E-ISSN: 2614-6703

Received: 2022-03-25 Revised: 2022-04-05 Accepted: 2022-05-22 Published: 2022-06-23

Knowledge And Attitude Factors Of Nurses Dealing With Atraumatic Application Care To Child Patien

Cucum Suminar^{1*}, Mona Yulianti² and Lilis Kurnaesih³

- ¹ Nursing Science Study Program, Universitas Sebelas April, Sumedang
- ² Nursing Science Study Program, Universitas Sebelas April, Sumedang
- ³ Nursing Science Study Program, Universitas Sebelas April, Sumedang

Abstract: Background: Atraumatic care can reduce the anxiety of children or parents during the hospitalization. The implementation of atraumatic care are affected by many factors, such as internal and external factors. The purpose of this study was to determine the nurse's knowledge and attitude related to the application of atraumatic care in pediatric patients in room Tanjung RSUD Sumedang in 2019.

Methods: The study was a descriptive analytical approach. The sample in this study were all nurses in Tanjung Room consist of 33 people taken using total sampling techniques. Descriptive analysis was used to describe the characteristics of respondent, nurses' knowledge and attitudes about atraumatic care, and the application of atraumatic care by nurses. Therefore bivariate analysis was done using Rank Spearman test to see the relationship between nurses' knowledge and attitudes with the application of atraumatic care. The results of this study showed that the majority of respondents have less knowledge about atraumatic care (90.9%), most nurses showed a positive attitude towards the application of atraumatic care (90.9%), most of nurses have applied atraumatic care well (72.7%). From the bivariate analysis, known that there is no relationship between the knowledge and attitudes of nurses regarding the implementation of atraumatic care with the application of atraumatic with the p value for knowledge (0.751) and the p value for attitude (0.812). For further researchers to explored the factors that influence the application of atraumatic care by using different approaches and methods so that research will be more varied.

Keywords: Atraumatic Care, Attitude, Factors affecting, Knowledge

1. Introduction

Hospitalization is the entry of individuals into hospitals as patients for various reasons such as diagnostic examinations, surgical procedures, medical treatment, administering drugs and stabilizing or monitoring body conditions (Saputro & Fazrin, 2017). Data from the 2017 National Socio-Economic Survey shows that of all children who have been hospitalized in the past year, most of them have been hospitalized at regional hospitals (39.33%) and private hospitals (38.47%) (Kemenppa RI, 2018). In 2018 as many as 2721 pediatric patients underwent treatment in an inpatient room with a total of 241 children aged 3-5 years (8.8%) (Medical Record of RSUD Sumedang, 2019).

Hospitalization causes a crisis in children because children are trying to adapt to a foreign and new environment which in this condition becomes a stressor for both the child and parents and family, this change in condition is a big problem that causes fear, anxiety for children which can cause physiological and psychological changes. in children if the child is not able to adapt to these circumstances (Saputro & Fazrin, 2017).

^{*}E-mail: dedecucum08@gmail.com

Many studies state that atraumatic care can reduce children's anxiety levels during hospitalization. Lory Huff., et al (2009) in (de Breving et al., 2015) it is known that the application of atraumatic care can reduce stress due to invasive procedures in children during hospitalization so as to accelerate the child's healing process. (de Breving et al., 2015) stated that there was an effect of the application of atraumatic care on the anxiety response of children who experienced hospitalization.

Nurses' knowledge and attitudes are important internal factors for nurses to have in the implementation of atraumatic care so that they can provide optimal nursing care (Mediani., et al, 2019).

Knowledge or cognitive is a very important domain in shaping one's actions (overt behavior). Before a person adopts a behavior, he must first know what the meaning or benefit of the behavior is. Nurses will carry out atraumatic care well if they have knowledge about the definition, goals, benefits, principles and interventions of atraumatic care (Notoatmodjo (2010) in (Amni, 2021).

Nurses' knowledge about atraumatic care consists of six levels, namely knowing, understanding, application, analysis, synthesis, evaluation (Notoatmodjo, 2010). This description of the level of knowledge of nurses about atraumatic care is important to know because it is a useful basic data in the implementation of atraumatic care so that it can produce good nursing care.

A nurse in carrying out atraumatic care is also based on the individual's tendency to act. If individuals are more inclined to apply the principles of atraumatic care while providing nursing interventions, the provision of nursing care that is minimally traumatized will be carried out well. Attitude as one of the internal factors of nurses in the implementation of atraumatic care is important to know because it will provide an overview of the extent of nurses' attitudes and to determine the relationship between nurses' attitudes and their implementation.(Hockenberry et al., 2011)

The results of observations made by researchers are known that at the time of providing nursing care, children are still crying, fussy and even uncooperative with nurses. This can be seen when the nurse enters the room to make observations, the child will cry and hold the mother or guardian. In addition, the implementation of actions such as infusion is sometimes not included by the parents so that the child cries. In addition to crying, pediatric patients also do not want to be separated from their parents and avoid nursing actions and the effect on parents or caregivers looks anxious, confused when their children cry.

Based on this, the researchers were interested in digging deeper into the knowledge and attitudes of nurses related to the application of atraumatic care in the Tanjung Room of the Sumedang Regional General Hospital.

2. Materials and Methods

The research method used in this research is descriptive analytical research method. In this study, the researcher wanted to analyze the knowledge and attitude factors related to the

application of atraumatic care in the Tanjung Room, RSUD Sumedang. The population in this study were all pediatric nurses in the Tanjung Room, RSUD Sumedang, a total of 33 people. The sample in this study were all 33 nurses in Tanjung Room, RSUD Sumedang. The sampling technique in this study used total sampling. The hypothesis in this study is Ha = There is a relationship between the knowledge and attitudes of nurses regarding atraumatic care with the application of atraumatic care to pediatric patients in the Tanjung Room of RSUD Sumedangin 2019. The data analysis used in this study was the Spearman rank test because the independent variables in this study were categorical variables and the class was in the form of a 2x2 table.

3. Results and Discussion

a. Result

The results of the study are discussed in several parts, namely the characteristics of the respondents, an overview of the internal factors of nurses' knowledge about the implementation of atraumatic care, a description of the internal factors of nurses' attitudes about the implementation of atraumatic care, an overview of the implementation of atraumatic care and the relationship of internal factors of knowledge and attitudes of nurses about the implementation of atraumatic care with the implementation of atraumatic care. nurse care in the Tanjung Room of RSUD Sumedang in 2019.

3.1 Univariate Analiysis

In this study, data were obtained regarding the characteristics of the respondents which are described in the table below:

3.1.1 Getting discrimination experienced

No	Characteristics	Frequence (f)	Percentage (%)
1	Age		
	< 18 years old	0	0
	early adulthood	28	84.8
	middle adult	5	15.2
	late adulthood	0	0
	Total	33	100
2	Gender		
	Male	4	12.1
	Female	29	87.9
	Total	33	100
3	Level Of Education		
	High School Of Nurse	0	0
	Diploma	30	90.9
	Bachelor	3	9.1
	Other	0	0
	Total	33	100

4	Length of Work in Hospital						
	<5 years	11	33.3				
	5-10 years	7	21.2				
	>10 years	15	45.5				
	Total	33	100				
5	Length of Work in the Pediatric's Room						
	<5 years	18	54.5				
	5-10 years	5	15.2				
	>10 years	10	30.3				
	Total	33	100				

Characteristics of respondents obtained data that most of the respondents are in the early adult age group (84.8%), female gender (87.8%), education level Diploma (90.9%). Almost half of respondents had more than 10 years of experience in a hospital (45.5%), and more than half of respondents had less than five years of work experience (54.5%).

3.1.1 Distribution of Factor Description Nurses' knowledge about the application of Atraumatic care

Nurses' knowledge about the application of	Frequence (f)	Percentage (%)	
Atraumatic care			
Nurse knowledge is good	1	3.0	
Nurse knowledge is sufficient	2	6.1	
Nurse knowledge is not good	30	90.9	

Based on the data table above, it shows that most of the nurses in the Tanjung Room RSUD Sumedang are in the category of poor knowledge level about the application of Atraumatic care as many as 30 people (90.9%). Knowledge of nurses is good as much as 1 person (3.0%) and knowledge of nurses is not good as much as 2 people (6%).

3.1.2 Distribution of Nurse's Attitude Factors on the Implementation of Atraumatic Care

Nurse's	Attitude	Factors	on	the	Frequence (f)	Percentage (%)	
Implementation of Atraumatic Care							
Positive attitude			30	90.9			
Negative Attitude				3	9.1		

Table above shows that almost all nurses have a positive attitude towards the application of atraumatic care as many as 30 people (90.9%). A small number of nurses have a negative attitude towards the application of atraumatic care, as many as 3 people (9,1%).

3.1.3 Distribution of Atraumatic Care Implementation Description

Atraumatic Care Implementation	Frequence (f)	Percentage (%)
Not good	9	12.1
Good	24	87.9

The table above shows that almost all nurses in the Tanjung Room have implemented atraumatic care well namely 24 people (87.9%), and 9 people (12.1%) nurses are still not good at implementing atraumatic care.

3.2 Bivariat Analysis

3.2.1 Correlation of Internal Factors Knowledge and Attitude of Nurses with the application of Atraumatic Care

Knowledge	Application of Atraumatic Care				Total		P Value
	Not Good		Good		_		
	n	%	n	%	n	%	_
Not Good	3	9.1	27	81.8	30	90.9	0.208
Sufficient	0	0	2	6.1	2	6.1	
Good	1	3	0	0	1	2	
Total	4	12.1	29	87.9	33	100	

Based on the results of the correlation analysis between the level of knowledge of nurses about atraumatic care and the application of atraumatic care in the Tanjung Room of RSUD Sumedangin 2019 using the Spearman Rho test, the p value = 0.208 (p > 0.05) then H0 is accepted which means there is no relationship between the level of knowledge of nurses about atraumatic care with the application of atraumatic care in the tanjung room of RSUD Sumedangin 2019.

3.2.2 The Relationship between Internal Factors of Nurses' Attitudes about Atraumatic Care and the Implementation of Atraumatic Care

Attitudes	Application of Atraumatic Care				Total		P
	Not Good		Good		_		Value
_	n	%	n	%	n	%	-
Positif	4	12.1	26	78.8	30	90.9	0.208
Negatif	0	0	3	9.1	3	9.1	
Total	4	12.1	29	87.9	33	100	

Based on the results of the correlation analysis between nurses' attitudes about atraumatic care and the application of atraumatic care in the Tanjung Room, RSUD SumedangIn 2019, which used the Spearman rank test, the p value = 0.515 (p > 0.05) then H0 was accepted, which means that there is no relationship between nurses' attitudes about atraumatic care and the application of atraumatic care in the Tanjung Room of RSUD Sumedangin 2019.

b. Discussion

3.1 Description Of Nurse's Knowledge About The Application Of Atraumatic Care

The results of the study in this research show that most of the nurses in the Tanjung room at RSUD Sumedangare in the category of poor knowledge level about the application of Atraumatic care (90.9%). The results of this study are in line with the results of research conducted by Surastiningsih (2014) on nurses in the children's ward of RSAB Harapan Kita where 57% of nurses included in the category of poor knowledge about atraumatic care.

Knowledge or cognitive is a very important domain in shaping one's actions. The level of knowledge included in the cognitive domain has six levels, namely knowing, understanding, application, analysis, synthesis and evaluation (Notoatmodjo, 2007 in Suratiningsih (2014: 4). The knowledge possessed by a nurse greatly determines the success of the tasks assigned to him. nurse's height can complete their tasks effectively and efficiently, so that the performance is getting better (Zuhriyana, Nurhayani, & Balqis, 2012).

The level of education is one of the most important factors in increasing one's knowledge. The level of education supports good knowledge of nurses and influences their perceptions in carrying out nursing actions (Kurniawati, 2009).

Most of the respondents (90.9%) have a final education Diploma. Budiman (2013:2) states that the higher a person's education, the wider his knowledge is expected. Based on the results of the crosstab between the level of knowledge and knowledge of nurses about atraumatic care, it is known that as many as 22 nurses with Diploma Nursing education have a poor level of knowledge. According to the author's analysis, this happened because of the history of training or seminars on atraumatic care which may not be attended by all respondents, besides that the material on atraumatic care most likely had not been socialized in previous studies.

In this study, almost half of the respondents (45.5%) had experience working in a hospital for more than 10 years. According to the author's assumption, this is one of the factors that causes the low level of knowledge of nurses in the Tanjung Room of RSUD Sumedang regarding atraumatic care. In work periods of more than 10 years, individuals tend to feel bored in exploring new knowledge. Nurses tend to be comfortable to carry out nursing actions that are in accordance with habits in the field or according to their main tasks.

3.2 Description of Nurses' Attitudes about the Application of Atraumatic Care

Based on the results of the study, it was found that almost all nurses in the Tanjung Room had a positive attitude towards the application of atraumatic care, namely as many as 30 people (90.1%). It can be concluded that the attitude of nurses about atraumatic care intervention from the principle of reducing and preventing the impact of separation from the family, increasing the ability of parents to control child care, preventing or reducing

physical and psychological injuries, and modifying the physical environment is positive. This result

This is in line with the results of Santoso's research (2014) that as many as 87.1% of nurses support the implementation of atraumatic care in PKU Muhammadiyah General Hospitals Bantul and Yogyakarta. In addition, the results of Amni's research (2016) are also in line with the results of this study where the attitude of nurses towards atraumatic care is in the positive category as much as 75%.

From the results of the analysis, it is known that the majority of nurses in the Tanjung room have a D3 nursing education background. A total of 3 nurses had a negative attitude towards the application of atraumatic care and of the three nurses with an undergraduate education background, all of them had a positive attitude towards the application of atraumatic care. According to the author's analysis this is influenced by the level of one's education. Nurses who have a higher level of education tend to show a positive attitude. This is in line with Carpenito (2007 in Utami: 2014: 92) which states that the level of education can affect a nurse in carrying out nursing actions against her clients.

According to the author's analysis, this happens because most nurses who have less than 5 years of work experience in the Tanjung Room are nurses who have just finished school in the last 10 years. So that the knowledge he has is often updated following the development of the nursing world. In addition, for a period of less than five years, nurses tend to have good work productivity.

3.3 Description of Atraumatic Care Application

The results showed that almost all nurses in the Tanjung Room had implemented atraumatic care well, namely 24 people (72.7%), and 9 people (27.3%) nurses were still not good at implementing atraumatic care. These results are in line with research conducted by (Kurnia & Waluyanti, 2014) related to the relationship between the application of atraumatic care and the level of satisfaction of the child's parents during the hospitalization process in the children's room at Balung Jember Hospital where it is known that the implementation of atraumatic care is good by the implementing nurse (43.5%).

Based on these data, almost all nurses in the Tanjung Room understand that the provision of atraumatic care services during the hospitalization process is very important as a guarantee of security for nursing procedures according to roles and responsibilities in pediatric nursing. This shows that nurses are aware of the impact that occurs due to illness or hospitalization, the child will experience changes in behavior that have an impact on him (de Breving et al., 2015).

Researchers argue that the characteristics of nurses indirectly affect the application of atraumatic care services to children. Differences in individual characteristics of nurses cause differences in the work performance of nurses.

The results showed that most of the nurses who were included in the category of applying atraumatic care both had a final D3 and S1 education as many as 24 people (72.7%). The level of education of a nurse affects her perception of taking nursing actions (Kurnia & Waluyanti, 2014). In line with this, states that the higher a person's level of education, the better behavior in performing atraumatic care nursing care.

3.4 Relationship of Internal Factors Knowledge and Attitude of Nurses about Atraumatic Care with the Application of Atraumatic Care

Based on the results of the correlation analysis between the level of knowledge of nurses about atraumatic care and the application of atraumatic care in the Tanjung Room of RSUD Sumedangin 2019 using the Spearman Rank test, the p value = 0.751 (p > 0.05) then H0 is accepted which means there is no relationship between the level of knowledge of nurses about atraumatic care with the application of atraumatic care in the tanjung room of RSUD Sumedang in 2019.

Based on the results of the correlation analysis between nurses' attitudes about atraumatic care and the application of atraumatic care in the Tanjung Room of RSUD Sumedangin 2019 using the Spearman rank test, the p value = 0.812 (p > 0.05) then H0 is accepted which means there is no relationship between attitudes nurse about atraumatic care with the application of atraumatic care in the Tanjung Room of RSUD Sumedang in 2019.

There are interesting things from the results of this study that although most of the respondents have less knowledge about atraumatic care, almost most of the respondents have implemented atraumatic care well. According to the researcher's assumption, although knowledge about atraumatic care is in the category of less, the positive attitude shown by most of the respondents illustrates that most of the respondents provide support for the implementation of atraumatic care. However, other individual internal factors that were not examined in this study may be one of the reasons for the good application of atraumatic care by nurses in Tanjung Room.

The nursing supervision carried out by the nursing field periodically in the hospital according to the researcher's assumption is one (Wayan, 2006) of the factors that causes the good application of atraumatic care in the Tanjung Room of Sumedang Hospital. In states that supervision is a process of observing the implementation of all organizational activities to ensure that all work being carried out goes according to the plan. set. Supervision has a major influence in the implementation of nursing care.

There are several previous studies regarding the factors that influence the application of atraumate care by nurses. Research conducted by (Fatmawati & Mariyana, 2020) states that limited facilities that support the implementation of atraumatic care in hospitals are one of the factors that influence and even hinder nurses in carrying out atraumatic care for children undergoing hospitalization. Febriani's research (2017) on the dominant factors

influencing the success of atraumatic application found that there are several factors including room facilities, bureaucratic support, parental support, perceptions of parents with nurses and individual characteristics of nurses.

Besides the individual characteristics of nurses, parental support and perceptions of parents and nurses about the application of atraumatic care also affect the success of the application of atraumatic care. In line with this opinion, (Febriani, 2017) states that there is a significant relationship between parental support and perceptions of parents and nurses with the application of atraumatic care. The factor that most influences the success of implementing atraumatic care is the parents' perception of nurses (OR = 0.045) (Febriani, 2017). Good perceptions between parents and nurses regarding education and actions to be taken for children cause a decrease in the anxiety of parents whose children are undergoing hospitalization (Hamilton, 2012) in (Febriani, 2017).

4. Conclusion

Based on the results of research and discussion on factors of knowledge and attitudes of nurses related to the application of atraumatic care, there is no relationship between factors of knowledge and attitudes of nurses about the implementation of atraumatic care with the application of atraumatic care.

Acknowledgements

The researchers extend their gratitude to all parties who have contribute to the completion of this research.

Conflict of Interest

All Authors declare no conflict of interest and agree with the content of the manuscript.

References

- Amni, R. (2021). Faktor-faktor Yang mempengaruhi Pelaksanaan Atraumatic Care di RS Umum Cut Meutia Aceh Utara. *Jurnal Kepemimpinan Dan Manajemen Keperawatan*, 4(1). https://doi.org/10.32584/jkmk.v4i1.602
- De Breving, R. M., Ismanto, A., & Onibala, F. (2015). Pengaruh Penerapan Atraumatic Care Terhadap Respon Kecemasan Anak Yang Mengalami Hospitalisasi Di Rsu Pancaran Kasih Gmim Manado Dan Rsup Prof. Dr. R. D. Kandou Manado. *Jurnal Keperawatan UNSRAT*, *3*(2), 108829.
- Fatmawati, D., & Mariyana, R. (2020). Penerapan Atraumatic Care Terhadap Respon Fisiologis Dan Respon Psikologis Yang Mengalami Hospitalisasi. *Human Care Journal*, *5*(1), 356. https://doi.org/10.32883/hcj.v5i1.721
- Febriani, N. (2017). FAKTOR YANG DOMINANMEMPENGARUHI KEBERHASILAN

- PENERAPAN ATRAUMATIC CARE DI RS PKU MUHAMMADIYAH DI DAERAH ISTIMEWA YOGYAKARTA. *Universitas Muhammadiyah Yogyakarta*, 8.5.2017.
- Hockenberry, M., Wilson, D., & Rodgers, C. C. (2011). *Essentials of PEDRIATRIC NURSING* (10th ed.). Elsivier.
- Kemenppa RI. (2018). Profil Kesehatan Anak Indonesia Tahun 2018. *Ilmu Pendidikan*, 5(1), 12–21.
- Kurnia, M., & Waluyanti, F. T. (2014). ATRAUMATIK SAAT PEMBERIAN OBAT MELALUI INJEKSI IV PADA ANAK 1-18 TAHUN Pendahuluan Metode. 1–10.
- Notoatmodjo, soekidjo. (2010). Metodologi Penelitian Kesehatan (p. 243).
- Saputro, H., & Fazrin, I. (2017). Anak Sakit Wajib Bermain di Rumah Sakit: Penerapan Terapi Bermain Anak Sakit.
- Wayan. (2006). Manajemen keperawatan. 117.