
ASSESSMENT OF CONCERN OF NEWLY EMPLOYED NURSES FOR SELF-CARE OF PATIENTS IN HOSPITALS IN AKWA IBOM STATE

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ABSTRACT

The study was to assess the concern of newly employed nurses for self-care of patients in hospitals in Akwa Ibom State. Descriptive survey design was adopted for the study which was conducted in Akwa Ibom State. The population of the study consisted of all the 2021/2022 newly employed nurses in Akwa Ibom State. Stratified sampling technique was used to select 30 nurses from each of the three (3) senatorial districts in Akwa Ibom State, giving a total of 90 newly employed nurses that constituted the sample size used for the study. The instrument titled "Nurses and Self-Care of Patients Questionnaire (NSCPQ)" was used for data collection. Face and contents validation of the instrument was carried out by one expert in test, measurement, and evaluation to ensure that the instrument was accurate for the study. Cronbach Alpha technique was used to determine the level of reliability of the instrument. In this case, the average reliability coefficient obtained was 0.84, and this was high enough to justify the use of the instrument. The researcher subjected the data collected for this study to appropriate statistical techniques such as descriptive statistics for answering the research questions and independent t-test analysis for testing the hypotheses. The test for significance was done at 0.05 alpha level. The study discovered that there is high extent of concern of newly employed nurses for self-care of patients in hospitals in Akwa Ibom State. Newly employed female nurses are more concerned for the self-care of patients in hospitals in Akwa Ibom State than their male counterparts. Interestingly, it was also found that a nurse's health can affect the care he or she provides to patients. And also they are very concerned about job anxiety control. Based on the findings of the study, it was concluded that self-care behaviour of patients is relevant not only for preventing future health problems, such as heart disease and lung cancer, but also for mediating the course of long-term conditions of patients. One of the recommendations made was that the newly employed nurses, apart from showing their patients effective care, should ensure they train the patients to be self-dependent by undergoing self-care training so as to tackle their health challenges on their own in the absence of the nurses.

KEYWORDS: Newly Employed Nurses, Patients, Concern, Self-Care and Akwa Ibom State

Introduction

Nursing, like other healthcare professions, is based on the ideals of service to humanity (Watson, 2012; Feo, Conroy, Wiechula, Rasmussen, and Kitson, 2019). Nursing has a distinguished history of concern for the welfare of the sick, injured, and vulnerable and for social justice. This concern is embodied in the provision of nursing care to individuals and the community (American Nurses Association, 2014). Nursing as a health care science focuses on serving the needs of humans as biopsychosocial and spiritual beings. Its practice requires not only scientific knowledge, but also interpersonal, intellectual, and technical abilities and skills. This means a composition of knowledge, clinical work, and interpersonal communication skills (Raya, 2006). In the same manner, Pehrson, Banerjee, Manna, Shen, Hammonds, and Coyle (2016) asserted that patients with illnesses such as cancer have a great need for information and emotional support.

However, as these patients do not always disclose their concerns for emotional support directly to nurses, nurses need to be emotionally stable when or while attending to patients' care. In addition, Bandari Heravi-Karimooi, Rejeh, Mirmo-hammadkhani, Vaismoradi, and Snelgrove (2015) acknowledge the emotional support through the promotion of the expression of feelings and the realistic feeding of hope. According to Parburry (2002), the most integral part of nursing is caring. However, the nurse-patient relationship is considered the foundation of nursing care (Hagerty and Patusky, 2003). The purpose of the nurse-patient relationship is based on caring for others. In nursing, maintaining a healthy relationship is a way of caring for human needs, and the epistemology of caring is established through the nurse-patient relationship (Granados Gamez, 2009). A healthy nurse-patient relationship built on trust and respect goes a long way towards improving a patient's overall health.

Statement of the Problem

Patients rely on nurses to show empathy, listen to concerns, answer questions, and provide quality care. Unfortunately, nurses are not always capable of giving themselves the care they need to combat the rigors of the nursing profession. If nurses do not make room for self-care in their busy schedules, they may have a hard time focusing on patients. It is true that, despite the above facts, there are some elements of worry here. The worries are about the concern of the newly employed nurses for the self-care of patients in hospitals in Akwa Ibom State. It is on this premise that this study was carried out to assess the concern of newly employed nurses for the self-care of patients in Akwa Ibom State.

Objectives of the Study

1. To find out the extent of concern of newly employed nurses for self care of patients in hospitals in Akwa Ibom State.
2. To examine the difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State.

Research Questions

1. What is the extent of concern of newly employed nurses for self care of patients in hospitals in Akwa Ibom State?
2. What is the difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State?

Hypothesis

1. There is no significant difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State.

Conceptual Review

Concept of Newly Employed Nurses

Newly employed nurses are defined as registered nurses who are in their first two years of clinical practice. Before newly employed registered nurses start professional life, they complete a bachelor's degree in nursing that consists of three years of full-time study. According to Benner (2009), newly employed nurses need to be active in the same or similar clinical contexts for about two years to be considered competent in the area. Accordingly, the European Parliament (2013) noted that nursing programmes should consist of 50% clinical-based education. Therefore, task shifting from nursing care to medical care can change or have an impact on newly employed registered nurses' professional roles that require capability, knowledge, independent work, and decision-making abilities related to medical care (Niezen & Mathijssen, 2014). Today, newly employed nurses' work readiness and preparedness for professional practice has been questioned due to the low self-confidence and level of clinical competence seen among newly employed nurses in handling complex patient situations (AlMekkawi & El Khalil, 2020; Laschinger et al., (2016); Missen, McKenna, & Beauchamp, (2016).

Therefore, in regard to newly employed nurses, these negative feelings can be related to a lack of professional experience as they are facing new demands in the clinical context, such as nursing patients in challenging situations (Arrowsmith, LauWalker, Norman, & Maben, 2016; Walton, Lindsay, Hales, & Rook, 2018), and high levels of acuity and complex patient situations (Della Ratta, 2016). An introduction programme can prepare and support newly employed nurses to build their confidence and competence as they develop professionally (Duchscher, 2009; Gardiner & Sheen, 2016; Rush, Adamack, Gordon, Lilly, & Janke, 2013; Wangenstein, Johansson, & Nordström, 2008; Whitehead, Owen, Henshaw, Beddingham, & Simmons, 2016). These programs generally consist of a combination of components; for example, they might include unit-specific orientation elements, training, formal or informal supervision, and support provision such as co-working with an experienced registered nurse and mentoring (Rush, Janke, Duchscher, Phillips, & Kaur, 2019).

Concept of Self Care

According to Taylor (2019), self-care remains a primary form of healthcare worldwide. Self-care refers to the ability of individuals, families, and communities to promote health, prevent disease, maintain health, and cope with illness and disability with or without the support of a healthcare provider (World Health Organization, 2020). Self-care is the practice of individuals looking after their own health using the knowledge and information available to them. It is a decision-making process that empowers individuals to look after their own health efficiently and conveniently, in collaboration with health and social care professionals as needed. Individuals engage in some form of self-care daily with food choices, exercise, sleep, and dental care. According to Alexander Segall and Jay Goldstein (2008), self-care has been defined as the process of taking care of oneself with behaviors that promote health and active management of illness when it occurs. Self-care in health is intended to influence health care policy by focusing attention on what behaviours can be encouraged to benefit public health.

Routine self-care is important for generally healthy people, but self-care becomes essential when illness occurs (Riegel et al., 2012). Chronic illness (e.g., heart failure, diabetes, high blood pressure) requires behaviors that control the illness, decrease symptoms, and improve survival, such as medication adherence and symptom monitoring. An acute illness like an infection (e.g., COVID) requires the same types of self-care behaviors as people with chronic illnesses. For the majority of people with chronic illnesses, time spent having that illness managed by a health professional is vastly outweighed by time spent on self-care. It has been estimated that most people with chronic illnesses spend only about 0.001%, or 10 hours per year, of their time with a healthcare provider (Riege et al., 2017). Routine self-care in generally healthy populations includes prevention of illness and a comparatively better quality of life. Jonkman (2016) stated that for people with chronic illness, self-care is associated with fewer symptoms, fewer hospitalizations, better quality of life, and longer survival compared to individuals in whom self-care is poor.

Concept of Patients

A patient is any recipient of health care services that are performed by healthcare professionals. The patient is most often ill or injured and in need of treatment by a physician, nurse, psychologist, dentist, veterinarian, or other health care provider. The word "patient" originally meant "one who suffers". A patient is also a person under health care. The person may be waiting for this care, may be receiving it, or may have already received it. According to Melissa (2021), there is a considerable lack of agreement about the precise meaning of the term "patient." According to him, it is diversely defined as, for example,

- A person who requires medical care.
- A person receiving medical or dental care or treatment.
- A person under a physician's care for a particular disease or condition.

- A person who is waiting for or undergoing medical treatment and care
- An individual who is receiving needed professional services that are directed by a licensed practitioner of the healing arts toward maintenance, improvement or protection of health or lessening of illness, disability or pain (Melissa 2021).

From the Latin verb "patior," meaning "to suffer," both in the sense of feeling pain and in the sense of forbearance. Thus, the two meanings of the word "patient" – as a noun denoting "someone who suffers" and as an adjective denoting "to bear with forbearance" – are derived from the same root (Melissa 2021).

Concept of Hospital

A hospital is a health care institution providing patient treatment with specialized health science and auxiliary healthcare staff and medical equipment. The best-known type of hospital is the general hospital, which typically has an emergency department to treat urgent health problems ranging from fire and accident victims to sudden illnesses. A hospital is a place where a person goes to be healed when he or she is sick or injured. Specialized hospitals can help reduce health care costs compared to general hospitals. Hospitals are classified as general, specialty, or government-run, depending on the sources of income they receive. According to Hall (2008), hospitals are typically funded by public funding, health organizations (for-profit or nonprofit), health insurance companies, or charities, including direct charitable donations. Historically, hospitals were often founded and funded by religious orders or by charitable individuals and leaders. Currently, hospitals are largely staffed by professional physicians, surgeons, nurses, and allied health practitioners, whereas in the past, this work was usually done by the members of founding religious orders or by volunteers. However, there are various Catholic religious orders, such as the Alexians and the Bon Secours Sisters, that still focus on hospital ministry in the late 1990s, as well as several other Christian denominations, including the Methodists and Lutherans, that run hospitals (Lovoll 2008).

The difference between a hospital and other healthcare places like a clinic or a doctor's office is that a hospital will have beds where patients can stay overnight. These patients are called "inpatients." Patients who are staying at the hospital will always be under the care of doctors and nurses who are always available to take care of injured or sick patients. Hospitals always have the tools and machines needed for treating patients. In accordance with the original meaning of the word, hospitals were originally "places of hospitality", and this meaning is still preserved in the names of some institutions, such as the Royal Hospital Chelsea, established in 1681 as a retirement and nursing home for veteran soldiers. Some patients go to a hospital just for diagnosis, treatment, or therapy and then leave (outpatients) without staying overnight, while others are "admitted" and stay overnight or for several days, weeks, or months (inpatients). Hospitals are usually distinguished from other types of medical facilities by their ability to admit and care for inpatients, whilst the others, which are smaller, are often described as clinics.

Concern of Newly Employed Nurses for Self-Care of Patients in Hospital

Nurses are trained to care for others, and it is entrenched in their mission statement. However, nurses often show a reluctance to spend the time necessary to care for themselves, or they have trouble finding self-care activities that fit their interests and are simply integrated into their daily routines. On the other hand, self-care can help both practicing nurses and nursing students cope with pressures that might lead to tiredness, tension, and fatigue (also known as burnout), such as clinical decision-making and staffing problems (Awa, Plaumann, & Walter, 2010). The newly employed nurses have cause for concern about the impact on their profession. Nurses work in a variety of settings, including hospitals, the classroom, the community health department, the business sector, home health care, and the laboratory. Although each role carries different responsibilities, the primary goal of a professional nurse remains the same: to be the client's advocate and provide optimal care on the basis of evidence obtained through research.

It is also very interesting to note that the newly employed nurses are concerned about productivity. It is apparent that nursing productivity is unique, as it involves interaction between human beings and the production can be visible or invisible products or services (Moody, 2004). Patients' self-care behavior is important not only for preventing future health problems like heart disease and lung cancer, but also for modifying the course of long-term conditions. Patient-administered self-care occurs when providers train individuals to deliver their own care, on their own time, without supervision or dependence on a licensed professional. Naturally, not every procedure can transit from the provider's hands into the patient's. For those procedures that can, the potential to create value for patients and health systems must be explored. Self-care of patients includes any activity or habit performed by the individual with the goal of maintaining or improving his/her physical, emotional, or spiritual health (Orem, 2001). Many positive self-care activities not only target daily health management but also focus on long-term stress reduction.

Dealing with the emotions that come when you are in the hospital can be overwhelming. Here are several suggestions to help you manage side effects that you may experience during your hospital stay (MOFFITT 2018).

Settle into sleep: Getting enough sleep is a common challenge when staying in a hospital. To improve your overall quality of sleep, try these strategies:

During the day:

- ✓ Keep lights on or blinds open
- ✓ Spend time out of bed
- ✓ Avoid caffeine after lunch

Before bed:

- ✓ Limit the use of TV and digital devices

- ✓ Wear an eye mask and use ear plugs
- ✓ Try lavender aromatherapy
- ✓ Listen to relaxing music
- ✓ Practice breathing and meditation exercise

Relax the body and mind

Choose a calming or meaningful word or short phrase. Situate yourself quietly and comfortably. Relax your muscles. Breathe slowly, at a comfortable pace. Silently say the word or phrase with each exhale. When other thoughts come to mind, gently return to your word or phrase. Take 3–10 minutes a day to practice this skill.

Improve your wellbeing with these self-care exercises

- Reflect or write about what makes you feel grateful
- Journal about your thoughts and feelings
- Nurture your spirituality through meditation or prayer
- Read inspirational quotes, poems and stories
- Watch uplifting and funny movies and shows
- Practice affirmations for healing.

Guide your imaginations: Create an image in your mind that is safe, peaceful, and relaxing in order to distract from pain, anxiety, or problems. Always Meet yourself with kindness. Pause and reflect on a difficult situation for a few moments. Say to yourself, "This is challenging right now." Consider that you are not alone. Place your hand over your heart and say to yourself, "May I be kind to myself in this moment. May I give myself the compassion I need."

Patient engagement in self-care is both an old and new idea. Before the rise and influence of scientific medicine, this idea was a fact of life and a matter of survival for sick, injured or vulnerable people. Patient engagement in self-care is the fifth concept of the Practice Competence and Excellence (PCE) dimension and the third of the four PCE concepts that form the Careful Nursing critical circle of clinical responsibility. This was clearly evident in the historical Careful Nursing documents, which is why this is a key idea in Careful Nursing.

Methods

Descriptive survey design was adopted for the study. The study was conducted in Akwa Ibom State. The population of the study consisted of all the 2021/2022 newly employed nurses in Akwa Ibom State. Stratified sampling technique was used to select 30 newly registered nurses from each of the three (3) senatorial districts in Akwa Ibom State, giving a total of 90 newly registered nurses that constituted the

sample size used for the study. The instrument titled "Newly Registered Nurses and Self-Care of Patients Questionnaire (NRNSCPQ)" was used for data collection. Face and content validation of the instrument was carried out by one expert in test, measurement, and evaluation to ensure that the instrument was accurate for the study. Cronbach Alpha technique was used to determine the level of reliability of the instrument. In this case, the average reliability coefficient obtained was 0.84, and this was high enough to justify the use of the instrument. The researcher subjected the data generated for this study to appropriate statistical techniques such as descriptive statistics used in answering the research questions and independent t-test analysis used in testing the hypotheses. The test for significance was done at 0.05 alpha level.

Results and Discussions

Research Questions One: The research question sought to find out the extent of concern of newly employed nurses for self care of patients in hospitals in Akwa Ibom State. To answer the research question, percentage analysis was performed on the data, (see table 1).

Table 1: Percentage analysis of extent of concern of newly employed nurses for self-care of patients in hospitals in Akwa Ibom State

EXTENTS	FREQUENCY	PERCENTAGE
VERY HIGH EXTENT	12	13.33
HIGH EXTENT	45	50**
LOW EXTENT	23	25.56
VERY LOW EXTENT	10	11.11*
TOTAL	90	100%

** The highest percentage frequency

* The least percentage frequency

SOURCE: Field survey

The above table 1 presents the percentage analysis of the extent of concern of newly employed nurses for self care of patients in hospitals in Akwa Ibom State. From the result of the data analysis, it was observed that the highest percentage (50%) of the respondents affirmed that the extent of concern of newly employed nurses for self care of patients in hospitals in Akwa Ibom State is high, while the least percentage (11.11%) of the respondents stated that the extent of concern of newly employed nurses for self care of patients in hospitals in Akwa Ibom State is very low.

Research Question Two: The research question sought to find out the difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State. To answer the research question, descriptive statistics was performed on the data, (see table 2).

Table 2: Descriptive statistics of the difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State

Sex	N	Mean	SD	Mean diff.
Female	67	18.06	1.19	2.84**
Male	23	15.22	0.99	
Total	90	33.28	2.18	

****Remarkable difference**

From the above table the result proves that there is remarkable difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State, meaning that newly employed female nurses exercised more self care of the patients more than their male counterparts in hospitals in Akwa Ibom State with remarkable mean difference (2.84).

Hypothesis Testing

Hypothesis One

The Null Hypothesis states that there is no significant difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State

Table 3: Independent t-test analysis of the difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State

Sex	N	X	SD	t	Sig
Female	67	18.06	1.19	10.26	.000
Male	23	15.23	0.99		

The above table 3 presents the calculated t-value as (10.26) and P-value of .000. The P-value of (.000) being compared with the alpha level of .05 was found less and so proved that the corresponding calculated t-value (10.26) was significant. This result therefore means that there is significant difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State.

Discussion of Findings

The results of the data analyses in table 3 which sought to find the significant difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom State was significant due to the fact that the P-value of (.000) being compared with the alpha level of .05 was found less and so proved that the corresponding calculated t-value (10.26) was significant. The result therefore implies that there is significant difference in the concern of newly employed male and female nurses for self care of patients in hospitals in Akwa Ibom

State. The result was therefore in agreement with the research findings of Awa et al. (2010), who argue that newly employed nurses have concerns about their profession and the impact of their productivity. They work in a variety of settings. Although each setting carries different responsibilities, the primary goal of a professional nurse remains the same: to be the client's advocate and provide optimal care for patients (Moody, 2004). The result of the analysis caused the null hypotheses to be rejected while the alternative one was retained.

Conclusion

A nurse's health can affect the care she provides to patients. Newly recruited nurses are very concerned about job anxiety control. They perceive multiple and complex work environment factors that influence nurse and patient outcomes, including the quality of leadership and management, staffing resources, workload, job stress, and anxiety. Self-care is an avenue that can assist practicing nurses and nursing students cope with pressures that might lead to tiredness, tension, and fatigue (also known as "burnout"), such as clinical decision-making and staffing problems. Finally, self-care behavior of patients is relevant not only for preventing future health problems, such as heart disease and lung cancer, but also for mediating the course of long-term conditions of patients.

Recommendations

1. Newly employed nurses, apart from showing their patients effective care, should ensure they train the patients to be self-dependent by undergoing self-care training so as to tackle their health challenges on their own in the absence of the nurses.
2. The management should give the newly employed nurse's close supervisions and monitoring in order to ensure that they work within the scope.

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