

Staff Nurses

Role Perception and Role Performance

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The present study was conducted to investigate the relationship between role perception and role-performance. A sample of three hundred Staff Nurses was drawn from a Central Government hospital of Delhi. To assess role perception and role performance, a role perception questionnaire and a role performance inventory were administered respectively to each subject individually. The results indicated that inner-directed role perception had a negative relationship with role performance. Other directed role perception had a significant positive relationship with role performance. To achieve job success, Staff Nurses seemingly can concentrate on other directed role perception.

APPROPRIATENESS of an employee's role-perception has an important influence on the role performance. Role-perception refers to the direction of effort, the kind of activities and behaviour the individual believes he should engage to perform his job successfully. If his perception of his role corresponds to those of his superiors in his organisation, then he will be applying his effort where it will count the most for successful performance as defined by the organisation. If his role perceptions are "incorrect" (i.e. do not correspond to those of his superiors) then it is possible that he may extend a great deal of effort without organisationally defined successful performance taking place.

Since role perception, as defined, refers to where the individual thinks he can most profitably apply his efforts, they are best measured by some sort of report from the individual himself. Role performance refers to Staff Nurse's accomplishment on tasks that comprise her job.

Review of Literature

Sarbin (1954) observed that "good" role perceivers (those who respond in a model way) would more likely have self-characteristics in common, while "poor" role perceivers (those who respond in deviant way) would have fewer self-characteristics in common (more heterogeneity), and would be different from the "good" role perceiver. According to Lindesmith and Strauss (1967), perception is influenced by interest, needs and past experience. Perception is selective. The manner in which stimuli are interpreted by the individual affects his course of action.

Perception is not so closely stimulus-bound as was formally believed. The personality of the individual adds something to the process under certain conditions which alter his perception. Perception,

maintains Kelly (1955), is an individual process which involves the building of a personal hierarchical net-work of constructs which enables the perceiver to interpret the world around him.

Burner, Shapird and Taqiuri (1958) asked subjects to indicate how far they regarded people who were intelligent as likely to possess a number of other characteristics. More than half the subjects indicated that they expected people who were intelligent would be active, deliberate, enterprising, efficient, energetic etc. Thus when we have decided, rightly or wrongly, that a person possesses one characteristics we often tend to assume that he possesses a variety of others as well.

According to Pareek *et al* (1972) organisational effectiveness to a great extent depends on how two different role incumbents in the organisation perceive other roles. Marry Colette Smith (1974) conducted a study on perceptions of various nursing personnel, regarding performance of selected nursing activities. Findings indicated that each personnel category perceived the other categories as engaging in more of the selected nursing activities than members of the category themselves perceived. There was little unanimity by any category of personnel regarding their own functions or those of other category.

Hasmath Huque (1970) conducted a study on 'registered' nurses' perception of their role in a general hospital. She found that nurses, as an overall group, have a marked preference for the expressive-integrative component of their role. Hughes (1958) concluded that there was no agreement among nurses, doctors, and attendants as to what are nurses' most important tasks. There appears to be a conflict of opinion about who was responsibility and to whom the loyalty of the various personnel should be directed.

According to Hass (1964) behaviour is undoubtedly influenced by official and formal expectations. Knowledge of the official expectations is not sufficient to understand behaviour in organisation. If it were, behaviour could be logically inferred from the official standards which of course is not the case. Instead, behaviour is influenced as well by standardized unofficial normative specifications, particularly conceptions that actors have of their place in society. Therefore, knowledge of the role perception held by nursing personnel should be of utility in explaining behaviour patterns. If the perception of the occupation is a crucial behaviour variable, it probably has consequences on the achievement of success and satisfaction in the occupation.

Objectives

The major objective of the present study was to

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investigate the relationship between role perception and role performance of staff nurses employed in government hospital.

Specific objectives of the study were :

1. To study the relationship between inner directed role perception and role performance.
2. To study the relationship between other directed role perception and role performance.

Method

The present investigation was an exploratory study. A sample of 300 Staff Nurses was drawn through random sampling method. Only female, resident and registered "A" grade Staff Nurses employed in Central government hospital were selected for the sample. Official job description of staff nurses was taken as criterion to differentiate between high and low role performance. For measurement of role performance "Role Performance Inventory" was applied which was based on the official job description of staff nurses. Role perception variable was measured by Porter's Role Perception Questionnaire, which was standardised on a sample of 100 subjects. Coefficient of stability of role perception questionnaire by test-retest method was .82. Content validity was established as twenty five judges agreed that all the ten traits were relevant to role performance of staff nurses.

Inner-directed cluster of Role Perception questionnaire includes, forceful, imaginative, independent, self-confident and decisive traits. Other-directed cluster included cooperation, adaptable, cautious, agreeable and tactful traits. 12 traits were presented to respondents for ranking, two of these traits (i.e. intelligent and efficient) were camouflage items, that were included in the list to disguise the dimensions being studied, and the ranks given to them by a respondent were not counted. The labels Inner-directed and Other directed were attached to the two clusters of traits simply as a short hand way of describing dimensions.

Result and Discussion

Porter (1964) on the basis of an empirical study concluded that role perceptions were necessary prerequisite for the effective role performance. Heneman et al (1972) found that role perceptions were significantly related to performance while ability was not. Several studies had concluded that other directed role perception was suitable trait for those employees who were face to face dealing with the members of the society. Relationship between inner-directed role perception and overall role performance was significantly negative. Inner-directed role perception had significantly positive relationship with low role performance.

Inner-directed role perception had very significant negative relationship with high role performance. This indicated that inner-directed role perception was undesirable trait for high role performance in nursing profession. Other directed role perception had very significant positive relationship with overall role performance. Other directed role perception had significant negative relationship with low role performance and significant positive relationship with high role performance. Thus to be a successful role performer in the nursing profession one must have the trait of other directed role perception (Table-1).

Conclusion

The results indicate that the role perception dimensions have a significant moderating effect on the role performance of staff nurse. Specifically, the results show that those staff nurses who see their job as demanding considerable other directed behaviour are more effective in performing their jobs than are those staff nurses who see their job as demanding relatively less other-directed behaviour. In summary, the data are suggestive of the fact that, certain kind of role perceptions lead to good role performance, while others lead to poor performance, although the data do not conclusively prove that a causal relationship exists.

Table 1:
Coefficient of correlation between Role Performance and Role Perception

Variable	High Role Perfor- mance N=136	Level of Signifi- cance	Low Role Perfor- mance N=164	Level of Signifi- cance	Overall Role Performance N=300	Level of Signifi- cance
Inner-Directed Role Perception	-0.313	.01 level	0.181	.05 level	-0.336	.01 level
Other Directed Role Perception	0.309	.01 level	-0.186	.05 level	0.334	.01 level

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BRANCH AFFAIRS

HARYANA

The one-day conference of Haryana State Branch, TNAI, was held at RTTI, Barwala, Distt. Hissar on September 2, 1989. The conference was inaugurated by Civil Surgeon, Hissar, Dr. D.P. Bansal, Mrs. Ranbir Gujral, Principal, RTTI, Barwala, welcomed the chief guest and the delegates. Dr. Bansal emphasised the role of Nurses in Primary Health Care through health education in the hospitals. He stressed that Nurses can play a vital role in preventive, promotive and rehabilitative services. In order to meet this goal the present syllabus needs to be revised accordingly. He also emphasised that the teachers need to be oriented to this concept.

Dr. Sher Singh, DFPO, praised the nurses' contribution in health services especially the nurses who are working in the community.

Mrs. A.D. Malhotra, President, Haryana State Branch, reviewed the history of TNAI and its role, establishment and its functioning in Haryana. She thanked the

Haryana Government for agreeing in giving the state award to the Nursing personnel like teachers of Haryana. She also brought to the notice of the members matters regarding government policy for giving the 2 years' extension in service beyond superannuation to the State as well as the National award winners.

Election for House of Delegates for attending the conference of TNAI at Cuttack in November was held. 6 Members and 2 members of SNA were elected. Six members were kept in the waiting list.

The Scientific Session was also held. The following topics were presented: Primary Health Care by Mrs. Monir Gujral, DPHNO Sirsa; Immunization by Miss Shashi Sood, Tutor, MCH, Rohtak; Let's Talk Health by Mrs. A.D. Malhotra, President, TNAI, Haryana; Mental Health by Mrs. Ranbir Gujral, Principal, RTTI Barwala.

In the concluding remarks the President stressed the need and appealed to the senior nurses for enrolling more members and also for raising funds so that various activities of the branch can be carried out effectively. She also brought to the notice of the house the fact that the election for the state branch is due and the next conference will be held on 28 Jan 1990 at MCH, Rohtak.

Obituary

Miss Marion Ethel Hodgson, former Nursing Superintendent of Central Institute of Psychiatry, Ranchi, left for her heavenly abode on the morning of September 3, 1989. She was 70.

Miss Hodgson served the Central Institute of Psychiatry, Ranchi for 31 years, of which 19 years were as Nursing Superintendent. She was a recipient of National Award for Nursing personnel for the year 1981.

Mrs. S. Varughese

It is a matter of profound sorrow and grief that Miss Mohini Negi, Nursing Sister, PGI, Chandigarh, left for her heavenly abode on July 28, 1989 at the age of 38 years.

Miss Mohini Negi completed her General Nursing from School of Nursing, Snowdon Hospital, Shimla in October 1973 and Midwifery from School of Nursing, Lady Reading Hospital, Shimla from September 1973 to September 1974. She also took her Diploma in Psychiatric Nursing (DPN) during September 1983—June 1984 from Bangalore.

She underwent a Radical Mastectomy operation in January 1986 followed by chemotherapy. She went on long leave to her native place where she breathed her last.

Mrs C. Earnest

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References

1. Burner, J.S., Shapiro, D. and Tagiuri, R. (1958): The meaning of Traits in isolation and in combination. In Person, Tagiuri and Patrulls (ed.) *Perception and Inter-personal Behaviour*, Stanford University Press.
2. Hughes, E.C. Hughes, H.M. and Deutscher (1958): *Twenty Thousand nurses tell their story*. Philadelphia: J.B. Lippincott Co., p. 232-250.
3. Huque, Hasmath (1970): *Registered Nurses' Perception of their role in a general Hospital*, Catholic University of America, Washington.
4. Haas, J. Eugene (1964): Role conception and group consensus. Research monograph No. 117, Bureau of Business Research. The Ohio State University, Ohio.
5. Heneman, Herbert G.D., Schwab, Donald, P. (1972):

Evaluation of Research on expectancy theory prediction of employee performance, *Psychological Bulletin*, 78:17, p. 1-9.

6. Kelly, G.A. (1955): *The Psychology of Personal Construct*, Norton.

7. Lindesmith, Alfred, R. and Strauss Anselm (1967): *Social Psychology*. Holt Rinehart and Winston, New York.

8. Marry Colette Smith (1974): Perception of Head Nurses, Clinical Nurse Specialists, Nursing Educator and Nursing Office Professional regarding performance of selected nursing activities, *Nursing Research*, 23:6, p. 565-571.

9. Pareek Udai, S.N. Chattopadhyaya and G. Kathuria (1972): Designing on Organisational Behaviour Laboratory, *Indian Management*, p. 6.

10. Porter Lyman W. and Milard M. Henry (1964): Job attitude in Management: VI Perception of the importance of certain personality traits as a function of Line Versus Staff type of job. *Journal of Applied Psychology* 6:5, p. 305-309.

11. Sarbin T.R. (1954): Role Theory In: Gardner Lindzey (ed.) *Hand book of Social Psychology*, Vol. I, p. 223-258.