
Job opportunities	150	49.5
Family influence	48	15.8
Interest in the healthcare field	63	20.8

When the mean and standard deviation values of the total and subdimension scores of the *Patient-Centered Perioperative Nursing Scale* were examined, the overall mean score was 86.13 ± 10.42. The subdimension scores were as follows: *Emotional*

Interaction 25.47 ± 3.78, *Respect* 22.50 ± 3.37, *Comfort* 13.08 ± 1.77, *Information Sharing* 12.89 ± 2.14, and *Expertise* 12.21 ± 2.69 (Table 2).

According to Table 3, no statistically significant differences were found in total scale scores by gender, willingness to choose the nursing profession, or the presence of a nurse in the family (p>0.05). The mean total scores were similar across female and male students, across students who chose nursing willingly and those who did not, and across students with and without a nurse in their family. However, no statistically significant difference was found in the total scale score across academic years (p>0.05). Third-year students had the highest mean total score, whereas fourth-year students had the lowest score. In addition, the reason for choosing the nursing profession significantly affected the total scale score (p<0.001). Students who chose nursing because they wanted to help others had the highest mean total score, while those who chose it by chance had the lowest.

According to Table 4, no statistically significant differences were found in subdimension scores by gender, willingness to choose the nursing profession, or the presence of a nurse in the family (p>0.05). In terms of academic year, significant differences were observed in the Respect (p>0.05) and Expertise (p>0.05) subdimensions, with third-year students showing the highest mean scores. No significant differences were found in the other subdimensions across academic years. Furthermore, statistically significant differences were found in all subdimensions according to the reason for choosing the nursing profession, namely emotional interaction, Respect, Comfort, information sharing, and Expertise (p<0.05). Tukey post hoc analysis indicated that these differences stemmed mainly from students who chose nursing because of a desire to help others, suggesting that altruistic motivation was associated with more positive attitudes toward person-centered perioperative care.

Table 2. Mean Scores of the Patient-Centered Care Competence Scale

	Number of Items	Score ($\bar{X}$ ± SD)	Min-Max
Total Scale Score	20	86.13±10.42	20-100
Subdimensions			
Emotional Interaction	6	25.47±3.78	6-30
Respect	5	22.50±3.37	5-25
Comfort	3	13.08± 1.77	3-15
Information Sharing	3	12.89±2.14	3-15
Expertise	3	12.21±2.69	3-15

Table 3. Comparison of Scale Scores According to the Sociodemographic Characteristics of the Students

	n	Score $\bar{X}$ ±SD	Significance Level
Gender			
Female	219	86.06 ± 10.40	t=0.182
Male	84	86.31 ± 10.54	p=0.856
Grade			
2	111	86.37±10.07	F=3.15
3	107	87.65±9.33	p=0.044*
4	85	83.91±11.83	
Presence of a Nurse in the Family			
Yes	75	85.44 ± 10.54	t=0.658
No	228	86.36 ± 10.40	p=0.512
Choosing the Profession Willingly			
Yes	194	86.64±9.77	t=1.081
No	109	85.23±11.49	p=0.281
Reason for Choosing the Profession			
Coincidence	10	79.10±10.29	F=6.93
Desire to help others	32	91.50±8.52	p= 0.002*
Job opportunities	150	86.54±9.75	
Family influence	48	81.04±11.45	
Interest in the healthcare field	63	87.43±10.24	

t=Student t test, F= One Way Anova (*p<0,05)

Table 4. Comparison of the Total Subdimension Scores of the Scale According to the Sociodemographic Characteristics of the Students

	Emotional Interaction	Respect	Comfort	Information Sharing	Expertise
	X̄ ±SD	X̄ ±SD	X̄ ±SD	X̄ ±SD	X̄ ±SD
Gender					
Female	25.49 ± 4.05	22.37 ± 2.55	13.12 ± 1.82	12.98 ± 2.12	12.11 ± 2.73
Male	25.39 ± 3.00	22.83 ± 4.92	12.95 ± 1.66	12.65 ± 2.19	12.48 ± 2.59
	t=0.235	t=0.830	t=0.782	t=1.159 p=0.249	t=1.101
	p=0.814	p=0.408	p=0.435		p=0.273
Grade					
2	25.62 ± 2.96	22.61 ± 2.45	12.99 ± 1.97	12.77 ± 2.39	12.38 ± 2.43
3	25.51 ± 2.72	23.13 ± 4.23	13.32 ± 1.48	13.01 ± 1.98	12.68 ± 2.19
4	25.20 ± 5.53	21.54 ± 2.99	12.88 ± 1.83	12.89 ± 1.99	11.39 ± 3.36
	F=3.15	F=5.53	F=1.63	F=0.35	F=6.01
	p=0.044*	p=0.004*	p=0.197	p=0.703	p=0.003*
Nurse in Family					
Yes	24.93 ± 3.12	22.20 ± 2.95	13.11 ± 1.81	12.95 ± 2.24	12.25 ± 2.41
No	25.64 ± 3.97	22.59 ± 3.50	13.07 ± 1.77	12.87 ± 2.11	12.19 ± 2.79
	t=1.586	t=0.952	t=0.170	t=0.267	t=0.181
	p=0.115	p=0.342	p=0.865	p=0.790	p=0.857
Chose Willingly					
Yes	25.65 ± 2.85	22.60 ± 2.85	13.18 ± 2.46	13.04 ± 2.01	12.18 ± 2.81
No	25.13 ± 5.03	22.31 ± 3.58	12.90 ± 4.58	12.62 ± 2.34	12.27 ± 2.49
	t=1.00	t=0.61	t=1.28	t=1.55	t=0.29
	p=0.317	p=0.546	p=0.203	p=0.124	p=0.771
Reason for Choosing Nursing					
Coincidence	22.30 ± 3.37	20.50 ± 3.37	11.90 ± 2.42	12.30 ± 2.13	12.10 ± 1.49
Desire to help others	26.72 ± 2.88	23.47 ± 2.88	13.81 ± 2.24	14.09 ± 1.55	13.41 ± 1.35
Job opportunities	25.85 ± 4.32	22.41 ± 4.32	13.07 ± 2.30	12.79 ± 1.67	12.42 ± 2.12
Family influence	24.00 ± 2.75	21.25 ± 2.75	12.25 ± 3.61	12.10 ± 2.10	11.44 ± 2.51
Interest in Healthcare	25.54 ± 2.98	23.48 ± 2.98	13.52 ± 5.12	13.19 ± 1.49	11.70 ± 2.01
	F=5.07	F=4.76	F=6.52	F=4.98	F=3.47
	p=0.0005**	p=0.0009**	p=0.00004**	p=0.0006**	p=0.008**

t=Student t test, F= One Way Anova (*p<0,05 , **p<0,000)

Discussion

The total mean score of the Patient-Centered Perioperative Nursing Scale among the 303 participating students was 86.13 ± 10.42. This value is quite similar to the mean score of 85.78 ± 9.54 reported by Goktas et al. in the Turkish validity and reliability study (4). Similarly, Kahraman et al. found that nursing students' scores on the patient-centered perioperative nursing scale were above average, indicating positive attitudes toward this approach. Shin and Kang, who developed the original scale, also reported high scores, supporting the view that person-centered care is an important component of perioperative nursing practice (14,15). Taken together, these findings suggest that nursing students in Türkiye tend to demonstrate positive attitudes toward patient-centered approaches in perioperative care.

The high mean score obtained in the present study may be associated with the integration of patient-centered care principles into nursing education and students' exposure to clinical practice. In line with this interpretation, Mc Namara et al. emphasized that the perioperative environment provides nursing students with valuable learning opportunities, allowing them to observe perioperative nurses as professional role models and to gain knowledge, skills, and professional values (8). However, the same review also noted that unfamiliarity with the perioperative environment, anxiety, stress, and insufficient mentorship may negatively affect students' learning experiences. Therefore, the positive scores observed in the present study may reflect the contribution of clinical exposure, while also highlighting the need for structured orientation and mentorship in perioperative practice settings.

According to the analyses conducted by gender, no statistically significant differences were found between female and male students in the total or subdimension scores of the scale. This finding is consistent with the results of Shin and Kang and Goktas et al., both of which reported that gender was not a determining factor in attitudes toward patient-centered care (4,14). However, Kahraman et al. found that female students scored significantly higher than male students in the Respect subdimension (15). This discrepancy may be explained by differences in sample characteristics, gender distribution, and clinical learning experiences across studies.

In the analysis by academic year, third-year students had significantly higher total scores than the other groups. Significant differences were also found in the Respect

and Expertise subdimensions. This finding suggests that students' attitudes toward patient-centered perioperative care may improve as they gain more clinical experience and become more familiar with professional nursing roles. This result is supported by Mc Namara et al., who reported that perioperative placements allow students to observe preoperative, intraoperative, and immediate postoperative care and to develop an appreciation of the perioperative nursing role (8). Similarly, Siah et al. showed that virtual-reality simulation in a perioperative setting may improve nursing students' efficacy, attitudes, and confidence as scrub nurses, indicating that structured educational experiences can strengthen students' readiness for perioperative care (11).

Although the mean scores of students who chose the nursing profession willingly were higher, the difference was not statistically significant. However, a significant difference was found according to the reason for choosing the profession. Students who chose nursing because of a desire to help others had the highest patient-centered perioperative care scores, whereas those who chose the profession by coincidence had the lowest scores. This finding suggests that intrinsic and altruistic motivation may positively influence students' professional attitudes. Supporting this interpretation, Kapaale reported that student nurses' intention toward perioperative nursing is influenced by factors such as immediate exposure or immersion, professional affirmation, and the availability of positions (16). Similarly, Oyediran et al. found a significant association among nursing students' perceptions, attitudes, and willingness to specialize in perioperative nursing (9). These results indicate that professional motivation and positive perceptions of perioperative nursing may contribute to more favorable attitudes toward patient-centered perioperative care.

No significant difference was found between the presence of a nurse in the family and students' patient-centered perioperative care scores. This finding suggests that having a healthcare professional in the family does not necessarily contribute to the development of patient-centered care attitudes. Instead, such attitudes may be shaped more strongly by formal nursing education, clinical experience, structured perioperative exposure, and professional motivation. This interpretation is consistent with previous studies emphasizing the importance of guided clinical practice, simulation-based learning, mentorship, and positive educational experiences in strengthening students' attitudes toward perioperative nursing.

Overall, this study's findings indicate that nursing students demonstrated positive attitudes toward patient-centered perioperative care. These attitudes were particularly associated with academic year and reasons for choosing the nursing profession. The results support previous evidence suggesting that clinical exposure, professional role modeling, simulation-based learning, and intrinsic motivation are important factors in the development of patient-centered and perioperative care-related attitudes among nursing students.

Conclusion

The findings of this study indicate that nursing students generally have positive attitudes toward patient-centered perioperative care. These attitudes appear to be associated with educational and motivational factors, particularly clinical experience and the reasons for choosing the nursing profession. Based on these results, it is recommended that patient-centered perioperative care be further emphasized in nursing education and that students be supported during clinical practice in developing patient communication, empathy, Respect, information sharing, and professional care behaviors. Further studies with larger and more diverse samples are recommended to enhance the generalizability of these findings.

Limitation

Because the study was conducted in only one nursing department, the results cannot be generalized to all students nationwide.

Ethical Considerations: This study was approved by the Burdur Mehmet Akif Ersoy University Non-Interventional Research Ethics Committee (2022/823/06.07.2022).

Peer-review: Externally peer-reviewed.

Conflict of Interest: No conflict of interest was declared by the authors.

Consent of Patients: The participants were informed in detail, and informed consent was obtained.

Data Availability Statement: All relevant data are within the paper and they are available from the corresponding author on reasonable request.

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