



Research Article

Characteristics of Nurse Manager's Recognition Behavior and its Relation to Sense of Coherence of Registered Nurses

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Abstract

Background: The recognition behavior firmly impacts the job and an enormously essential factor for the restraint of burnout and the advancement of maintenance. Moreover, among inner factors that may influence workers' emotional well-being, sense of coherence (SOC) is an essential impression from the perspective of the salutogenic hypothesis and stress recognition style. **Objectives:** To determine the Characteristics of the Nurse Manager's Recognition Behavior and its Relation to Sense of Coherence of Registered Nurses. **Methodology:** The study design is quantitative cross-sectional study The questioner of Characteristics of Nurse Manager's Recognition Behavior and its Relation to Sense of Coherence of Registered Nurses was adopted from the article of Miyata, Chiharu (Miyata *et al.*, 2014). This is based on 7-point Likert scale. The data was collected from 211 nurses of Jinnah Hospital, Lahore, Pakistan. **Conclusion:** This examination uncovered that recognition behavior of nurse managers were successful in enhancing the SOC of registered nurses. Hence, recognition behavior of managers is a practical advance towards enhancing nurses' capacity to adapt to pressure and, thusly, encourage self-acknowledgment. The capacity to adapt to pressure can be helped by managers who can utilize proper acknowledgment conduct, as requested for by registered nurses. This objective can be proficient by considering singular staff individuals, profession advancement as a pro and checking on nurse manager's responsibilities.

Keywords: recognition behavior; sense of coherence; nurse manager; staff nurse

Introduction

At present, various part countries of the Organization for Economic Cooperation and Development (OECD) are standing up to genuine insufficiency of registered nurses (Miyata *et al.*, 2015). The rate of registered nurses leaving their occupation remains high. In like way, various

examinations have starting late been coordinated that consideration on shielding registered nurses from leaving their occupation. These examinations revealed that the union of nurse managers impacts the action satisfaction and upkeep of registered nurses, and what's more the idea of patient cares (Miyata *et al.*, 2015).

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Pakistan's health care sector undergoes a lot of issues regarding nurses at the workplace. These issues include the coherence among the staff as one of the major problems which ultimately affects the service quality and efficiency of the hospitals. Similarly, nurses of the public hospitals do not get recognition even after the hard work which discourage them and affect the overall patient care. This issue of recognition is quite critical in the public hospitals as the management and senior doctors do not appreciate the efforts of the nurses which create the feeling of less value. Nurse Managers assume a basic part in enhancing the workplace. Critical administration qualities for nurse managers include reflectiveness, openness, correspondence, acknowledgment, and support (Duffield *et al.*, 2011).

Even with the present lack of nurses, it is dire to get adequate HR via preparing training nurses and keeping them from leaving the profession. The significance of enhancing staff inspiration and workplaces and in this manner improving employment fulfillment as a methods for avoiding turnover and profession change has as of late been featured. One of the elements affecting workplace and occupation fulfillment is the nurse manager's management capacity; specifically, the significance of acknowledgment conduct, which is characterized as surveying nurses' performances and achievements in a solid way, has been reported (McGilton *et al.*, 2014).

The recognition direct of nurse managers is represented as clearing up evaluations with respect to execution and limit of tends, which was presented in a 38-things recognition scale lead by nurse managers (Kahya & Oral, 2018).

In the meantime, little is expected association between these supervisor's recognition behavior and staff nurses SOC. it predicted that the acknowledgment conduct direct by supervisors can help or reinforce SOC. As needs be, the inspiration driving this examination is to look into how staff nurses recognition behavior of the nurse managers and to choose the association of between these recognition behavior and the staff nurses' SOC (Miyata *et al.*, 2015).

Objective

To determine the characteristics of the nurse manager's recognition behavior and its relation to sense of coherence of registered nurses.

Literature Review

As indicated by Taunton (2015), a review of 39 hospitals results 100 percent of the registered nurses announcing that the nurse managers harsh behavior was frequently the primary factor when a registered nurse decide to leave an association, with absence of help by the prompt managers as the most referred to purpose behind clearing out (Taunton, Boyle, Woods, Hansen, & Bott, 2015).

The lack of nurses, in any case, isn't only a limited issue. Contaminate, the descending pattern is influencing medicinal care around the world. WHO appraises that the world needs to build the quantity of wellbeing laborers by in excess of four million to accomplish the worldwide wellbeing objective in 2015 set by the Millennium Development Goals. Nations like Philippines and India, which have an abundance of nursing staff, have just gained by this pattern by sending out therapeutic specialists to created nations like the United States, Canada and United Kingdom. What's more, with the correct research, arranging and venture, Pakistan has the opportunity to profit by comparable additions, both at home and abroad (Chopra *et al.*, 2009).

Nevertheless, the rate of staff nurses quite their occupation in Japan remains high (Japanese Nursing Association non-advantage affiliation, 2012). While 1,404,300 medical employees are required in Japan; only 1,348,300 nurses are at this moment in advantage. This leaves an insufficiency of around 56,000 nurses. As necessities are, various examinations have starting late been coordinated that accentuation on shielding nurses from withdrawing their occupation. These examinations revealed that the organization of administration of nurse managers impacts the action satisfaction and upkeep of staff nurses, and furthermore the idea of patient care

In any case, the rate of staff nurses very their occupation in Japan stays high (Japanese Nursing Association non-advantage alliance, 2012). While 1,404,300 therapeutic representatives are required in Japan; just 1,348,300 nurses are as of now in advantage. This leaves an inadequacy of around 56,000 nurses. As necessities seem to be, different examinations have beginning late been facilitated that highlight on protecting registered nurses from pulling back their occupation. These examinations uncovered that the association of organization of nurse managers impacts the activity fulfillment and upkeep of staff nurses, and besides the possibility of patient care (Miyata, 2014).

Methodology

The study design is quantitative cross-sectional study The questioner of Characteristics of Nurse Manager's Recognition Behavior and its Relation to Sense of Coherence of Registered Nurses was adopted from the article of Miyata, Chiharu (Miyata *et al.*, 2014). This is based on 7-point Likert scale. The data was collected from 211 nurses of Jinnah Hospital, Lahore, Pakistan. (Section 1: Demographics, Section 2: Sense of Coherence, Section 3: Recognition Behavior). The data security was ensured to the study participants. SPSS 21 was used to do the analysis of the data

Results

Demographics

Gender

Table 1 shows that 100% (211) participants were females.

Table 1: Sample distributions by gender

Gender	Frequency	Percentage
Female	211	100%
Total	211	100%

Age

Table 2 shows that n = 33 (15.6%) belong to the age group of 20-25, n = 77 (36.5%) belong to group 26-30, n = 69(32.7%) belong to the group of 31-35, n = 32(15.2%) belong to the group of 36-40. Total N = 211.

Table 2: Sample distributions by age of the male and female nurses

Age group	Frequency	Percentage
20-25 years	33	15.6%
26-30 years	77	36.5%
31-35 years	69	32.7%
36-40 years	32	15.2%
Total	211	100 %

Marital Status

Table 3 shows that n=139 (65.9%) belong to the group of married people and n= 72 (34.1%) belong to the group of unmarried people. Total N = 211

Table 3: Sample distributions by marital status

Marital status	Frequency	Percentage
Married	139	65.9%
Single	72	34.1 %
Total	211	100 %

Qualifications

Table 4 shows that the qualifications of nurses n = 117 (55.5 %) were General nursing diploma, n = 24 (11.4%) were Post RN BSN, n = 55 (26.1 %) were specialization and n =15 (7.1%) was MSN. Total N = 211.

Table 4: Sample distributions by qualification

Qualification	Frequency	Percentage
General Nursing Diploma and Midwifery	117	55.5%
BS Nursing (Post RN)	24	11.4 %
Specialization	55	26.1 %
MSN	15	7.1 %
Total	211	100 %

Job Experience

Table 5 shows that n = 17(8.1%) sample were having 1-5 year job experience, n = 81(38.4 %) were having 6-10 years job experience, n =88 (41.7 %) were having 11-15 years job experience and n = 25 (11.8 %) were having 16-20 year job experience. Total N= 211.

Table 5: Sample distributions according to job experience

Years of Experiences	Frequency	Percentage
1-5 years	17	8.1 %
6-10 years	81	38.4%
11 – 15 years	88	41.7%
16 – 20 years	25	11.8 %
Total	211	100 %

Physical Health Condition

Table 6 shows that n = 87 (41.2%) sample were having very good health, n = 115 (54.5%) were having good Health, n = 9 (4.3 %) were having bad physical health. Total N =211

Table 6: Sample distributions according to Physical Health Condition

Physical Health Condition	Frequency	Percentage
Very Good	87	41.2 %
Good	115	54.5 %
Bad	9	4.3 %
Total	211	100 %

Table 7 shows that n =12 (5.7 %) having die feeling that they don't really care about goes on around were fully disagree, n = 27 (12.8 %) were partly disagree, n =120 (56.9%) were partly agree, n =52 (24.6%) were full. Total N=211.

Table 7 shows that n = 27 (12.8%) happened in the past that surprised by the behavior of people thought they knew well were fully disagree, n = 118 (55.9%) were partly disagree, n = 32(15.2%) were partly agree and n =34 (16.1%) were full agree. Total N=211.

Table 7 shows that n =39 (18.5%) respond that it happened that people whom they counted on disappointed were fully disagree, n = 94(44.5%) were partly disagree, n =55(26.1%) were partly agree and n = 23(10.9%) were full agree. Total N = 211.

Table 7 shows that n = 88 (41.7%) nurses responded that they feel had no clear goals or purpose at all or very clear goals and purpose were fully disagree, n =65(30.8%) were partly disagree, n =37(17.5%) were partly agree and n =21 (10.0 %) were full agree. Total N = 211.

Table 7 shows that n = 24(11.4 %) nurses having feeling that they are being treated unfairly were fully disagree, n =28 (13.3 %) were partly disagree, n =73 (34.6%) were partly agree and n= 86 (40.8%) were full agree. Total N = 211.

Table 7 shows that n =51(24.2 %) nurses having die feeling that they are in an unfamiliar situation and don't know what to do were fully disagree, n =94(44.5%) were partly disagree, n =39(18.5%) were partly agree and n =27(12.8 %) were full agree. Total N = 211.

Table 7 shows that n = 33(15.6 %) nurses doing the things every day is a source of deep pleasure and satisfaction or a source of pain and boredom were fully disagree, n=51 (24.2%) were partly disagree, n =50 (23.7%) were partly agree and n =77 (36.5 %) were full agree. Total N = 211.

Table 7 shows that n =26(12.3%) nurses responded that they have very mixed-up feelings and ideas were fully disagree, n =58 (27.5 %) were partly disagree, n =104 (49.3%) were

partly agree and n = 23 (10.9 %) were full agree. Total N = 211.

Table 7 shows that n = 96 (45.5 %) nurses were responded that it happen that nurses have feelings inside would rather not feel were fully disagree, n = 39(18.5%) were partly disagree, n = 30 (14.2%) were partly agree and n = 46(21.8 %) were full agree. Total N = 211.

Table 7 shows that n =51(24.2%) nurses were responded that even those with a strong character sometimes feel sad sacks (losers) in certain situations. How often have you felt this way in the past were fully disagree, n = 94(44.5%) were partly disagree, n =40(19.2%) were partly agree and n =26 (12.3%) were fully agree. Total N = 211.

Table 7 shows that n =64 (30.3%) nurses were responded that when something happened, have nurses generally found overestimated or underestimated its importance or saw things in the right proportion were fully disagree , n =21 (10.0%) were partly disagree, n =50 (23.7%) partly agree and n = 76 (36.0%) were full agree. Total N = 211.

Table 7: Sense of Coherence questioner analysis

S. N.	Statement	FD f (%)	PD f (%)	PA f (%)	FA f (%)
1	Do you have die feeling that you don't really care about what goes on around you?	12(5.7%)	27(12.8%)	120(56.9%)	52(24.6%)
2	Has it happened in the past that you were surprised by the behavior of people whom you thought you knew well?	27(12.8%)	118(55.9%)	32(15.2%)	34(16.1%)
3	Has it happened that people whom you counted on disappointed you?	39(18.5%)	94(44.5%)	55(26.1%)	23(10.9%)
4	Until now your life has had no clear goals or purpose at all or very clear goals and purpose?	88(41.7%)	65(30.8%)	37(17.5%)	21(10.0%)
5	Do you have the feeling that you're being treated unfairly?	24(11.4%)	28(13.3%)	73(34.6%)	86(40.8%)
6	Do you have die feeling that you are in an unfamiliar situation and don't know what to do?	51(24.2%)	94(44.5%)	39(18.5%)	27(12.8%)
7	Doing the things you do every day is: a source of deep pleasure and satisfaction or a source of pain and boredom?	33(15.6%)	51(24.2%)	50(23.7%)	77(36.5%)
8	Do you have very mixed-up feelings and ideas?	26(12.3%)	58(27.5%)	104(49.3%)	23(10.9%)
9	Does it happen that you have feelings inside you would rather not feel?	96(45.5%)	39(18.5%)	30(14.2%)	46(21.8%)
10	Many people even those with a strong character sometimes feel sad sacks (losers) in certain situations. How often have you felt this way in the past?	51(24.2%)	94(44.5%)	40(19.0%)	26(12.3%)
11	When something happened, have you generally found that you overestimated or underestimated its importance or you saw things in the right proportion?	64(30.3%)	21(10.0%)	50(23.7%)	76(36.0%)
12	How often do you have die feeling that there's little meaning in the things you do in your daily life?	30(14.2%)	41(19.4%)	57(19.4%)	83(39.3%)
13	How often do you have feelings that you're not sure you can keep under control?	23(10.9%)	20(9.5%)	94(44.5%)	74(35.1%)

Table 7 shows that n =30 (14.2%) nurses were responded that How often nurses have died feeling that there's little meaning in the things do in daily life were fully disagree, n =41(19.4%) were partly disagree, n =57 (27.0%) were partly agree and n =83 (39.3%) were full agree. Total N = 211.

Table 7 shows that n =23(10.9%) nurses were responded that how often nurses have feelings that they are not sure can keep under were fully disagree, n =20(9.5%) were partly disagree, n =94 (44.5%) were partly agree and n =74(35.1%) were fully. Total N = 211.

Table 8: Recognition Behavior analysis questionnaire

S. N.	Statement	TD <i>f</i> (%)	SD <i>f</i> (%)	D <i>f</i> (%)	UC <i>f</i> (%)	A <i>f</i> (%)	SA <i>f</i> (%)	TA <i>f</i> (%)
1	Achievements of nurses are posted on the bulletin board.	(14) 6.6%	(27) 12.8%	(16) 7.6%	(12) 5.7%	(24) 11.4%	(59) 28.0%	(59) 28.0%
2	Achievements are announced in hospital newsletter.	21 10.0%	20 9.5%	29 13.7%	13 6.2%	22 10.4%	57 27.0%	49 23.2%
3	The nurse manager accepts the work which was excellent in the staff, and tells out of a ward.	9 4.3%	20 9.5%	15 7.1%	30 14.2%	39 18.5%	27 12.8%	71 33.6%
4	Senior nursing management receives a letter from the nurse manager regarding the staff nurse's performance.	8 3.8%	14 6.6%	10 4.7%	16 7.6%	70 33.2%	65 30.8%	28 13.3%
5	Certification in an area of specialty nursing is acknowledged by a pay raise.	19 9.0%	27 12.8%	16 7.6%	16 7.6%	28 13.3%	42 19.9	63 29.9%
6	The nurse manager evaluates the staff by work.	27 12.8%	23 10.9%	39 18.5%	17 8.1%	29 13.7%	19 9.0%	57 27.0%
7	The staff nurse is recommended by the nurse manager as an expert speaker.	13 6.2%	12 5.7%	10 4.7%	43 20.4%	51 24.2%	56 26.5%	26 12.3%
8	Senior nursing management receives regarding the staff nurse's performance	25 11.8%	27 12.8%	11 5.2%	14 6.6%	48 22.7	41 19.4%	45 21.3
9	Respect job schedule preferences	20 9.5%	31 14.7%	34 16.1%	18 8.5%	31 14.7%	35 16.6%	42 19.9%
10	Helps the staff's job, when busy.	16 7.6%	46 21.8%	31 14.7%	28 13.3%	17 8.1%	34 16.1%	39 18.5%
11	How to use the time under service to the staff.	11 5.2%	18 8.5%	7 3.3%	9 4.3%	51 24.2%	61 28.9%	54 25.6%
12	Preference for selection of hours is given to the nurse.	18 8.5%	33 15.6%	22 10.4%	16 7.6%	41 19.4%	32 15.2%	49 23.2%
13	Nurse manager meets with the staff nurse to discuss patient care and career goals.	30 14.2%	43 20.4%	49 23.2%	27 12.8%	30 14.2%	19 9.0%	13 6.2%
14	The nurse manager consults with the staff nurse on important decisions.	24 11.4%	34 16.1%	50 23.7%	27 12.8%	32 15.2%	25 11.8%	19 9.0%
15	The nurse manager provides on-the-job feedback for care given.	11 5.2%	26 12.3%	47 22.3%	29 13.7%	40 19.0%	24 11.4%	34 16.1%
16	Time and support are given to develop booklet describing the services the nurse provide on the unit.	29 13.7%	36 17.1%	10 4.7%	29 13.7%	38 18.0	44 20.9%	25 11.8%
17	Patient evaluations that compliment individual nurses on the unit are posted on the bulletin board.	71 33.6%	44 20.9%	41 19.4%	8 3.8%	21 10.0%	15 7.1%	11 5.2%
18	Staff nurses are asked to represent the unit at hospital meeting.	0 0%	14 6.6%	35 16.6%	38 18.0%	37 17.5%	44 20.9%	43 20.4%
19	Staff nurses are selected as presenters for new employees.	23 10.9%	41 19.4%	13 6.2%	18 8.5%	44 20.9%	33 15.6%	39 18.5%
20	Staff nurses encouraged to participate in professional activities at local and National level.	23 10.9%	24 11.4%	27 12.8%	27 12.8%	35 16.6%	25 11.8%	50 23.7%
21	The nurse manager asks the staff nurse to participate in planning for the Unit.	28 13.3%	17 8.1%	17 8.1%	10 4.7%	39 18.5%	52 24.6%	48 22.7%
22	A day off with pay is given to attend a workshop.	22 10.4%	24 11.4%	24 11.4%	27 12.8%	7 3.3%	44 20.9%	63 29.9%
23	The contribution from a patient to the staff sent to Senior Nursing Director.	16 7.6%	31 14.7%	55 26.1%	23 10.9%	40 19.0%	21 10.0%	25 11.8%
24	A copy of complimentary patient evaluations sent to Senior Nursing Director.	19 9.0%	18 8.5%	50 23.7	45 21.3%	14 6.6%	42 19.9%	23 10.9%

The first question of Table 8 is "Achievements of nurses are posted on the bulletin board" 67.0 % respondents give positive response that achievements of nurses are posted on the bulletin board while 5.7 % are uncertain and 27% respondents believes that achievements of nurses are not posted on the bulletin board. Second question is about Achievements are announced in hospital newsletter. 64.9% respondents are agreed that their achievements are announced in hospital newsletter while 14.2% are uncertain and 33.2% respondent's believes that their achievements are not announced in hospital newsletter. When respondents were asking about their nurse manager accepts the work which was excellent in the staff, and tells out of a ward. 77.3% % respondents give positive response while 7.6% were uncertain and 15.1% were respondents about their nurse manager did not accepts the work which was excellent in the staff, and tells out of a ward. When ask about " nurse manager evaluates the staff by work". 49.7% respondents were give positive response on the nurse manager evaluates the staff by work, while 8.1 were uncertain and 42.2% were responded that the nurse manager should not evaluates the staff by work. "Senior nursing management receives regarding the staff nurse's performance" 63.4% respondents were give positive feedback that Senior nursing management receives regarding the staff nurse's performance, while 6.6% were uncertain and 29.8% were respondents that Senior nursing management not receives regarding the staff nurse's performance. When ask about the Respect job schedule preferences 51.2% were responded that Respect job schedule preferences, while 8.5% were uncertain and 40.3% were responded that do not Respect job schedule preferences. When asked about Helps the staff's job, when busy. 42.7 % responded positive helps the staff's job, when busy while 13.3% were uncertain and 44.1% were not agree. Respondents were asking about the Preference for selection of hours is given to the nurse. 57.8% were agreeing while 7.6% were uncertain and 57.8% were not agreeing about the Preference for selection of hours is given to the nurse. When the Staff nurses are asked to represent the unit at hospital meeting 58.5% were agree that the Staff nurses are asked to represent the unit at hospital meeting while 18.0% were uncertain and 23.2% were not agree about Staff nurses are asked to represent the unit at hospital meeting. When we were asked about a day off with pay is given to attend a workshop from nurses 54.1% were responded positive feedback about the day off with pay is given to attend a workshop while 12.8% were uncertain and 33.2% were not agreeing a day off with pay is given to attend a workshop. A copy of complimentary patient evaluations sent to Senior Nursing Director. 37.4% respondents give positive feedback about the copy of complimentary patient evaluations sent to Senior Nursing Director while 21.3% were uncertain and 41.2% were not agree in giving A copy of complimentary patient evaluations sent to Senior Nursing Director.

Table 9 Cronbach's alpha scale is commonly used to analysis the reliability. It is simple and easier method to measure the reliability

Cronbach's alpha scale is generally used to investigation the reliability. It is straightforward and less demanding technique to measure the reliability (Tavakol & Dennick, 2011)

Table 9: Reliability of Sense of Coherence and recognition Behavior

Variable of study	No. of items	Cronbach's alpha
Sense of Coherence	13	-.529
Recognition Behavior	24	.863

Cronbach's alpha is -0.529 consider more acceptable values indicator of internal consistency reliability(Enshassi, Al Swaity, & Arain, 2016). The variable sense of coherence having Cronbach's alpha value is -0.529 and second variable recognition behavior having Cronbach's alpha value 0.863 are more than -0.529 that is near to 1 and it shows that these variables are strongly reliable.

Validity

Convergent was built up by applying factor investigation. Factor investigation was performed by utilizing guideline segment examination with varimax turn. Every one of the measurements was examined by performing factor examination

Table 10 shows that significant results which confirmations that validity is authentic.

Table 10: KMO Bartlett's analysis Test
KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.835
Bartlett's Test of Sphericity	Approx. Chi-Square	8025.993
	Df	276
	Sig.	.000

Table 6 shows that 12.1% of total variation in the sense of coherence is explained by the nurse's recognition behavior which shows that the significant as .000 values.

Table 7 shows that the current study model is significant. Therefore, the current study model is fit. Dependent and independent variable shows the strong relationship. ANOVA test is the suitable to analyze the dependent and independent variables as in this study Independent variable is Recognition behavior and dependent variable is sense of coherence.

Table 11: Model Summary

Model Summary									
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.348 ^a	.121	.117	.213	.121	28.718	1	209	.000

a) Predictors: (Constant), Recognition Behaviour

Table 12: ANOVA

ANOVA ^a						
Model		Sum of Squares	Df	Mean Square	F	Sig.
	Regression	1.308	1	1.308	28.718	.000 ^b
1	Residual	9.519	209	.046		
	Total	10.828	210			

a. Dependent Variable: Sense of Coherence

a. Predictors: (Constant), Recognition Behavior

Table 13: Coefficients

Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	2.181	.071		30.879	.000
	Recognition Behavior	.084	.016	.348	5.359	.000

a. Dependent Variable: Sense of Coherence

Table 8 shows that the change of one unit of recognition behavior causes the change of 0.084 values in the sense of coherence as well shows that if change the independent variable then variations occur. Moreover, dependent variable also changes variations as these variables are directly proportional to each other.

Discussion and Conclusion

A total of 211 nurses participated in this study. Of those, 100% (n=211) were women. Regarding professional work experience, 8.1% (n=17) had 1-5 years of nursing experience, 38.4% (n=81) had 6-10 years of nursing experience, 41.7% (n=88) had 11-15 years of nursing experience and 11.8% (n=25) had 16-20 years of nursing experience. Most were staff nurses (n=88; 41.7%). Their academic backgrounds included associate general nursing diploma and midwifery (n=117; 55.5%), BS Nursing (Post RN) (n=24; 11.4%), Specialization (n=55; 26.1%), and MSN (n=12; 7.1%). 41.2% (n=87) had very good physical

health, and 54.5% (n=115) had good mental health (Table 1).

Atwater *et al.* (2007) recommended that positive input urges nurses to wind up certain and self-sufficient, keeping the people who perform all around persuaded. The activities of individuals are driven by a craving to satisfy their necessities or inspirations. Every individual's business related inspiration and volition is created from his or her longing to add to society. Along these lines, it is vital to express a steady enthusiasm for the activities of each staff part, to help their development and advancement, to have desires for every person, and to give people constructive input. Moreover, "proficient improvement," is additionally essential. Registered Nurses' expert improvement identifies with aptitudes and learning that are obtained for professional success. The nursing workplace is quickly changing and nurses should continually refresh their expertise to improve effectively. In addition, nursing initiative has a capacity to assess and aid the arranging and

ID of the preparation needs of (Pencheon, 2013). Thus in this investigation gives fundamentally data that Nurse supervisors can make the working environment intriguing, engaging registered nurses to invest additional exertion and enhance execution.

Thus, the opportunity for promotion or advancement is limited. Nurses maintain the same position for a long period of time, which can decrease motivation in the mid- to later years of employment. Furthermore, the rotation of staff every few years changes the workplace and can inhibit the development of an individual's career.

In this way, the open door for advancement or progression is restricted. Nurses keep up a similar position for a drawn out stretch of time, which can diminish inspiration in the mid-to later years of business. Moreover, the revolution of staff at regular intervals changes the working environment and can hinder the improvement of a person's vocation.

Therefore, nurse managers can help staff nurses by using their recognition behaviors to identify the negative experiences of staff nurses and by helping the staff nurses cope with these negative experiences. A significant difference was observed between SOC and marital status, age and years of nursing experience. This indicated that growth as a member of society, clinical experiences, and mental and physical health conditions affected the SOC score. This difference supports the theory of earlier studies (Togari *et al.*, 2008), we found relation between SOC and "Overall work experience," "good physical health status," "good mental health status," and "recognition behavior." This result supports Antonovsky's (1987) that work environment leads to the formation of SOC. Sense of Coherence can improve staff performance, and staff nurses with a high SOC can support those with a low SOC, increasing the overall SOC of the workplace through mutual interaction. Kageyama (2003) reported that rather than being evaluated by patients, it is important to be recognized by colleagues such as nurse managers and senior nursing director, which can be entrusting responsibility and increasing work discretion lead to improved SOC of staff nurses. Specific recognition behaviors by nurse managers improve staff nurse SOC and provide mental health support for staff nurses.

Subsequently, nurse managers can help staff nurses by utilizing their recognition behavior to distinguish the negative encounters of staff nurses and by helping the registered nurses adapt to these negative encounters. A critical contrast was seen amongst SOC and conjugal status, age and years of nursing knowledge. This showed development as an individual from society, clinical encounters, and mental and physical wellbeing conditions influenced the SOC score. This distinction underpins the hypothesis of prior examinations (Togari *et al.*, 2008), we discovered connection amongst SOC and "General work

involvement," "great physical wellbeing status," "great psychological wellness status," and "acknowledgment conduct." This outcome bolsters Antonovsky's (1987) that workplace prompts the development of SOC. Feeling of Coherence can enhance staff execution, and staff nurses with a high SOC can bolster those with a low SOC, expanding the general SOC of the working environment through shared association. Kageyama (2003) detailed that as opposed to being assessed by patients, it is essential to be perceived by partners, for example, nurse managers and senior Registered nurses, which can be entrusting obligation and expanding work caution prompt enhanced SOC of staff nurses. Particular recognition behavior by nurse managers enhance staff nurses SOC and give emotional wellness support to staff nurses.

This examination uncovered that recognition behavior of nurse managers were successful in enhancing the SOC of registered nurses. Hence, recognition behavior of managers is a practical advance towards enhancing nurses' capacity to adapt to pressure and, thusly, encourage self-acknowledgment. The capacity to adapt to pressure can be helped by managers who can utilize proper acknowledgment conduct, as requested for by registered nurses. This objective can be proficient by considering singular staff individuals, profession advancement as a pro and checking on nurse manager's responsibilities.

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