



# Impact Of Work Place Environment and Organisation on Nurses Attitudes Towards Patient Care in Nigerian Hospital. A Cross-Sectional Study of David Umahi Federal University Teaching Hospital Uburu.

Felix Edoiseh Ehidihamhen<sup>1</sup>, Ozioma Oluchi Nwafulundu<sup>2</sup>, Agu Precious<sup>3</sup>, Iteshi Onyekachi<sup>3</sup>, Agom Emmanuel Agom<sup>3</sup>, Eze Patience Ume<sup>3</sup>,

<sup>1</sup>. Department of Anatomic Pathology, Faculty of Basic clinical sciences, David Umahi Federal University of Health Sciences, Uburu.

<sup>2</sup>. Department of Maternal and child health nursing, David, Umahi Federal University of Health Sciences, Uburu.

<sup>3</sup>. Nursing services department, David Umahi Federal University Teaching Hospital, Uburu.

DOI: <https://doi.org/10.51244/IJRSI.2026.1306000182>

Received: 04 June 2026; Accepted: 09 June 2026; Published: 29 June 2026

## ABSTRACT

**Background:** Nursing care involves both technical or medical and emotional aspects of care for a patient attending a healthcare facility whether admitted or not and attributes of caring includes, attitudes, actions, relationships, acceptance and variability in around the hospital facility, therefore, uncaring attributes as noted to be being disinterested, insensitive, cold and inhuman act. Patient satisfaction is the degree to which the patient's desired expectations, goals and or preferences are met by the health care provider and or service. Poor patient satisfaction has been related to some undesirable details and serious hospital management should be concerned about patient satisfaction in the facility they manage. Despite the compelling environment we work and the increasing patient dissatisfaction in many health facilities, studies has remained very scarce on the factors that impact positively and negatively on nurses' attitude towards patient care in our teaching Hospital. Nurses and other health workers frequently work in environments with insufficient medical supplies, outdated equipment, and poor sanitary conditions due to a lack of adequate essential resources [18], this is largely due to poor attitudes of policy makers and politicians towards healthcare

Poor nursing care in many situations comes as a result of different challenges faced. In countries with low development skills, nurses face a greater challenge as a result of inadequate equipment, thereby exposing patients to more harm, and patients find it difficult to come to the hospital

**Aims & Objectives:** To explore the impact of work place environment and organization on nurses' attitudes towards patient care in David Umahi Federal University Teaching Hospital, Uburu

**Methodology:** The study used a descriptive cross-sectional analysis to study and analyse the impact of work place environment and organization on nurse's attitudes towards patient care in David Umahi Federal University Teaching Hospital, Ubu. The selected design is appropriate as it involves collecting data in order to analyse the relevant factors mitigating against nurses' attitude. The quantitative approach will be involved the use of semi-administered questionnaires by Nursing staffs who were involved in patients care within the facility. These questionnaires will examine patients work load, management influence, nurses job satisfaction, behaviour of patients and availability of medical resources and how they influence or affect nurses' attitude towards patients' quality care.

**Result:** Factors contributing positive and negatively to Nurses' attitude towards patient care, respondent reports are as follows: On heavy workload reduces the quality of nurses' interaction with patient: 27.8% (44) strongly agree while 20.3% (32) agree. 15.2% (24) stayed neutral while 15.2% (24) disagree and 15.8% (25) strongly disagree. On hospital management support influences how, nurses treat patients: 20.9%(33) strongly agree while



19.6% (31) agree. 22.2% (35) stayed neutral while 20.3% (32) disagree and 15.8% (25) strongly disagree. On Nurses job satisfaction affects their attitude towards patient care: 20.3% (32) strongly agree and 20.9% (33) agree. 23.4% (37) stayed neutral and 18.4% (29) disagree while 17.1% (27) strongly disagree. On behavior of patients influences how nurses interact with them: 27.8% (44) strongly agree and 24.7% (39) agree. 27.8% (44) stayed neutral and 19.6% (31) disagree. On availability of medical resources affects how nurses perform their duties: 31.6% (50) strongly agree and 25.9% (41) agree. 23.4% (37) stayed neutral while 19.0% (30) strongly disagree.

**Conclusion:** Poor working conditions can have an adverse impact on the nurse's attitude and interactions to patient care in the hospitals, The most common detrimental effects of this is poor health outcome and decrease quality of healthcare for our teaming patients in the hospital. Organization's effectiveness, improved work environment and adequate remuneration, incentives and effective reward system coupled with reduced workload are part of the necessary strategies an employers should consider their implementation which are beneficial to both employees and the health organization. This is important because hospital workers face a variety of highly stressful working conditions while meeting the physical and psychological needs of patients

## INTRODUCTION

Nurses are known for display of attributes of respect, compassion, wisdom, sensitivity and care towards patients in and outside the hospital [1] and this care is characterized by expert nursing, interpersonal sensitivity and intimate relationships [2]. Nursing care involves both technical or medical and emotional aspects of care for a patient attending a healthcare facility whether admitted or not. Brilowski and Wendler [3] acknowledged emotional and technical aspects of caring by listing attributes to caring as attitudes, actions, relationships, acceptance and variability in around the hospital facility. Therefore, uncaring attributes as noted to be being disinterested, insensitive, cold and inhuman act [4].

Providing high quality care involves doing the right thing at the right time, and improving health outcomes for patients, families and communities [5]. Unfortunately, this does not always happen these days due to some certain factors involving the work environment and organizational effects mitigating against nursing care in the hospital. Patient satisfaction is the degree to which the patient's desired expectations, goals and or preferences are met by the health care provider and or service [6]. Poor patient satisfaction has been related to some undesirable details and serious hospital management should be concerned about patient satisfaction in the facility they manage. A survey done in Enugu to determine patients' overall satisfaction with quality of general services and specifically with staff attitude and hospital environment while on admission to a teaching hospital in Enugu, Southeast Nigeria documented poor healthcare delivery and greater negative impact on recovery of patients by uncaring attitudes of nurses [7][8]. Other researchers found poor care provided for specific illnesses, such as HIV and Hepatitis C among other diseases [9][10], which was related to poor health worker attitudes.

Health workers' attitudes affect behavior, quality of care and health outcomes [11]. Negative attitudes affect care with elderly patients most especially and dependent patients [12] and other vulnerable patients [13].

Nursing process requires steps that constitute a dynamic and organized approach. These include; information; Problem identification, planning; Implementing appropriate procedures for the patient, and evaluating the effect [14]. These basis of nursing activities are interconnected steps that gradually form a continuous circle centered on the problems the patient suffers from and centered on achieving the goal of providing care rationally and systematically [14]. Quality nursing care improves patient's condition, return him or her to society more quickly, and decrease the rate of readmission to the hospital [14]. This brings about job satisfaction for the nurses and satisfaction for the patients as well. Therefore, healthcare facilities are concerned in maintaining high levels of patient satisfaction in order to stay competitive in the healthcare industry [15].

Nurses may have positive or negative attitudes toward nursing patients. These negative attitudes may have implications for both nurse and patient. Nurses may feel inadequate and anxious and frustrations are sometimes improperly expressed to colleagues [16]. Burn out syndrome which can be in form of emotional exhaustion, depersonalization, and a diminished sense of personal accomplishment are frequently observed as negative effect on of chronic workplace stress [17].



Correlating factors to nurse burnout can be younger age, male sex, single or divorced marital status, not having children, low staffing levels, sleep problems, depression and workplace violence and these can be controlled by job control and proper schedule, social support and nurse empowerment [17]. The effect of nurses burn out can affect quality healthcare, patients safety, patients satisfaction morbidity and mortality [17]. It is revealed that sick people die because of a nurse's incompetence and carelessness, whereby the aging group needs critical care. Furthermore, deaths among children under 5 years of age are linked to nurses' carelessness [18]

One of the primary burdens faced by nurses in Cameroon as well as many other African countries including Nigeria is the high patient load. The nurse to-patient ratio is often inadequate, leading to overworked nurses who must manage multiple patients simultaneously [18]. WHO recommended that the nurse-to-population ratio be 1:500, but in many parts of Cameroon, this ratio is far exceeded (WHO, 2023). Furthermore, Nurses and other health workers frequently work in environments with insufficient medical supplies, outdated equipment, and poor sanitary conditions due to a lack of adequate essential resources [18], this is largely due to poor attitudes of policy makers and politicians towards healthcare

Poor nursing care in many situations comes as a result of different challenges faced. In countries with low development skills, nurses face a greater challenge as a result of inadequate equipment, thereby exposing patients to more harm, and patients find it difficult to come to the hospital [18].

Possible reasons for the poor behavior of nurses in patient care is due to high workload and stress, lack of resources and limited support from their colleagues, poor communication, lack of respect from the patient, organization culture, nurses having personal issues with patients, lack good education and training of the concept of patient care, inadequate nurses, poor management, and lack of adequate infrastructure, and lack of job satisfaction in healthcare [18]

Despite the compelling environment we work and the increasing patient dissatisfaction in many health facilities, studies has remain very scarce on the factors that impact positively and negatively on nurses attitude towards patient care in our teaching Hospital. Therefore, it is pertinent to know how our nurses treat patients and how often do their attitudes impact positively or negatively on patient recovery process as well as the various factors affecting their attitudes in our health facilities.

This study explored the impact of work place environment and organization on nurses attitudes towards patient care in David Umahi Federal University Teaching Hospital, Uburu

### **Statement of the Research Problem**

The attitude of nurses significantly impacts the quality of patient care in healthcare settings. Positive attitudes among nurses are associated with enhanced patient satisfaction, improved clinical outcomes, and overall better patient experiences. Conversely, negative attitudes can lead to patient dissatisfaction, increased anxiety, poor adherence to treatment plans, and adverse health outcomes. Many healthcare facilities struggle with issues such as staff burnout, inadequate communication skills, and lack of emotional support, which can adversely affect nurses' attitudes towards patients. This gap in understanding hampers the development of effective strategies to foster positive attitudes among nurses and improve patient care outcomes.

the impact of work place environment and organization on nurses attitudes towards patient care in David Umahi Federal University Teaching Hospital, Uburu

### **The Aim of the Study**

The aim of the study was to explore the impact of work place environment and organization on nurses attitudes towards patient care in David Umahi Federal University Teaching Hospital, Uburu

The objectives of the study were to explore the

- i. The impact of work place environment and organization on nurses attitudes towards patient care in David Umahi Federal University Teaching Hospital, Uburu



- ii. To determine the social Demography of the participants.

## **Significance of the Study**

## **METHODOLOGY**

### **Research Design**

The study used a descriptive cross-sectional analysis to study and analyse the impact of work place environment and organization on nurses' attitudes towards patient care in David Umahi Federal University Teaching Hospital, Uburu. The selected design is appropriate as it involves collecting data in order to analyse the relevant factors mitigating against nurse's attitude.

The quantitative approach will be involved the use of semi-administered questionnaires by Nursing staffs who were involved in patients care within the facility. These questionnaires will examine patients work load, management influence, nurses job satisfaction, behaviour of patients and availability of medical resources and how they influence or affect nurses' attitude towards patients quality care.

### **Population of the Study**

The population for this study comprises of Nurses who are employed by David Umahi Federal University Teaching Hospital and who are tasked with patients care in DUFUTH.

### **Sampling Technique and Sample Size**

Convenience sampling method was used by applying questionnaires on the all the numbers of nurses employed in David Umahi Federal University Teaching Hospital.

### **Data Collection Instruments**

The study used primary data collected through a semi-structured questionnaire to collect information for quantitative analysis.

The questions of assessed includes heavy workload reduces the quality of nurse's interaction with patient, Hospital management supports influences how nurses treat patients, Nurses job satisfaction affects their attitude towards patient care, behavior of patient influences how nurses interact with them and availability of medical resources affects how nurses perform their duties. Response includes whether they agree, disagree, and or staying neutral to each question asked. These bothers mainly on workload factors, hospital management factors, job satisfaction factors, patients factor and resource availability factors.

### **Validity and Reliability of Research Instruments**

The reliability of the instrument used was assessed through a pilot study.

### **Method of Data Analyse**

Statistical package for social sciences (SPSS) version 26.0 (Chigaco) was used for data analyses. This involves descriptive analysis using tables and chart forms.

## **RESULTS**

Total number of participants are 158 nurses with male and female distribution of 70(44.3%) and 88 (55.9%) respectively.



## Demographic Information

**Table 1 showing gender distribution and Participants roles in the Hospital:**

Gender	frequency	percentage
Female	88	55.6
Male	70	44.3
Total	158	100

## Age range distribution

Highest percentage of participants were found among agrees 36-45 and 40 years and above, both had frequencies of 25.3% (40) respectively. Ages 18-25years has a frequency of 22.2% (35) while ages 26-35years had distribution of 27.2% (43).

**Table 2: showing age distribution of participants**

Age range in years	Frequency	Percentage
18-25	35	22.2
26-35	43	27.2
36-45	40	25.3
46 and above	40	25.3
Total	158	100

## Qualification

Among the nurses participants, 37.3% (59) has diploma (RN, single qualified) certificate while 35.4% (56) had bachelor degree in nursing. 27.3% (43) had masters in nursing.

**Table 3: Showing the qualification of participants**

Qualification	frequency	percentage
Diploma in Nigeria	59	37.3
Bachelor's Degree in Nursing	56	35.4
Master's Degree in Nursing <sup>5</sup>	43	27.3
<b>TOTAL</b>	<b>158</b>	<b>100</b>

## Years of experience

Nurses with experience of less than 1 year stood at 25.3% (40) while 1-5years of nursing experience stood at 28.5%(45). Nurses with 6-10 years of experience stood at 25.7% (39) .Nurses with greater than 10 years experience stood at 21.5% (34)



Tabale 4: Showing the years of experience of the participants

years	frequency	percentage
Less than 1 year	40	25.3
1-5 years	45	28.5
6-10	39	24.7
Above 10years	34	21.5
TOTAL	158	100

### Factors contributing positive and negatively to Nurses' attitude towards patient care

**Heavy workload reduces the quality of nurse's interaction with patient:** 27.8% (44) strongly agree while 20.3%(32) agree. 15.2% (24) stayed neutral while 15.2% (24) disagree and 15.8% (25) strongly disagree.

**Hospital management support influences how nurses treat patients:** 20.9% (33) strongly agree while 19.6%(31) agree.22.2%(35) stayed neutral while 20.3% (32) disagree and 15.8% (25) strongly disagree.

**Nurses job satisfaction affects their attitude towards patient care:** 20.3%(32) strongly agree and 20.9% (33) agree. 23.4% (37) stayed neutral and 18.4% (29) disagree while 17.1% (27) strongly disagree.

**Behavior of patients influences how nurses interact with them:** 27.8%(44) strongly agree and 24.7% (39) agree. 27.8% (44) stayed neutral and 19.6%(31) disagree.

**Availability of medical resources affects how nurses perform their duties:** 31.6% (50) strongly agree and 25.9%(41) agree. 23.4% (37) stayed neutral while 19.0%(30) strongly disagree.

Table 5: showing various response on factors that affect Nurses attitude towards patients care

Statement	Strongly Agree	Agree	Neutral	Disagree	Strongly disagree
1. Heavy workload reduces the quality of nurses 'interaction with patient.	44(27.8%)	32(20.3%)	33(20.9%)	24(15.2%)	25(15.8%)
2. Hospital management support influences how nurses treat patients.	33(20.9%)	31(19.6%)	35(22.2%)	32(20.3%)	25(15.8%)
3. Nurses' job satisfaction affects their attitude towards patient care.	32(20.3%)	33(20.9%)	37(23.4%)	29(18.4%)	27(17.1%)
4. The behavior of patients influences how nurses interacts with them.	44(27.8%)	39(24.7%)	44(27.8%)	31(19.6%)	
5. Availability of medical resources affects how nurses perform their duties.	50(31.6%)	41(25.9%)	37(23.4%)	0	30(19.0%)



## DISCUSSION

The environmental and organization factors have ability to impact on nurses attitude and as studied in this research are heavy workload, hospital management support, nurses job satisfaction, behavior of patients and availability of medical supplies. On the heavy workload, 48.1%(76) of the participants agreed that increase work load is a major impact on the nurses attitude towards patients. However, 31% of participants disagree with this while 15.2%(24) stayed neutral. Similar study done in Cameroon identified high workload as a major cause of negative attitude by nurses towards patients up to 70.5%(918) [18]. For example, in Pakistan, Nurses working in acute care settings showed slightly more negative attitudes compared to those in psychiatric units [19], buttressing the fact that department of work in response to the work load affects nurses attitude negatively. On the contrary in Ethiopia, variable factors different from just increase workload alone were identified and these included, being working in a primary hospital, poor cooperation of fellow nurses, being unsatisfied with the job, and poor perceived supervision of work. These were factors associated with nurses' attitudes towards patient advocacy [20]

A reasonable percentage of 40.5% (64) in combination agreed that hospital management support influences how nurses treat patients, however, 36.1%(57) disagree with this why 22.2% (35) abstained from answering this question. It is a fair agreement that management and organizational behavioral role and structure influence heavily on nurses attitude as every dedicated nurses requires the support of the management to function properly. Similarly, 52.5%(83) participants equally agree that behavior of patients and patients relatives influences the nurses interactions with patients. 19.0%(30) disagree while 23.4%(37) stayed neutral. Similar research in south Africa reported nurses staff shortages, high patient loads, absenteeism, and poor interpersonal communication. Nurses blamed sub-standard nursing care on the attitudes of patients or patients' relatives, as well as on lack of management support [21] and in Turkey it was documented that negative experiences with patients or their relatives affected nursing students attitudes and behaviors toward caring Nurse-Patient Interaction Scale [22]. In Netherland, A literature review conducted to elucidate the factors underlying the different attitudes of nurses in general health care toward the nursing care of these patients recorded majorly, lack of knowledge, skills, and additional training with respect to dealing with patients with comorbid mental illness were frequently mentioned as a cause of negative attitudes although their exact relationships remained unclear [16]. A holistic nursing vision, support, and older age were described as having a positive influence on a positive attitude, and workload was described as having a negative influence respectively [16]

Other notable factors that impact on nurses attitude are nurses job satisfaction which had 41.2%(65) agree, 35.5%(56) disagree while 23.4(37) stayed neutral and availability of resources impacting on nurses attitude, 57.5%(91) 19.0% (30) disagree while 23.4(37) stayed neutral. In Ethiopia, unsatisfactory jobs formed a major draw back for nurses [22]. Similarly in Ekiti, nurses had low degree of job satisfaction while only few nurses (3.1%) reported high degree of satisfaction with job. A significant positive strong correlation was found between overall work environment and the general job satisfaction of the nurses ( $r = 0.55$ ,  $p < 0.01$ ) in Ekiti study [23]. Suggestions for improvement include Provisions of modern equipment for work and increment/prompt payment of salary serving as the most prominent factors in work environment that the nurses perceived as capable of increasing their job satisfaction (54.7% and 49.7% respectively) [23]. In Kogi, results from data indicated that long hour duties among nurses (115), shortage of manpower (100) and working with new and inexperienced nurses (95) is the main causes of workload in Federal Teaching Hospital Lokoja, Kogi State and the impact of workload among nurses in Federal Teaching Hospital, Lokoja is error of omission and malpractice (80) and the coping strategies is taking a shower and rest in a quiet environment (70), going for a break (40), engaging in hobbies such as singing (20) and watching television, movies and engage in social media (50) [24]. It was established from the research that workload affect output, quality of work which can lead to client dissatisfaction of nurses. Therefore, It was concluded that workload has negative relation with the performance of nurses. It has also revealed important issues affecting patients life and quality of care as perceived by the nurses as the primary caregivers [24]. Reducing nurses work overload and recruiting nurses assistants to carry out non nursing tasks can promote patients outcomes and increase quality of nursing care [24]. In Ibadan Nigeria, study revealed that level of stress was higher among the staff nurses who had worked for only between 0 and 3 years, with mean stress score 46.0000. Findings further revealed that as the cadre rose, the nurses assumed that managerial roles were accountable for increased subordinates and oversee health related and administrative responsibilities and



they experienced more stress [25]. Also there is a significant relationship among work environment, stress and burnout among the nurses in the selected unit[25]. This study concluded that, though work conditions and environment are not favorable, there are job security and good interpersonal relationship among the nurses which cushion the stressful situations [25]. In Oyo state, majority, 106 (53%) of the respondents in similar research reported that work stress caused increased absenteeism among nurses, high staff turnout and deterioration in quality of services provided to patients [26]. About 79% of respondents agreed that their workplace had a warm, friendly and pleasant atmosphere. However, 47.5% of respondents said that the work load was too high and they were unable to cope with its demands [26]. Nurse job satisfaction is a critical component of a well-functioning healthcare system. Satisfied nurses are more likely to stay in their positions, perform their duties efficiently, and provide high-quality patient care. Conversely, a poor work environment can lead to job dissatisfaction, increased turnover, and compromised patient care. Improving the work environment for nurses can lead to enhanced job satisfaction and better patient care quality [27]

## CONCLUSION

Poor working conditions can have an adverse impact on the nurses attitude and interactions to patient care in the hospitals, The most common detrimental effects of this is poor health outcome and decrease quality of healthcare for our teaming patients in the hospital. Organization's effectiveness, improved work environment and adequate remuneration, incentives and effective reward system coupled with reduced workload are part of the necessary strategies an employers should consider their implementation which are beneficial to both employees and the health organization. This is important because hospital workers face a variety of highly stressful working conditions while meeting the physical and psychological needs of patients.

## RECOMMENDATION

1. We therefore recommend regular assess of nurses' attitudes to ensure that patient care is not compromised.
2. Nursing management needs to create a program that can improve the caring attitude of nurses in providing services because caring is one of the factors of patient satisfaction.
3. The management of the hospitals should provide a conducive work environment, providing necessary resources and adequate break periods to ensure staff welfare

**Conflict of interest:** The author declare no conflict of interest.

## REFERENCES

1. World Health Organization, author. Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity; International Health Conference; New York. 1946. pp. 19–22. [Google Scholar]
2. Leonard DJ. Exploring Customer Service through Hospital Management Strategies [Doctoral dissertation] Walden University; 2017. [Google Scholar]
3. Wu HC, Li T, Li MY. A study of behavioral intentions, patient satisfaction, perceived value, patient trust and experiential quality for medical tourists. *J Qual Ass Hosp Tour*. 2016;17(2):114–150. doi: 10.1080/1528008X.2015.1042621. [CrossRef] [Google Scholar]
4. Carayon P. Handbook of human factors and ergonomics in healthcare and patient safety. 2nd ed. Boca Raton FL: CRC Press; 2016. Apr 19, [Google Scholar]
5. Mossialos E, Courtin E, Naci H, Benrimoj S, Bouvy M, Farris K, et al. From “retailers” to health care providers: transforming the role of community pharmacists in chronic disease management. *Health Policy*. 2015;119(5):628–639. doi: 10.1016/j.healthpol.2015.02.007. [PubMed] [CrossRef] [Google Scholar]
6. Rozenblum R, Miller P, Pearson D, Marielli A. Patient-centered healthcare, patient engagement, and health information technology: the perfect storm. In: Grando MA, Rozenblum R, Bates D, editors. *Information technology for patient empowerment in healthcare*. Germany: De Gruyter; 2015. pp. 3–22. [Google Scholar]



7. IBM Corp., author IBM SPSS Statistics for Windows, Version 20.0. Armonk, NY: IBM Corp.; Released 2011. [Google Scholar]
8. Collins K, O'Cathain A. The continuum of patient satisfaction—from satisfied to very satisfied. *Soc Sci Med.* 2003;57(12):2465–2470. doi: 10.1016/S0277-9536(03)00098-4. [PubMed] [CrossRef] [Google Scholar]
9. Camgöz-Akdağ H, Zineldin M. The quality of health care and patient satisfaction: an exploratory investigation of the 5Qs model at some Egyptian and Jordanian medical clinics. *Int J Health Care Qual Assur Inc Leadersh Health Serv.* 2006;19(1):60–92. doi: 10.1108/09526860610642609. [PubMed] [CrossRef] [Google Scholar]
10. Stamps PL, Finkelstein JB. Statistical analysis of an attitude scale to measure patient satisfaction with medical care. *Med Care.* 1981;19(11):1108–1135. [PubMed] [Google Scholar]
11. Escobar-Koch T, Banker JD, Crow S, Cullis J, Ringwood S, Smith G, et al. Service users' views of eating disorder services: an international comparison. *Int Jour Eat Disord.* 2010;43(6):549–559. doi: 10.1002/eat.20741. [PubMed] [CrossRef] [Google Scholar]
12. Saila T, Mattila E, Kaila M, Aalto P, Kaunonen M. Measuring patient's assessments of the quality of outpatient care: a systematic review. *J Eval Clin Pract.* 2008;14(1):148–154. doi: 10.1111/j.1365-2753.2007.00824.x. [PubMed] [CrossRef] [Google Scholar]
13. Chanthong P, Abrishami A, Wong J, Herrera F, Chung F. Systematic review of questionnaires measuring patient satisfaction in ambulatory anesthesia. *Anesthesiology.* 2009;110(5):1061–1067. doi: 10.1097/ALN.0b013e31819db079. [PubMed] [CrossRef] [Google Scholar]
14. Hawraa Razzaq Kadhim AB, Prof. Dr. Shatha Saadi Mohammad C. Understanding the Attitudes of Nurses toward the Nursing Process: A Cross-Sectional Study. *Journal of Neonatal Surgery* ISSN(Online): 2226-0439 Vol. 14, Issue 21s (2025) <https://www.jneonatsurg.com>
15. Onianwa Patricia Obiajulu, Ike Elizabeth Urenna, Kuforiji Bibian. Assessment of Patients' Satisfaction with Nursing Care in a Tertiary Hospital, South West Nigeria. *International Journal of Caring Sciences* May-August 2022 Volume 15 | Issue 2| Page 1415
16. Maria Johanna van der Kluit and Peter J. J. Goossens. Factors Influencing Attitudes of Nurses in General Health Care Toward Patients with Comorbid Mental Illness: An Integrative Literature Review. *Issues in Mental Health Nursing*, 32:519–527, 2011 Copyright © Informa Healthcare USA, Inc. ISSN: 0161-2840 print / 1096-4673 online DOI: 10.3109/01612840.2011.571360
17. Lambert Zixin Li, MPhil; Peilin Yan, BS; SaraJ. Singer. Nurse Burnout and Patient Safety, Satisfaction, and Quality of Care a Systematic Review and Meta-Analysis. *JAMANetworkOpen.*2024;7(11): e2443059.doi:10.1001/jamanetworkopen.2024.43059.
18. Harry Fon Mbacham<sup>1,2\*</sup>, Blessing Anjeck Mbah<sup>1</sup>, Wilfred Chick Abanda<sup>1</sup>, Belinda Fon Tengul<sup>1</sup>, Hilaria Lah Pipa<sup>1</sup>, Didimus Sefela Wirba<sup>3</sup>, Vincent Njock Ntui<sup>3,4</sup>, Lucas Bami Agwe<sup>5</sup>. Assessing Behaviors and Factors That Influence Patient Care by Nurses at the Buea Regional Hospital, Southwest Region, Cameroon. *Voice of the Publisher*, 2025, 11(2), 295-306 <https://www.scirp.org/journal/vp> ISSN Online: 2380-7598 ISSN Print: 2380-7571
19. HAYDER S\*<sup>1</sup>, ANDLEEB S<sup>2</sup>, AHMED S<sup>3</sup>. NURSES' ATTITUDE TOWARDS PATIENTS WITH MENTAL ILLNESS IN A TERTIARYCARE HOSPITAL. *Biological and Clinical Sciences Research Journal* eISSN: 2708-2261; p ISSN: 2958-4728, [www.bcsrj.com](http://www.bcsrj.com) DOI: <https://doi.org/10.54112/bcsrj.v2024i1.778> *Biol. Clin. Sci. Res. J.*, Volume, 2024: 778
20. Abay Tadiel, Mikiyas Muche<sup>2</sup>, Tiliksew Liknaw<sup>2</sup> and Afework Edmealem<sup>2\*</sup>. Nurses' attitude towards patient advocacy and its associated factor in East Gojjam Zone Public hospitals, Northwest Ethiopia, 2023. Tadie et al. *BMC Nursing* (2024) 23:561 <https://doi.org/10.1186/s12912-024-02206-2>
21. J.L.M. Haskins, S. Phakathi, M. Grant, C.M. Horwood. ATTITUDES OF NURSES TOWARDS PATIENT CARE AT A RURAL DISTRICT HOSPITAL IN THE KWAZULU NATAL PROVINCE OF SOUTH AFRICA. *Africa Journal of Nursing and Midwifery* 16 (1) 2014 pp. 32–44
22. Nurdan Yalcin Atar, Turkinaz Asti. Attitudes and Behaviors of Nursing Students towards Nurse-Patient Interaction. *International Journal of Caring Sciences* January – April 2020 Volume 13 | Issue 1| Page 411
23. Sunday Joseph Ayamolowo, Omolola Irinoye and Mayowa Antony Oladoyin. Job Satisfaction and Work Environment of Primary Health Care Nurses in Ekiti State, Nigeria: an Exploratory Study. *International Journal of Caring Sciences* September-December 2013 Vol 6 Issue 3



- 
24. Abiodun Samuel, OLOWOLAFE1, Eleojo Rachel, IKOYI2, Ojone Mercy, ONATE3, Shafiu Adewole, ADEMOLA4. Perceived Impact of Workload on Patients Care Among Nurses Working in Outpatient Department at Federal Teaching Hospital Lokoja, Kogi State. International Journal of Research Publication and Reviews, Vol 4, no 10, pp 30-41 October 2023
  25. Guobadia Pauline Ojekou1, Odetola Titilayo Dorothy2\*.Effect of Work Environment on Level of Work Stress and Burnout among Nurses in a Teaching Hospital in Nigeria. Open Journal of Nursing, 2015, 5, 948-955 Published Online October 2015 in SciRes. <http://www.scirp.org/journal/ojn>  
<http://dx.doi.org/10.4236/ojn.2015.510100>
  26. Victoria Funmilayo Hanson, RN, PhD;1\* Olayinka A. Onasoga, RN, MSc;2 Christianah Olayemi Babalola, RN3. OCCUPATIONAL STRESS Working Conditions and Productivity among Nurses in Selected Hospitals in Southwest Nigeria. International Journal of Translational Medical Research and Public Health (2017), Volume 1, Issue 2, 29-35