

Motivation for power in the interprofessional collaboration practice of physicians and nurses



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INTRODUCTION

However, although Stein (1967) already pointed out the issue of power in interprofessional collaboration in the "doctor-nurse-game," empirical evidence of the association of power motivation on individual willingness to engage in interprofessional collaboration is still lacking.

STATE OF RESEARCH

- Okpala (2020) five factors influence interprofessional practice in terms of power: team, role, communication, trust and respect, and person.
- Nimmon et.al. (2019) power is not embodied by a person; it is expressed in all relationships.
- Gergerich et.al. (2018) Presence of hierarchies and power can be a source of conflict in interprofessional teams.

RESEARCH QUESTION

Is there an association between the variables power motivation, self-efficacy and gender role orientation and the willingness of physicians and nurses to work together interprofessionally?

HYPOTHESIS

Individual willingness to engage in interprofessional collaboration depends on the degree of power motivation, self-efficacy, and gender role orientation:

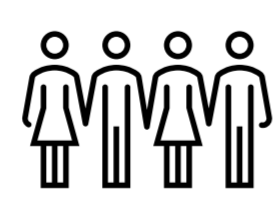
- The higher the power motivation, the lower the individual willingness to engage in interprofessional collaboration.
- The higher the self-efficacy, the lower the individual willingness to engage in interprofessional collaboration.
- The more pronounced the masculinity in gender role orientation, the lower the individual willingness to engage in interprofessional collaboration.

METHODS

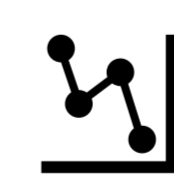
- Survey at four university hospitals
- Paper-based, psychometric questionnaire (n=210).
- Data modeling in SPSS
- Creation and analysis of statistical models based on the general linear model.

NEXT STEPS

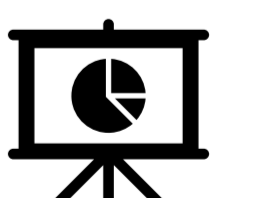
Start of recruitment and survey
(Mai – Sept. `22)



Evaluation of the collected data
(Okt. – Dez. `22)



Summary of the results and publication
(Jan. – Juni `23)

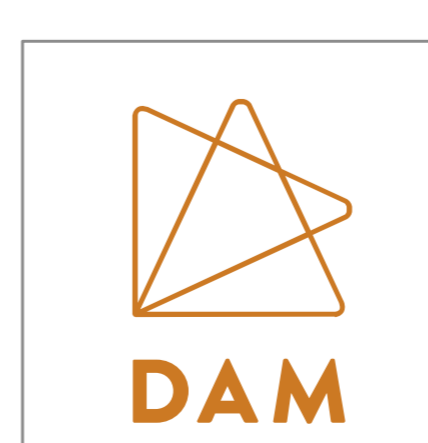


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