70th Foundation Anniversary International Conference
Pusan National University College of Nursing

Navigating Nursing

Addressing Challenges in Nursing Research and Profession

| Date | May 22 (Thur.), 2025, 09:00~17:00

| Place | Grand Hall, Pusan National University College of Nursing (Yangsan Campus)

Abstract Book

Organizer

Pusan National University
Office of Research Affairs & College of Nursing

Host

Pusan National University
Research Institute of Nursing Science

PIONEER 부산대학교 국립대학육성사업
부산대학교 간호대학 PUSAN NATIONAL UNIVERSITY COLLEGE OF NURSING

2025 International Conference
PNU College of Nursing

70th Foundation Anniversary International Conference

E-Poster Presentation

May 22 (Thursday) 09:00~15:30
Room 201~203

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Room 201-203

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Poster 01

Non-Pharmacological Intervention for Pain Relieving in Newborn Infants Undergoing Needle-Related Procedures: A Network Meta-Analysis of Randomized Controlled Trials

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Background: Newborn infants frequently undergo painful needle-related procedures, such as heel lance and intramuscular injections, for essential tests. Effective pain management is crucial to mitigate both immediate distress and potential long-term complications. Although non-pharmacological interventions are increasingly recommended owing to their safety profile and ease of application, their comparative effects have not been fully established.

Objective: This network meta-analysis aimed to examine and compare the efficacy of varied non-pharmacological interventions in reducing newborn pain during needle-related procedures, as measured by the Premature Infant Pain Profile (PIPP).

Methods: We conducted a systematic literature search of CENTRAL, PubMed, EMBASE, and CINAHL up to February 2024, identifying randomized controlled trials that involved non-pharmacological interventions in neonates. Two independent reviewers screened 5609 studies using Covidence, extracting data on population characteristics, intervention specifics, PIPP outcomes, and risk of bias assessment. Disagreements were resolved through discussion with a third reviewer. A frequentist network meta-analysis was performed using STATA 18/BE, synthesizing direct and indirect comparisons.

Results: From 24 eligible RCTs (N=2403 neonates), 22 distinct interventions were identified. Eight interventions demonstrated statistically significant reductions in PIPP scores relative to control in the network meta-analysis: kangaroo care plus breastmilk, sucrose plus non-nutritive sucking, sucrose alone, non-nutritive sucking alone, kangaroo care alone, breastmilk alone, touch, and sucrose plus music. Surface Under the Cumulative Ranking (SUCRA) values indicated kangaroo care with breastmilk had a 58.3% probability of ranking highest, followed by sucrose with non-nutritive sucking (25.9%). Heterogeneity was modest, with no inconsistencies detected (χ^2=2.52, p=0.9981).

Conclusion: Non-pharmacological interventions, especially combination approaches, provide significant pain relief for newborns undergoing frequent needle-related procedures and may be adopted as first-line strategies. Further RCTs are warranted to refine these findings and guide individualized neonatal pain management.

Key words: Infant, Newborn, Needle-related procedures, Network meta-analysis, Non-pharmacological intervention, Pain management

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Poster 02

Navigating the Unseen Journey: The Lived Experiences of Infertile Couples Undergoing Fertility Treatment

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Background: Infertility significantly impacts couples' lives, often presenting complex psychological, social, and physical challenges. Understanding the lived experiences and associated meanings within the life contexts of couples facing infertility can offer essential insights for addressing their fundamental concerns and developing effective support strategies.

Objective: This study aimed to explore the experiences of couples diagnosed with infertility, particularly focusing on their decision-making processes, challenges during fertility treatment, and the deeper meanings attributed to these experiences.

Methods: Employing van Manen's interpretive phenomenological approach, this qualitative study examined the experiences of infertile couples. Participants were purposively recruited from local fertility clinics and online community forums. Semi-structured, in-depth interviews were conducted with seven participants (five women and two men), lasting approximately 90 to 120 minutes each. Interviews were audio-recorded, transcribed verbatim, and analyzed iteratively using thematic reflection guided by van Manen's methodology.

Results: The analysis yielded four main categories encompassing 23 themes: "Encountering Infertility: An Unexpected Reality," "Nomadic Life Pursuing Pregnancy," "Oscillating Between Hope and Despair," and "The Elusive End to Infertility." Couples experienced delays in seeking medical help due to misconceptions about infertility and negative perceptions surrounding fertility clinics. During treatment, they faced emotional turmoil, uncertainty, societal isolation, and strained self-esteem. However, couples also experienced strengthened marital bonds and found significant emotional support through online communities. Ultimately, repeated unsuccessful treatments led to resignation, anxiety about future parenthood, and a desire for increased societal understanding and support.

Conclusion: This study highlights the complex, multifaceted nature of infertility experiences, emphasizing the need for targeted psychological and social support systems. Greater societal awareness and improved health policies could mitigate the distress and isolation experienced by infertile couples.

Key words: Fertility Treatment, Infertility, Phenomenology, Qualitative Research

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Poster 03

The Effect of Incident Reporting Attitudes, Patient Safety Silence Behaviors, and Critical Thinking Disposition of Intensive Care Unit Nurses on Patient Safety Nursing Activities

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Background: The intensive care unit (ICU) is high risk environment where critically ill patients and emergency situations are common. Failure to respond appropriately can have immediate, life-threatening consequences. Therefore, patient safety nursing activities in the ICU are crucial, and identifying factors that enhance these activities is essential.

Objective: This study aims to assess the levels of incident reporting attitudes, patient safety silence behaviors, critical thinking disposition, and patient safety nursing activities among ICU nurses. Furthermore, it seeks to idnetify the factors influencing patient safety nursing activities in this setting.

Methods: This cross-sectional survey targeted ICU nurses providing, direct patient care in general hospitals. Data were collect through an online survey conducted from May 17 to June 8, 2024. A structured self-report questionnaire was used, including to gather information on general characteristics and study variables. The collected data were analyzed using SPSS/WIN 29.0, employing descriptive statistics, independent t-tests, one-way ANOVA, Scheffe's test, Pearson's correlation, and multiple linear regression.

Results: The regression model was statistically significant ($F=12.13$, $p<.001$), with an explanatory power of 46.8%. The key factors influencing patient safety nursing activities were critical thinking disposition ($\beta=.33$, $p<.001$), incident reporting attitudes ($\beta=.25$, $p<.001$), patient safety silence behaviors ($\beta=-.25$, $p<.001$), and clinical work experience of 5 to 10 years ($\beta=.21$, $p=.005$).

Conclusion: Enhancing patient safety nursing activities among ICU nurses requires efforts to strengthen critical thinking disposition, promote positive attitudes toward incident reporting, and reduce patient safety silence behaviors. In addition, differentiated education and tailored support based on clinical experience should be provided. Understanding the behaviors and attitudes of ICU nurses at the organizational level is also essential for improving patient safety practices.

Key words: Intensive care unit, Patient safety nursing activities, Incident reporting attitudes, Patient safety silence behaviors, Critical thinking disposition

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Poster 04

Factors Influencing on Ventilator Associated Pneumonia in Trauma Patients

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Background: In order to prevent Ventilator Associated Pneumonia, one of the common infections in trauma patients, and to provide appropriate nursing intervention, it is essential to identify factors related to VAP. Therefore, this study was conducted on trauma patients at a regional trauma center to identify factors affecting VAP and to provide information to reduce the incidence of VAP in trauma patients.

Objective: The purpose of this study was to investigate the factors affecting ventilator associated pneumonia(VAP) in trauma patients admitted to the trauma intensive care unit, and provide basic data and help clinical practice in developing interventions for the prevention of ventilator associated pneumonia in trauma patients.

Methods: This retrospective study analyzed data from trauma intensive care unit patients. The collected data were analyzed using descriptive statistics, t-tests, Chi-squared tests, ANOVA test, and logistic regression analysis.

Results: Feeding (β=.36, p<.001), Deep venous thrombosis prophylaxis (β=-.23, p<.001), Bronchoscopy (β=.22, p<.001) and Head elevation(β=-.20, p=.003) affected the Symptoms Associated With Pneumonia. The risk factors for ventilator associated pneumonia included Spine injury(odds ratio [OR]=3.04, 95% confidence interval [CI]=1.23-7.51), Bronchoscopy (OR=3.5, 95% CI=1.38-8.86).

Conclusion: These results identified risk factors of ventilator associated pneumonia. It is crucial to acknowledge the risk factors for ventilator associated pneumonia in TICU patients and establish a prevention strategy.

Key words: Ventilator-associated pneumonia, Trauma, Intensive care units, Risk factors

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Poster 05

Incidence and Risk Factors of Delirium among Trauma Ward Patients at a Regional Trauma Center

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Background: Delirium refers to impaired brain function characterized by fluctuating mental status caused by physical stress. Patients with severe trauma are particularly susceptible to delirium risk factors due to sudden accidents, surgeries, severe anxiety, and psychological imbalance.

Objective: This retrospective study aimed to investigate the incidence of delirium and its associated risk factors among patients hospitalized in trauma wards of a regional trauma center.

Methods: This study included 220 patients admitted to trauma wards of a regional trauma center at a tertiary hospital in B city, from May to November 2024. Data were collected through electronic medical records and Korea Trauma Database (KTDB) coding information. The data collection form comprised 30 items covering general characteristics, trauma-related characteristics, health-related characteristics, and delirium-related characteristics. Collected data were analyzed using IBM SPSS Statistics 27.0, including frequencies, percentages, mean and standard deviations, chi-square tests, t-tests, and multivariate logistic regression analysis.

Results: The average age of participants was 54.9 ± 17.3 years, with 157 males (71.4%) and 68 females (28.6%). The incidence rate of delirium was 31.8%. Delirium occurred at an average hospital stay of 7.48 ± 5.28 days, and the average postoperative onset was 3.89 ± 4.15 days. The mean duration of delirium was 6.37 ± 4.75 days. Multivariate logistic regression analysis revealed that being physically restrained, receiving oxygen therapy, pre-admission benzodiazepine medication, having a chest tube, and longer hospitalization were significantly associated with an increased risk of delirium.

Conclusion: Early identification of delirium risk factors upon admission can facilitate prompt planning of nursing interventions aimed at preventing delirium. Early detection of delirium can contribute to reducing patients' length of hospital stay.

Key words: Trauma centers, Delirium, Risk factors, Incidence

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Poster 06

Risk Factors for the Readmission of Patients with Diabetic Ketoacidosis: A Systematic Review and Meta-analysis

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Background: Diabetic ketoacidosis (DKA) is a life-threatening complication of diabetes with increasing hospitalization and readmission rates, especially among high-risk patients. Identifying significant risk factors for DKA readmission is essential to improve outcomes and guide effective prevention strategies.

Objective: This study aimed to identify risk factors associated with the readmission of patients with DKA through a systematic review and meta-analysis.

Methods: A systematic literature review was conducted following the PRISMA guidelines. Relevant studies were retrieved from five international databases (PubMed, EMBASE, Cochrane Library, PsycINFO, and Web of Science) and five Korean databases (RISS, KoreaMed, KMbase, KISS, Dbpia). Study quality was assessed using the Newcastle-Ottawa Scale (NOS), and meta-analysis was performed using a random-effects model.

Results: Fifteen studies were included in the review, with nine used for meta-analysis. Significant risk factors for DKA readmission included female sex, insurance status, low-income status, and homelessness. High glycated hemoglobin(HbA1c) levels, comorbidities such as renal disease, high Charlson Comorbidity Index (CCI), depression, and psychiatric disorders were also associated with increased readmission. Among behavioral factors, discharge against medical advice (AMA) was a strong predictor.

Conclusion: To reduce DKA readmissions, targeted interventions are needed for socioeconomically vulnerable populations, patients with poor glycemic control, and those with psychiatric comorbidities. Healthcare strategies should focus on improving diabetes management, post-discharge follow-up, and tailored interventions for high-risk patients.

Key words: Diabetic ketoacidosis, Patient readmission, Risk factors, Review literature, Meta-analysis

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Poster 07

Risk Factors Associated with Acute Eosinophilic Pneumonia: A Scoping Review

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Background: Acute eosinophilic pneumonia (AEP) is a rare but severe respiratory condition characterized by rapid onset and life-threatening symptoms. Despite its critical nature, the identification of risk factors remains underexplored, limiting preventive and management strategies.

Objective: This scoping review aimed to examine the literature on AEP risk factors published between 1990 and 2024. The review sought to identify study characteristics, key risk factors, and emerging trends to provide a comprehensive understanding of factors contributing to AEP development.

Methods: This study utilized Arksey and O'Malley's scoping review framework, analyzing 17 studies retrieved from eight databases. The extracted data were categorized into major risk factor groups to identify common patterns and trends in AEP.

Results: A total of 47 risk factors were identified and classified into six categories: behavioral, physiological, demographic, environmental, medical, and other factors. Behavioral risk factors, particularly smoking habits, were the most frequently reported, with new or resumed smoking strongly associated with AEP. Demographic factors highlighted younger males and older individuals taking specific medications as at-risk groups. Environmental factors, such as seasonal temperature changes and occupational exposures, were also significant triggers. Medical risk factors included conditions like allergic diathesis and drug use, with daptomycin prominently linked to AEP.

Conclusion: The findings underscore the critical role of nurses in preventive strategies, including smoking cessation interventions, environmental exposure management, and patient education on medication risks. Future research should focus on longitudinal studies, larger sample sizes, and the integration of nursing perspectives to enhance understanding and prevention of AEP. These insights provide a foundation for targeted nursing interventions and contribute to evidence-based practices for managing this complex condition.

Key words: Acute eosinophilic pneumonia (AEP), Risk factors, Smoking, Environmental exposure

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Poster 08

Determinants of Nurses' Medication Safety Competence: A Multiple Linear Model Across Career Stages

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Background: Medication errors remain a significant threat to patient safety, often leading to preventable harm and increased healthcare costs. Nurses play a vital role in preventing such errors, making their competence in medication safety essential. As nurses progress through their clinical careers, their medication safety competence may change; thus, assessing this competence across different career stages is crucial for developing targeted support and education strategies.

Objective: This study aimed to identify the factors that influence nurses' medication safety competence across various clinical career stages, with a particular focus on nursing organizational culture, communication competence, and patient safety culture.

Methods: A cross-sectional survey design was used to examine differences across career stages. A total of 757 nurses participated, grouped according to their clinical experience: Group 1 (n = 174), Group 2 (n = 196), Group 3 (n = 191), and Group 4 (n = 196). Data were collected via a survey from 3 to 7 2021. Multiple linear regression analysis using the enter method was conducted separately for each group to identify significant predictors of medication safety competence.

Results: Across all career stages, communication competence and patient safety culture consistently emerged as significant predictors of medication safety competence. The regression models explained between 30.8% and 41.4% of the variance in medication safety competence, depending on the group.

Conclusion: These results highlight the need for tailored interventions that enhance medication safety competence based on nurses' clinical career stages. Effective strategies should incorporate relevant aspects of communication and organizational culture.

Key words: Clinical ladder system, Medication safety competence, Nurse organizational culture, Communication competence, Patient safety culture

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Poster 09

Long-Lasting Echoes of Trauma: A Phenomenological Study on Women's Lives After Out-of-School Youth Experiences

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Background: Out-of-school young women often encounter both physical and psychological trauma within their families, schools, and communities, leaving lasting impacts on their lives.

Objective: This study explored the long-term traumatic experiences of these women in Korea, adopting a phenomenological approach and employing Colaizzi's method for data analysis.

Methods: Data were collected from August to September 2023 from 10 participants, aged 27–45 years, who had experienced being out of school.

Results: Five key themes emerged from the analysis: drifting alone in a dark sea without a lighthouse, remnants lingering through life, a heart overflowing with compassion, struggles to find my own path, and life is like holding a grenade's safety pin. These women faced traumatic events such as neglect, abuse, violence, and fraud in their families, schools, and communities, and these experiences left enduring emotional scars. As they matured, they developed compassion for themselves and their parents, striving to live with the pain in their hearts. However, some participants who initially believed they were coping well unexpectedly faced post-traumatic stress symptoms and recurring suicide attempts.

Conclusion: The findings underscore that traumatic events experienced by out-of-school young women do not fade over time but remain deeply embedded in their lives. These women continue to live with these experiences, enduring pain, surviving, and progressing. Given these insights, mental health professionals should create targeted policies and ongoing interventions that account for the long-term consequences of such trauma.

Key words: Adolescent, Wounds and injuries, Stress disorders, Post-traumatic

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Poster 10

Influences of Deliberate Rumination, Self-Disclosure, and Social Support on Posttraumatic Growth in Patients with Severe Trauma

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Background: With economic growth and technological advancements, the incidence of traffic accidents and industrial injuries has increased, leading to a growing number of patients with severe trauma. These individuals face various physical, psychological, and socio-economic challenges, often experiencing long-term sequelae. Posttraumatic growth (PTG) refers to positive psychological change that occurs when individuals successfully cope with traumatic experiences, achieving a higher level of functioning. Exploring the factors influencing PTG is essential for promoting recovery in trauma patients.

Objective: This study aimed to examine the effects of deliberate rumination, self-disclosure, and social support on PTG in patients with severe trauma.

Methods: Data were collected from 152 patients with severe trauma who visited a regional trauma center in a tertiary hospital in Busan, South Korea, from April to October 2024. Structured self-report questionnaires were used, and data were analyzed with descriptive statistics, t-tests, one-way ANOVA, Scheffé post hoc tests, Pearson's correlation, and stepwise multiple regression using IBM SPSS 28.0.

Results: The mean PTG score was 48.86±16.17. PTG showed significant positive correlations with deliberate rumination ($r = .60$, $p < .001$), self-disclosure ($r = .32$, $p < .001$), and social support ($r = .39$, $p < .001$). Stepwise regression identified deliberate rumination ($\beta = .50$, $p < .001$), social support ($\beta = .19$, $p = .004$), self-disclosure ($\beta = .16$, $p = .017$), and religious affiliation ($\beta = .16$, $p = .009$) as significant predictors, explaining 44.0% of the variance in PTG ($F = 30.86$, $p < .001$).

Conclusion: Deliberate rumination, social support, self-disclosure, and religion significantly influence PTG in patients with severe trauma. These findings highlight the importance of developing targeted psychological interventions and supportive environments to promote recovery and facilitate PTG in trauma survivors.

Key words: Cognitive, Posttraumatic Growth, Rumination, Self-Disclosure, Severe Trauma, Social Support

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Poster 11

Identifying Subgroups at Risk for Resistance Exercise Non-Participation Among Older Adults Living Alone: A Decision Tree Analysis

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Background: Resistance exercise is crucial for maintaining muscle strength and preventing frailty in older adults. For older adults living alone, it is necessary to actively provide community-based interventions and support to promote participation in resistance exercise, thereby preventing frailty and maintaining functional status.

Objective: This study aimed to identify factors associated with resistance exercise participation and to determine high-risk subgroups for non-participation among community-dwelling older adults living alone.

Methods: This cross-sectional study utilized data from the Korea National Health and Nutrition Examination Survey (KNHANES). A total of 414 older adults living alone aged 65 years or older were included. Logistic regression analysis was performed to examine risk factors for resistance exercise participation. Additionally, decision tree analysis was conducted to identify risky subgroups for resistance exercise non-participation.

Results: Gender and health literacy were significant factors affecting resistance exercise participation. Male older adults were 3.035 times more likely to engage in resistance exercise than females (OR=3.035, p<.001). Higher health literacy was positively associated with participation (OR=1.071, p=.008). Decision tree analysis identified two high-risk subgroups: (1) females with low health literacy (≤26 points) and (2) females with higher health literacy but low household income.

Conclusion: Interventions should focus on promoting resistance exercise among older women with low health literacy and addressing economic barriers to participation. Future research should explore additional factors, including social support and network characteristics, and consider longitudinal designs to clarify causal relationships.

Key words: Decision tree, Health literacy, Older adults living alone, Resistance exercise,

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Poster 12

Implementing Team Project Peer Assessment in Nursing Students' Health Policy Class

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Background: Peer evaluation has a positive effect on the improvement of learners' learning ability by participating in evaluations such as objective evaluation of tasks and observation of the learning process of others as a peer evaluator. There is a lack of research on the effectiveness of external peer evaluation of nursing college students, so it is necessary to grasp the learner's experience in peer evaluation.

Objective: The purpose of this study is to understand the peer evaluation of nursing students' team project activities and to prepare basic data on the application and improvement of peer evaluation in future team project activities.

Methods: This study is a content analysis study to understand the contents of peer evaluation experienced by nursing students during team project activities. The subjects of this study were 197 nursing students in the third grade of M University who are taking health policy theory, and the team composition for the health policy presentation project activities consisted of 4 to 5 people per team. A total of 10 teams were formed for each class. Data collection was conducted from May 7 to 31, 2024.

Results: The study found that the policy with the highest peer ratings and the one with the most memorable for students did not match. It also focused on "presentation competency" for both the main reasons for giving high and low scores to other teams.

Conclusion: The results of this study suggest that presentation competency acts as an important evaluation criterion for peer evaluation in the process of understanding and delivering health policy contents by nursing students. Therefore, in order to effectively operate team projects and improve learning outcomes, it is necessary to develop educational support and programs that can systematically strengthen nursing students' presentation competency.

Key words: Health policy, Nursing students, Peer review

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Poster 13

A Qualitative Study on School Staff's Experiences with the COVID-19 Response

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Background: The COVID-19 pandemic placed unprecedented demands on schools, requiring rapid and coordinated institutional responses.

Objective: This study aimed to provide foundational data for developing effective infectious disease response policies by exploring school staff member's experiences with school-based responses during the pandemic.

Methods: This qualitative study involved six school staff members working in U City during the critical stage of the COVID-19 pandemic. Semi-structured interviews were conducted, with the main question being, "Please describe your experiences with school-level COVID-19 response, focusing on organizational or policy dimensions." Before the interviews, participants were informed that the organizational dimension referred to structural systems such as internal response teams, education offices, and public health centers. The policy dimension referred to infection control policies and their implementation based on official guidelines. Data were analyzed using qualitative content analysis to identify common themes.

Results: Participants included two elementary, one middle, and three high school staff members: administrators, teachers, school nurses, and administrative staff. In the organizational dimension, key themes included 'school operated through department head meetings rather than a formal response teams,' 'conflict over role assignments in response team,' 'need for a unified communication channel,' and 'lack of collaboration with local health centers.' In the policy dimension, themes included 'guidelines not reflecting on-site realities,' 'appreciation for human and material resources,' 'excessive administrative burden from policy execution,' and 'conflict between schools' public roles and infection control demands.'

Conclusion: School staff experienced structural ambiguity, unclear roles, unrealistic guidelines, and administrative overload. Effective future responses require activating school-based response teams, consistent communication among schools, education offices, and public health centers, and adequate resource provision. Policies should also be developed with input from frontline staff, including school nurses and other on-site personnel directly involved in response efforts.

Key words: COVID-19, Health policy, Qualitative study, Schools

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Poster 14

Age-Specific Determinants of Resistance Exercise Participation: The Role of Health Literacy in Young-old and Old-old Adults

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Background: Resistance exercise is an important health behaviour for older adults, improving physical function and performance by increasing muscle mass and strength, and is a first-line treatment for sarcopenia and frailty. As health literacy influences the ability to obtain information from different sources, it is expected that individuals with higher health literacy will not only have better access to resistance exercise information, but also higher participation rates.

Objective: This study aimed to identify factors influencing resistance exercise participation among older adults, focusing on differences between young-old (65–74 years) and old-old (≥75 years) adults.

Methods: Data from the Korean National Health and Nutrition Examination Survey, including 1,590 older adults, were used. Resistance exercise participation was assessed based on adherence to the World Health Organization's guideline of at least two weekly sessions. Logistic regression analyses identified factors associated with resistance exercise participation.

Results: For young-old adults, being female and living in rural areas posed significant barriers. For old-old adults, being female, widowed, and in other marital categories hindered resistance exercise participation, whereas health literacy and living alone were positively linked with engagement.

Conclusion: Age-specific interventions are crucial to promote older adults' resistance exercise participation. Healthcare providers must understand the unique characteristics and differences across age groups to develop tailored approaches. Resistance exercise interventions for old-old adults should consider their health literacy.

Key words: Health literacy, older adult, old-old adult, Resistance exercise, young-old adult

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Poster 15

Home Discharge Rate and Related Factors in Patients Receiving Home Mechanical Ventilation

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Background: The increasing number of patients being discharged with home mechanical ventilation (HMV) highlights the need for evidence-based discharge planning to ensure continuity and safety of care in the home setting.

Objective: This study aimed to examine the rate of home discharge and identify related factors in patients receiving HMV.

Methods: A retrospective observational study was conducted including 132 patients discharged from the divisiom of respiratory allergy medicine at a tertiary hospital in B City between January 2020 and October 2024. Data were extracted from electronic medical records based on a structured form comprising 21 items, including general, disease-specific, and health-related characteristics, HMV-specific variables at discharge, and care needs. Statistical analyses included descriptive statistics, chi-square tests, Fisher's exact tests, and independent t-tests.

Results: Of the 132 patients, 48 (36.4%) were discharged to home. Higher discharge rates were observed among those who were employed, cared for by family members, had a moderate or lower Charlson Comorbidity Index, no ICU admission history, or ICU stays shorter than seven days. Patients fitted with a mask interface, with the HMV mode set to noninvasive ventilation (NIV), receiving HMV only at night, and with an average daily application time of less than 15 hours showed higher rates of home discharge. In addition, patients with elevated PaCO□ levels, moderate ADL scores, and alert levels of consciousness were more likely to be discharged home. Home discharge rates were also significantly higher among patients who did not require suctioning, were not fed via a nasogastric tube, did not have an indwelling urinary catheter, and did not need bowel management using diapers.

Conclusion: These findings emphasize the importance of individualized discharge planning and the development of standardized home care support systems to facilitate safe and sustainable care transitions for patients receiving HMV.

Key words: Home nursing, Mechanical, Patient discharge, Ventilators

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Poster 16

The Influence of Unpleasant Symptoms, Social Support, and Self-Care Behaviors on Quality of Life in Older Patients with Atrial Fibrillation

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Background: Atrial fibrillation is the most common arrhythmia and a serious chronic condition, with its prevalence rapidly increasing due to population aging in South Korea. Older adults with atrial fibrillation often experience unpleasant symptoms such as fatigue and palpitations, which negatively affect their daily lives. In addition, age-related physical decline, limited disease knowledge, reduced social support, and challenges in self-care can further hinder disease management and lower quality of life. Understanding how these factors interact is essential for improving care for this population.

Objective: This study aimed to examine the relationships among unpleasant symptoms, social support, self-care behaviors, and QoL in older adult patients with AF.

Methods: A descriptive survey study was conducted, and 130 elderly outpatients with AF were recruited from S University Hospital in Changwon. Data were collected from December 26, 2024, to February 26, 2025, using a self-reported questionnaire and analyzed using SPSS/WIN 30.0.

Results: The mean quality of life score was 66.34±13.36 out of 90 points. In the correlation analysis, quality of life had a negative correlation with unpleasant symptoms (r= -.652, p<.001) and a positive correlation with social support (r=.238, p=.006). Stepwise regression analysis indicated that unpleasant symptoms (β=-.630, p<.001), subjective economic status (β=.178, p=.006), experience of AF education (β=.134, p=.037), and social support (β=.133, p=.039) had a statistically significant effect on QoL, collectively explaining 48.8% of the variance (adjusted R2=.488, F=31.697, p<.001).

Conclusion: This study highlights the significant impact of unpleasant symptoms on the QoL of older adults with atrial fibrillation, indicating the urgent need to develop and implement symptom management programs tailored to this population. Furthermore, these findings highlight the need for integrated care strategies that consider patients' AF education experience, economic status, and social support. Nurses should play a key role in providing patient-centered interventions that address both clinical and psychosocial needs.

Key words: Aged, Atrial fibrillation, Quality of life, Signs and Symptoms, Social support

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Poster 17

Comparison of Health Behaviors, Psychological, and Clinical Characteristics by Coronary Artery Disease Status in Patients with Metabolic Syndrome

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Background: Coronary artery disease (CAD) is a leading cause of morbidity and mortality in patients with metabolic syndrome.

Objective: This study aimed to compare health behaviors, psychological, and clinical characteristics based on CAD status among patients with metabolic syndrome.

Methods: Participants aged 40 to 69 with metabolic syndrome were recruited. Health behaviors (self-management, physical activity, and diet), psychological characteristics (self-efficacy for managing chronic disease, stage of behavior change, sleep quality, depression, and quality of life (QOL)), and clinical characteristics (body mass index (BMI), waist circumference (WC), blood pressure (BP), blood glucose (BG), HbA1c, lipid profiles, and genetic predisposition) were collected from April to September 2024. Qualitative interviews explored participants' perceptions, experiences, and lifestyle habits. Interview data were analyzed using content analysis.

Results: A total of 208 participants were included. Compared to those without CAD, patients with CAD were more likely to be male and smokers but less likely to have diabetes. They also reported significantly higher self-efficacy for managing chronic disease, better sleep quality, lower depression, and higher QOL. They also exhibited lower BMI, more normal WC, lower BP, BG, HbA1c, total cholesterol, and LDL levels. A significantly higher proportion had the CG genotype of rs1801282. Qualitative analysis in the CAD group revealed four main categories: 'Post-procedural lifestyle changes,' 'Pre-procedural physical activity and stress,' 'Needed support prior to the procedure,' and 'Perceived causes of CAD.' In the non-CAD group, main categories included: 'Stress and coping in daily life,' 'Barriers to regular exercise,' 'Efforts to prevent complications,' and 'Obstacles and needs for complication prevention.'

Conclusion: Patients with CAD's health behaviors did not differ from those without CAD, indicating that a cardiac event alone does not drive lasting behavior change. Targeted secondary prevention interventions to support and sustain health behaviors in patients with metabolic syndrome are needed.

Key words: Coronary Artery Disease, Health Behavior, Metabolic Syndrome

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Poster 18

Nursing Students' Experiences of Forming a Therapeutic Relationship with Older Patients with Dementia in Long-Term Care Hospitals

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Background: The prevalence of dementia-a geriatric disease-has been dramatically increasing. As numbers have been geometrically increasing, the social demand for dementia nursing care is also very high. In this era of a super-aged society, health professionals are required to play a role in helping patients with dementia maintain a therapeutic relationship with caregivers, and establishing a supportive environment for dementia management. These aspects should also be considered in education for nursing students, who are expected to be nurses.

Objective: The aim of this study was to describe and understand the meaning and nature of the process of forming a therapeutic relationship among nursing students working with older patients with dementia in long-term care hospitals.

Methods: In-depth interviews were conducted with 10 nursing students from September to October 2024, and examined and described the collected data, based on Colaizzi's phenomenological method.

Results: A total of 17 theme clusters and five categories were derived from the nursing students' experiences. The five categories were as follows: scheduling a meeting with unknown person, beginning exploration to build a relationship, struggling to maintain a therapeutic relationship, obstacles to maintaining a relationship, and witnessing myself growing in a therapeutic relationship.

Conclusion: Based on this study's results, efforts should be made in the field of nursing education for the development and implementation of various training programs to reinforce nursing students' competencies to care for older patients with dementia through consistent interactions and exchanges with field practitioners.

Key words: Dementia, Nurse-patient relations, Nursing, Qualitative research, Students

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Poster 19

Effect of Disaster Nursing Education Program using the Korean Triage and Acuity Scales (KTAS) on Nursing Students

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Background: To ensure that nurses are prepared for disaster situations, nursing students need to receive disaster education from the early stages of their training. Teaching nursing students how to use emergency patient triage tools is crucial for developing their ability to rapidly classify patients according to severity during disaster response. This competency is a key element that should be addressed in disaster response training.

Objective: This study aimed to examine the effect of a disaster nursing education program using the Korean Triage and Acuity Scale (KTAS) on nursing students' competency in emergency patient triage, core competency in disaster nursing, confidence in disaster nursing, and self-efficacy in disaster response.

Methods: This study utilized a nonequivalent control group design. The experimental group (n=25) participated in a disaster nursing education program that incorporated the KTAS, while the control group (n=27) received only a basic review lecture on disaster nursing. Data were analyzed using descriptive statistics and t-tests.

Results: There were significant differences in competency in emergency patient triage between the groups (t=3.42, p=.001). Similarly, confidence in disaster nursing also showed significant differences between the groups (t=2.51, p=.015). However, core nursing competency and self-efficacy in disaster response did not show significant differences. Additional comments indicated a need for education on various topics across different stages of disaster management. In the preparedness phase, there was a demand for education on the types of natural disasters, and methods for managing disasters. In the response phase, the need for education included trauma and emergency care during disasters, the role of nurses in disaster nursing, the nursing delivery system during a disaster, and response strategies for infectious diseases.

Conclusion: This study demonstrated that a disaster nursing education program utilizing the KTAS significantly improved nursing students' competency in emergency patient triage and enhanced their confidence in disaster nursing.

Key words: Disasters, Emergency nursing, Triage

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Poster 20

Effects of Nursing Students' Child Abuse Awareness, Child Abuse Knowledge, and Attitudes Toward Reporting Child Abuse of Reporting Intention on Child abuse

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Background: This is a descriptive survey study to determine the effects of nursing students' child abuse awareness, child abuse knowledge, and child abuse reporting attitudes of reporting intention on child abuse.

Objective: This study aims to determine the extent of child abuse awareness, child abuse knowledge, child abuse reporting attitude and child abuse reporting intention among nursing students, and to investigate the relationship between the variables to determine the factors that influence child abuse reporting intention among nursing students.

Methods: This study was conducted from May 1, 2024, to May 31, 2024, among nursing students enrolled in a university located in Busan, Korea. Only university students who understood the purpose and objectives of the study and voluntarily agreed to fill out the questionnaire were included, and 315 subjects participated in the survey, and 300 copies were used for the final analysis.

Results: The study subjects' awareness of child abuse was 3.80±.75, knowledge of child abuse was 3.50±.73, and attitude toward reporting child abuse was 3.20±.85. When analyzing the intention to report child abuse according to general characteristics, there were no statistically significant differences in child abuse awareness, child abuse knowledge, and child abuse reporting attitude. Intention to report child abuse was positively correlated with child abuse awareness (r=.581, p<.001), child abuse knowledge (r= .439 p<.001), and child abuse attitude (r=.267 p<.001). Multiple regression analysis showed that child abuse awareness (B=.496, p<.001) was the variable that significantly influenced nursing students' intention to report child abuse, and the explanatory power of the variable on intention to report child abuse was 35.5%.

Conclusion: It is necessary to develop curricula and programs that include intervention strategies to improve nursing students' awareness and knowledge of child abuse and their attitudes toward reporting child abuse.

Key words: Awareness, Child abuse, Knowledge, Reporting attitudes, Reporting intention

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Poster 21

Effects of Self-Esteem, Resilience, and Nurse Image on Career Identity in Nursing Students

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Background: Career identity is a crucial factor for nursing students, influencing their career choices, professional adaptation, and retention. While previous studies have examined the impact of self-esteem and major satisfaction, few have explored the combined effects of self-esteem, resilience, and nurse image on career identity.

Objective: This study aimed to investigate the relationships among self-esteem, resilience, nurse image, and career identity in nursing students, and to identify the key factors affecting career identity.

Methods: A cross-sectional descriptive study was conducted with 400 nursing students enrolled in one university in Busan, Korea. Data were collected using structured self-administered questionnaires, and 360 valid responses were analyzed. The instruments measured self-esteem, resilience, nurse image, and career identity. Data were analyzed using t-tests, ANOVA, Pearson's correlation, and multiple regression analysis with SPSS 25.0.

Results: The mean scores were 4.20±0.65 for self-esteem, 4.04±0.70 for resilience, 1.70±0.77 for nurse image, and 3.10±0.64 for career identity. Career identity showed significant positive correlations with self-esteem ($r=0.631$, $p<.001$) and resilience ($r=0.631$, $p<.001$), and a negative correlation with nurse image ($r=-0.386$, $p<.001$). Multiple regression analysis identified employment motivation, self-esteem, and resilience as significant predictors of career identity ($F=113.67$, $p<.001$), explaining 49% of the variance.

Conclusion: Self-esteem, resilience, and nurse image significantly influence the career identity of nursing students. To enhance career identity, it is necessary to develop integrated programs that foster positive self-image, strengthen resilience, and improve perceptions of the nursing profession. Future research should explore the long-term effects of such interventions and consider additional factors that may impact career identity in diverse nursing student populations.

Key words: Career identity, Nurse image, Nursing students, Resilience, Self-esteem

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Poster 22

Development of Competence-Based Medication Safety Education Program for Nurses by Clinical Ladder Stage

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Background: Nurses are instrumental in ensuring the safety of medication safety, making it essential to enhance their competencies in this area However, the education of nurses for improving medication safety is inadequate and lacks a systematic approach. To foster the development of highly competent nursing professionals in clinical settings, it is essential to design a structured educational program that supports the continuous advancement of nurses' skills, tailored to their evolving clinical experience and aligned with their clinical career stages.

Objective: We aim to develop a competence-based medication safety education program for nurses, with evaluation at each clinical ladder stage.

Methods: A total of 117 participants were participated from November 2023 to January 2024 in Gwangju, South Korea. Participants were divided into four groups according to clinical experience: novice (mean 6.90 months), advanced novice (mean 29.57 months), competent (mean 66.66 months), and proficient (mean 143.93 months). Each group had an experimental and control group. The experimental group received a competence-based medication safety program, while the control group received paper-based materials with identical content. Outcomes were assessed at three time points and included nursing organizational culture (relationship-oriented culture, innovation-oriented culture, hierarchy-oriented culture, and task-oriented culture), communication competence, medication safety competence, and patient safety culture. The data were analyzed using generalized estimating equations.

Results: A significant three-way interaction (group × career stage × time) was found for hierarchy-oriented culture and medication safety c ompetence. Additionally, significant group × time interaction effects were observed for relationship-oriented culture, innovation-oriented culture, task-oriented culture, medication safety competence, and patient safety culture.

Conclusion: The competence-based medication safety education program effectively improved medication safety competence across different clinical ladder stages and positively influenced organizational and patient safety culture among nurses.

Key words: Clinical ladder system, Competence-based, Generalized estimating equations, Medication safety competence

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Poster 23

Educational Needs and Priorities for Pediatric Emergency Nursing Based on Clinical Experience

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Background: Children often have difficulty articulating their symptoms, and their physiological characteristics vary significantly by age. These factors necessitate specialized clinical judgment and prompt nursing interventions during emergencies, which can directly affect outcomes. In Korea, however, pediatric emergency centers are limited in number, and most emergency departments provide care for both adults and children, making it difficult to deliver pediatric-specific nursing. Furthermore, practical training in pediatric emergency care is insufficient due to limitations in clinical education environments.

Objective: This study aimed to identify the educational needs of nurses working in emergency rooms, pediatric wards, and intensive care units regarding pediatric emergency conditions. It further sought to prioritize educational content using Borich Needs Assessment and the Locus for Focus Model.

Methods: A descriptive survey was conducted from October to December 2024, targeting 215 nurses working at general hospitals in Busan, Gyeongnam, and Gyeongbuk, South Korea. Data collected included general characteristics (e.g., age, type of hospital, clinical and pediatric nursing experience), self-assessed care competency in pediatric emergency conditions and perceived educational needs. Data were analyzed using IBM SPSS Statistics 27.0, including descriptive statistics and paired t-tests. Educational priorities were determined using the Borich Needs Assessment and the Locus for Focus Model.

Results: Pediatric emergency care competency significantly differed according to education level (F=3.04, p=.050) and pediatric nursing experience (F=3.72, p=.012). However, no statistically significant differences were found in educational needs based on general characteristics. According to the Borich analysis, the highest educational needs were idenfified for status epilepticus (5.82), anaphylaxis (5.42), and asthmatic attack (5.20), in that order. The Locus for Focus model also confirmed these three conditions as high-priority areas for educational needs.

Conclusion: This study provides evidence to support the development of pediatric emergency nursing education, emphasizing the need for practical training on status epilepticus, anaphylaxis, and asthmatic attack for nursing students and new nurses.

Key words: Child care, Education, Emergency nursing, Needs assessment

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Poster 24

The Effects of Virtual Reality Simulation-Based Protocol Containing Problem Situation in Novice Nurses

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Background: Novice nurses often struggle with the transition from theory to clinical practice, especially when facing unpredictable problem situations. Traditional training lacks opportunities to build decision-making and coping skills in real-life contexts. This study developed a Virtual Reality simulation-based protocol containing problem situations to strengthen clinical skill confidence, self-efficacy, and critical thinking in novice nurses.

Objective: To evaluate the effects of a problem-situation-based Virtual Reality simulation on nursing skill confidence, self-efficacy, and critical thinking in novice nurses.

Methods: This study included 56 novice nurses in Korea. Data were analyzed using descriptive statistics (percentages, means, and standard deviations), χ^2 tests, independent t-tests, rank ANCOVA, and ANCOVA. All analyses were conducted using SPSS version 26.0.

Results: A total of 56 novice nurses participated, and baseline homogeneity between the experimental and control groups was confirmed. After the intervention, the experimental group showed a significant improvement in nursing skill confidence (from 5.4 to 8.6) compared to the control group (from 5.3 to 6.7; $F = 49.10$, $p < .001$). No statistically significant differences were found in self-efficacy and overall critical thinking disposition. However, among the subdomains of critical thinking, skepticism significantly increased in the experimental group ($F = 11.61$, $p = .001$).

Conclusion: The problem-situation-based VR simulation effectively enhanced nursing skill confidence and critical thinking (specifically skepticism) in novice nurses. Although self-efficacy did not show significant improvement, the structured, realistic scenarios and immediate feedback provided by the simulation supported safe and active skill practice. This approach offers a promising direction for standardized education programs aimed at improving clinical readiness and care quality among novice nurses.

Key words: Critical thinking, Nurses, Newly graduated, Simulation training, Self efficacy, Virtual reality

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Poster 25

Metacognition in Nursing Education in Korea: A Scoping Review

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Background: Metacognition can be defined as a series of cognitive processes that encompass planning, analysing, controlling, and evaluating thoughts when retrieving knowledge from long-term memory to compare it with new information. It is required for achieving cognitive integration and promoting self-directed learning.

Objective: This study aimed to explore and synthesise the research trends on metacognition in nursing education for nurses and nursing students in South Korea.

Methods: A scoping review was conducted in accordance with the updated methodological guidance of the Joanna Briggs Institute and the PRISMA Extension for Scoping Reviews. Four major databases in Korea—DBpia, KISS, RISS, and ScienceON—were searched for articles without limiting publication year. Out of 585 articles searched regarding metacognition in nursing, after removing duplicates, 386 articles were screened based on the predetermined inclusion and exclusion criteria. A total of 82 articles were included in the review.

Results: The majority of the included studies were focusing on nursing students, whereas only three were targeting nurses. Of the 79 studies on nursing students, 27 examined metacognition as an outcome of educational interventions or teaching methods. In 42 studies, metacognition was measured for its impact on other variables, often assessed with critical thinking, clinical competence, or problem-solving ability. Four studies explored it as a mediating factor, while four studies examined whether the levels of metacognition could affect other outcome variables. Metacognitive strategies were applied in three studies and one study was adopted concept analysis about metacognition of nursing students. In two qualitative studies, metacognition was derived from nursing students' learning experiences.

Conclusion: The findings of this review revealed that research on metacognition of nurses was scarce. Further studies should implement on clinical settings and develop practically effective metacognitive strategies for both nursing students and nurses.

Key words: Metacognition, Nurses, Nursing education, Nursing students, Scoping review.

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Poster 26

The Effects of AI-Assisted Learning on Nursing Students' Attitudes Toward Artificial Intelligence, Nursing Information Literacy Competency, and Critical Thinking Disposition

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Background: As artificial intelligence (AI) continues to expand in healthcare, it is expected to become an essential tool in future clinical nursing practice. To prepare students for this shift, nursing education must incorporate AI-integrated teaching methods. This study explored the effects of AI-assisted learning on students' attitudes toward AI, nursing information literacy competency, and critical thinking disposition.

Objective: To examine the effects of AI-assisted learning on nursing students' attitudes toward artificial intelligence, nursing information literacy competency, and critical thinking disposition.

Methods: A single-group pretest-posttest design involved 54 third-year nursing students enrolled in a Nursing Research course. Over eight weeks, students were introduced to an AI-based platform relevant to nursing research, provided instruction on its usage, and discussed precautions for AI application. Data collection utilized validated tools measuring attitudes toward AI, nursing information literacy competency, and critical thinking disposition. Data were analyzed using descriptive statistics (percentages, means, and standard deviations) and paired t-test using SPSS version 26.0.

Results: Statistically significant improvements were observed in students' attitudes toward artificial intelligence(from 3.6 to 3.7; t=2.44, p=.018), nursing information literacy competency(from 3.8 to 4.0; t=3.72, p<.001), and critical thinking disposition(from 3.6 to 3.7; t=2.08, p=.042) after the intervention.

Conclusion: The application of AI-assisted learning over eight weeks proved effective in enhancing students' cognitive readiness for a data-driven healthcare environment. These findings suggest the importance of incorporating AI-assited learning into nursing curricula to improve students' future clinical adaptability.

Key words: Artificial Intelligence, Attitudes Toward Artificial Intelligence, Critical Thinking Disposition, Nursing Education, Nursing Information Literacy Competency

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Poster 27

The Effects of Self-directed Learning, Academic Self-efficacy, and Problem-solving Ability on Academic Achievement in Nursing Students

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Background: Academic achievement is essential for nursing students to succeed both in college and in their future professional roles. Self-directed learning ability, problem-solving skills, and academic self-efficacy have been individually associated with improved academic performance. However, there is a lack of research on the combined impact of these factors in the context of nursing education.

Objective: This study aims to examine the relationships among self-directed learning ability, problem-solving ability, and academic self-efficacy, and their impact on academic achievement in nursing students. It seeks to identify key factors influencing success and provide evidence for developing targeted strategies to support learning outcomes.

Methods: This study examined the influence of self-directed learning ability, academic self-efficacy, and problem-solving ability on academic achievement among third-year nursing students, based on 180 responses. Standardized tools measured self-directed learning with 45 items, academic self-efficacy with 26 items, problem-solving ability with 30 items, and academic achievement with 9 items. Analyses included descriptive statistics, t-tests, one-way ANOVA, Pearson's correlation, and multiple linear regression using IBM SPSS 25.0.

Results: Among the 180 participants, the mean score for academic achievement was 3.39±0.54. The mean score for self-directed learning ability was 3.44±0.45, academic self-efficacy 3.67±0.60, and problem-solving ability 3.56±0.58. Academic success showed significant positive correlations with learning ($r = .55$, $p < .001$), self-efficacy ($r = .63$, $p < .001$), and problem-solving ($r = .55$, $p < .001$). Multiple regression analysis revealed that self-regulated efficacy ($\beta = .38$, $p < .001$), confidence ($\beta = .24$, $p < .001$), and reflective evaluation ($\beta = .21$, $p < .001$) significantly predicted academic success, explaining 49.1% of the variance ($F = 35.47$, $p < .001$).

Conclusion: Self-directed learning, academic self-efficacy, and problem-solving ability were positively related to academic achievement. Academic self-efficacy was the strongest predictor, suggesting the need to enhance this factor in nursing education.

Key words: Academic success, Learning, Nursing student, Problem-solving, Self-efficacy

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Poster 28

Development of an Educational Program for Nurses on Acutely Deteriorating Patients

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Background: Failure to recognize early symptoms of deteriorating patients in hospital wards can lead to fatal incidents, highlighting the importance of nursing education on early detection and intervention to improve patient outcomes. Currently, there are no nursing programs focusing on this issue in emergency medical underserved areas.

Objective: This study aimed to develop an educational program for nurses in these areas to enhance their ability to recognize and intervene in acutely deteriorating patients, ultimately providing foundational data to improve healthcare service quality in underserved regions.

Methods: This study used a methodological approach to develop the educational program based on the ADDIE model, which includes five stages: Analysis, Design, Development, Implementation, and Evaluation. In the Analysis stage, a literature review was conducted to gather relevant information, and a qualitative study was performed by interviewing nurses working in emergency medical underserved areas to understand their experiences with deteriorating patients. A needs assessment and environmental analysis were also conducted to identify the specific challenges and needs in these regions. In the Design stage, the program's goals and objectives were defined based on the findings from the analysis. During the Development stage, the preliminary program was created, including detailed content, teaching strategies, and instructional materials such as teaching plans and exercise scenarios. The program underwent an expert review for validity and relevance. In the Implementation stage, a pilot test was conducted to assess the program's feasibility and effectiveness. Feedback was collected from a sample group of nurses to make necessary modifications. Finally, in the Evaluation stage, the program's effectiveness was confirmed through various evaluation methods.

Results: A nursing education program for acutely deteriorating patients was developed, covering two main areas: early detection and rapid response, as well as situational management. The program was designed to be delivered over 12 hours.

Conclusion: This study is the first to develop an educational program for nurses in emergency medical underserved areas. By understanding the healthcare environment in these regions and applying a specialized nursing education program, this research contributes to improving healthcare service quality. The findings provide foundational data to enhance the quality of care for acutely deteriorating patients in medically underserved areas.

Key words: Nurse, deterioration, education

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Poster 29

Digital Health Interventions for Oncofertility in Cancer Patients: A Systematic Review

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Background: Fertility preservation is increasingly emphasized as a crucial component of cancer care. Despite the growing attention to oncofertility services, many cancer patients still face barriers in accessing them. With the rise of digital health technologies, digital interventions may offer a promising approach to support fertility-related care.

Objective: This study aimed to systematically review and analyze digital interventions for oncofertility targeting cancer patients and survivors, providing foundational insights for future intervention development.

Methods: A systematic literature search was conducted in accordance with PRISMA guidelines across five databases: PubMed, Embase, CINAHL, Cochrane Library, and RISS. The search included articles published up to November 5, 2024. After removing duplicates, articles were screened through title, abstract, and full-text review based on predefined inclusion and exclusion criteria. Study quality was assessed using the RoB 2.0 tool for randomized controlled trials and the RoBINS-I tool for non-randomized studies.

Results: From a total of 17,820 articles, five studies met the inclusion criteria. Four studies targeted cancer patients, and one targeted cancer survivors. Web-based interventions were the most common format. Outcome domains included symptom management, emotional, cognitive, and usability. Notable improvements were reported in emotional outcomes related to fertility stress and cognitive outcomes concerning fertility knowledge.

Conclusion: This systematic review highlights the emerging role of digital interventions in oncofertility care. The findings suggest that digital tools may effectively support emotional and cognitive needs of cancer patients and survivors. There is a need for further research using diverse digital formats and for developing personalized interventions that enhance information delivery and emotional support in oncofertility contexts.

Key words: Digital Health, Female, Fertility, Neoplasms, Systematic Review

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Poster 30

Development of a Mapping Table for Nursing Notes Based on Nursing Surveillance Activities in Cholecystectomy Patients

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Background: Nursing surveillance (NIC) is a critical intervention involving the purposeful and continuous assessment of patient data to anticipate risks and enhance safety. However, limited research exists on how well surveillance is documented in clinical settings.

Objective: This study aimed to develop a mapping table to identify nursing surveillance activities embedded in nursing notes of postoperative cholecystectomy patients.

Methods: A retrospective descriptive study was conducted using nursing notes from 1,082 patients who had cholecystectomy between January 2022 and September 2023 in a tertiary hospital in South Korea. The DAR components were mapped to 16 nursing surveillance activities developed by Kim & Cho (2023), with researcher agreement confirmed through iterative review to finalize the mapping table.

Results: The most frequently documented surveillance activities were: monitoring vital signs (n=33,843), assessing coping strategies of patients and families (n=33,666), and anticipating problems based on comprehensive judgment (n=8,049). Surveillance activities involving participation in decision-making and communication with physicians were found to be insufficiently documented.

Conclusion: The mapping table can support surveillance visibility, inform clinical education, and improve documentation practices. Through this study, the extent and characteristics of nursing surveillance activities performed in actual clinical settings were identified, and areas requiring further surveillance in practice were suggested.

Key words: Cholecystectomy, Mapping, Natural language processing, Nursing notes, Nursing surveillance

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Poster 31

The Effectiveness of Virtual Reality Simulation in Range of Motion Rehabilitation among Nursing Students

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Background: Virtual reality (VR) has emerged as an innovative educational tool in nursing, offering immersive and repeatable learning experiences. As nursing education increasingly emphasizes experiential learning, VR provides a promising alternative to traditional methods for developing clinical skills.

Objective: This study aimed to examine the effects of a virtual reality simulation (VRS) based range of motion (ROM) rehabilitation exercises on clinical performance, self-efficacy, learning immersion, and learning confidence among nursing students.

Methods: This quasi-experimental study was conducted with 37 nursing students. The experimental group (n=19) participated in the VRS while the control group (n=18) engaged in the standardized patient simulation (SPS). Data were analyzed using descriptive statistics, the Mann-Whitney U test, the independent t-test, paired t-test, and Wilcoxon signed rank test with IBM SPSS Windows version 26.0.

Results: There were no statistically significant differences between the experimental and control groups in clinical performance (U=0.29, p=.518), self-efficacy (t=0.51, p=.475), learning immersion (t =0.30, p=.587), and learning confidence (t=0.26, p=.613). However, within-group analysis revealed a significant improvement in learning confidence in the experimental group after the intervention (t=2.446, p=.025), whereas no such change was observed in the control group (t=1.37, p=.186).

Conclusion: The VRS was effective in enhancing learning confidence within the experimental group. These findings suggest that VRS may serve as a valuable supplementary tool in nursing education to foster learner confidence, particularly in clinical skill training contexts. Furthermore, this study contributes to the growing body of evidence supporting incorporating virtual reality technologies into nursing curricula as an innovative strategy to enhance educational outcomes and promote active student engagement in clinical practice.

Key words: Clinical performance, Rehabilitation, Self-efficacy, Virtual reality

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Poster 32

The Effects of Neurofeedback on Depression, Anxiety, and Post-Traumatic Stress Symptoms: A Systematic Review and Meta-Analysis

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Background: Neurofeedback gives real-time to patient biofeedback using neurophysiological signals. Neurofeedback have been implemented as a non-pharmacological treatment of depression, anxiety, and post-traumatic stress symptoms. However, the effectiveness of neurofeedback is still controversial.

Objective: The purpose of this study was to review literature that examine the effects of neurofeedback for adults on depression, anxiety, and post-traumatic stress symptoms

Methods: Randomized controlled trials (RCT) of adults who had done neurofeedback met the inclusion and exclusion criteria. A total of 8 studies that published articles on Neurofeedback programs for adults were investigated using the systematic review method. The Cochrane's Risk of Bias was applied to assess the internal validity of the RCT. A total of 6 studies were included in the final analysis using the RevMan software 5.4 program.

Results: Neurofeedback effects depending upon the neurofeedback device, study participants, intervention period, and total sessions. As a results of meta-analysis, the effect size (Hedges' g) was -0.26 (95% CI: -0.59, 0.06) for depression, 0.30 (95% CI: -0.70, 0.09) for anxiety, and 0.76 (95% CI: -1.30, -0.22) for post-traumatic stress symptoms.

Conclusion: The results of this study show that neurofeedback is effective therapy that could decrease depression, anxiety, and post-traumatic stress symptoms. It has potential to provide integrative non-pharmacological management. Therefore, it is suggested that developing standardized neurofeedback programs for adults make efficient use of these programs.

Key words: Anxiety, Depression, Neurofeedback, Post-traumatic stress symptoms

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Poster 33

Mediating Effect of Shared Decision-Making on the Relationship Between Patient Activation and Self-Management in Patients on Hemodialysis

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Background: Patient activation and self-management are essential for improving treatment outcomes in hemodialysis patients, and the importance of shared decision-making to promote these aspects is increasingly emphasized.

Objective: This descriptive correlational study aimed to evaluate the influence of patient activation on self-management and to explore the mediating role of shared decision-making (SDM) among patients on hemodialysis

Methods: A cohort of 136 participants was recruited from hemodialysis units in G City. Patient activation, self-management, and SDM were assessed using the Patient Activation Measure (PAM-13), Hemodialysis Self-Management Instrument (HDMI-K), and 9-item Shared Decision-Making Questionnaire (SDM-Q-9).

Results: Significant positive correlations were identified between patient activation and self-management ($r = .68$, $p < .001$) and between patient activation and SDM ($r = .47$, $p < .001$). Furthermore, a notable positive correlation was observed between self-management and SDM ($r = .52$, $p < .001$). Mediation analysis indicated that SDM partially mediated the relationship between patient activation and self-management (indirect effect = 0.05, 95% CI [0.02, 0.10]).

Conclusion: The findings suggest that elevated levels of patient activation enhance self-management behaviors and that SDM plays a pivotal role in this process. Systematic strategies are required to assist patients in comprehending their health status and treatment options and in collaborating with healthcare professionals to make optimal treatment decisions. Nurses should establish nurse-led SDM models and facilitate their practical applications to bolster patients' self-management capabilities.

Key words: Hemodialysis; Patient activation; Self-management; Shared decision-making

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Poster 34

Preliminary Study of the Effectiveness of a Mobile App-Based Health Management Program for Community-Dwelling Vulnerable Older Adults with Multimorbidity: A Non-Randomized Controlled Trial

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Background: As South Korea enters a super-aged society, there is an increasing demand for the development and implementation of more proactive, community-based health management programs targeting older adults with chronic diseases in vulnerable populations. Such efforts are essential to improve healthcare accessibility and address health disparities among elderly individuals at risk.

Objective: This preliminary study aims to evaluate the effectiveness of a health management program utilizing a mobile application based on the Information-Motivation-Behavioral Skills model for community-dwelling vulnerable older adults with multimorbidity.

Methods: A non-equivalent control group pre-post-test design was used. Participants were 58 community-dwelling vulnerable older adults with multimorbidity. The experimental group participated in six weeks health management program that combined the use of a mobile application with face-to-face group sessions based on the Information-Motivation-Behavioral skills model. During the same period, the comparative group used only the mobile application, while the control group did not participate in any program. SPSS 28.0 was used for the statistical analysis.

Results: Compared to the control group, the experimental and comparative groups showed a significant increase in health literacy and self-efficacy. Compared to the comparative and control groups, the experimental group showed significant improvement in subjective health status.

Conclusion: These findings indicate that the health management program utilizing a mobile application is an effective intervention for community-dwelling vulnerable older adults with multimorbidity. The program proved to be a feasible and effective approach for enhancing health behavior competencies and improving health outcome factors by providing knowledge about chronic disease management and motivating individuals toward health behaviors.

Key words: Aged, Health literacy, Multimorbidity, Self-efficacy, Vulnerable population

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Poster 35

Path Analysis of Health Behaviors for Cardiovascular Disease Prevention in Postmenopausal Women: Insights from the I-Change Model

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Background: Cardiovascular diseases (CVD) are a major cause of mortality, with postmenopausal women facing a heightened risk owing to hormonal changes, which exacerbate cardiovascular complications. Despite this vulnerability, many postmenopausal women remain unaware of their risks and show low participation in preventive health behaviors, highlighting the urgent need for targeted interventions.

Objective: This study applied the Integrated Change (I -Change) model as a theoretical framework and aimed to identify the predictors influencing CVD-preventive behaviors in postmenopausal women.

Methods: A total of 227 postmenopausal women living in a community in South Korea were recruited, and data were collected through an online survey. A hypothetical model was proposed to examine the relationships among knowledge, risk perception, attitude, social support, intention, and CVD-preventive health behaviors. For the statistical analysis, path analysis was performed. The indirect mediation effects of attitude, self-efficacy, social support, and intention on CVD knowledge and CVD risk perception on health behaviors hypothesis testing were performed using 2,000 bootstrap test.

Results: The findings showed that CVD knowledge had a direct effect on attitude ($\beta = .21$, $p < .001$); self-efficacy ($\beta = .15$, $p = .021$); and social support and intention ($\beta = .38$, $p < .001$). Self-efficacy ($\beta = .37$, $p < .001$) and intention ($\beta = .38$, $p < .001$) had direct effects on CVD health behavior. Moreover, knowledge, mediated by self-efficacy ($\beta = .06$, $p = .021$) and health behavioral intention ($\beta = .063$, $p = .018$), were significantly and positively associated with health behaviors through an indirect pathway. The final model explained 48.7% of the variance in health behaviors.

Conclusion: This study demonstrates that self-efficacy and intention play key roles in translating knowledge about CVD into preventive health behaviors in postmenopausal women. These factors act as crucial mediators, and interventions that enhance self-efficacy and foster strong behavioral intentions can effectively improve CVD prevention efforts in this population.

Key words: cardiovascular disease; health behaviors; I-Change model; menopause

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Poster 36

The Impact of Lifestyle and Genetic Factors on Cardiovascular Disease: Insights from a Genome-wide Association Study (GWAS)

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Background: Cardiovascular disease (CVD) is a leading global cause of death, with its prevalence continuing to rise. Since genetic variants and lifestyle factors may influence CVD differently across populations, studies are needed to examine their effects in the Korean population.

Objective: This study aimed to identify single nucleotide polymorphisms SNPs associated with CVD and assess the effects of genetic and lifestyle factors using data from the Korean Genome and Epidemiology Study (KoGES).

Methods: This study performed secondary data analysis using the HEXA cohort (Phase 1) of the KoGES. A genome-wide association study (GWAS) was conducted on 26,429 participants, including 1,909 patients with CVD and 24,520 healthy participants. Sex-stratified analyses were conducted on 17,309 females, including 891 in the CVD group and 16,418 in the healthy group, and 9,120 males, including 1,018 in the CVD group and 8,102 in the healthy group. Plink 1.9 was used to identify SNPs associated with CVD, and IBM SPSS Statistics version 27.0 was used to assess the impact of genetic and lifestyle factors on CVD risk.

Results: Based on our analysis, nine SNPs were identified as significantly associated with CVD in the Korean population, including rs8086325 and rs4818369. Sex-specific analyses revealed notable differences in genetic contributions; in males, SNPs such as rs79682491 in the IDO2 gene, rs2540719 and rs2576541 in the MMP2-AS1 gene and rs60799116. In females, rs76830381 in the ADGRL2 gene, rs6496602 in the MESP2 gene and rs8086325 was the most significant. Sex, age, occupational status, income, BMI, smoking, nutrient intake in protein and SNPs were significantly associated with CVD risk.

Conclusion: This study demonstrates the associations of genetic and lifestyle factors in the prevention and management of CVD. Since CVD-related characteristics, lifestyle factors, and genetic factors differ by sex, effective interventions should incorporate sex-specific, genetic, and lifestyle considerations.

Key words: Cardiovascular diseases, Genome-wide association study, Heart disease risk factors

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Poster 37

Variables Associated with Standard Precautions Compliance among Hospital Nurses: A Systematic Review and Meta-Analysis

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Background: The implementation of Standard Precautions is essential for infection prevention, and nurses play a central role in the infection control process. Therefore, a comprehensive synthesis of variables related to Standard Precautions compliance among hospital nurses is needed to support efforts to improve compliance.

Objective: This study aimed to perform a systematic review and meta-analysis to identify the variables associated with Standard Precautions compliance among hospital nurses and to examine their effect sizes comprehensively.

Methods: A systematic review and meta-analysis were reported using the PRISMA and MOOSE guidelines. The KMbase, KoreaMed, KISS, ScienceON, RISS, Nanet, DBpia, PubMed, Embase, CINAHL, and CENTRAL databases were searched to retrieve studies published in English and Korean. Data collection was conducted from July 6 to 16 2024. The R program (version 4.4.1) was used.

Results: Of the 2,321 studies screened, 50 were included in the systematic review and 41 in the meta-analysis. Variables were categorized using the ecological model. The variables with the medium effect sizes (ESr ≥ 0.30) among individual factors were self-efficacy [ESr=0.41, 95% CI 0.24 to 0.56], perceived barriers [ESr=-0.35, 95% CI -0.59 to -0.05], cues to action [ESr=0.34, 95% CI 0.07 to 0.57], and perceived benefits [ESr=0.30, 95% CI 0.13 to 0.46]. Among organizational factors, organizational culture for infection control [ESr=0.47, 95% CI 0.39 to 0.54], and patient safety culture [ESr=0.44, 95% CI 0.35 to 0.53] showed the medium effect sizes. Other statistically significant variables with small effect sizes were also identified. No variables were identified within the interpersonal, community, or public policy factors.

Conclusion: This study provides substantial evidence regarding the variables associated with Standard Precautions compliance in hospital nurses, highlighting the critical role of individual and organizational factors. By addressing these variables, efforts can be directed toward reducing healthcare-associated infections, promoting safe nursing care for patients while improving Standard Precautions compliance in hospital nursing settings.

Key words: Meta-Analysis, Nurses, Systematic Reviews, Universal Precautions

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Poster 38

The Influence of Nurse-Physician Communication and Nursing Work Environment on Patient Safety Nursing Activities among Emergency Nurses

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Background: Patient safety nursing activities are systematic nursing activities to ensure patient safety and prevent possible accidents during the treatment process in the hospital. The emergency room is a department with a high risk of patient safety accidents due to the frequent use of emergency drugs and overcrowding in the emergency room. Emergency nurses are the first group to face issues related to patient safety in the hospital and play a critically important role in ensuring patient safety.

Objective: This study aimed to identify the influence of nurse-physician communication, nursing work environment on patient safety nursing activities in emergency room.

Methods: A cross-sectional descriptive study was conducted using self-report questionnaire. The participants were 160 emergency department nurses in twelve hospitals. Data were collected from June 17 to June 30, 2024 and analyzed using the independent t-test, one-way ANOVA, Pearson correlation, and multiple linear regression using the SPSS/WIN 26.0 program.

Results: The mean score of nurse-physician communication was 3.67±0.58, nursing work environment was 3.66±0.66 and that of emergency department nurse's patient safety nursing activity was 4.11±0.46. Patient safety nursing activities showed statistically significant differences based on age (F=3.34, p=.038), total clinical careers (F=3.44, p=.034), and clinical careers in emergency (F=3.17, p=.044). There was a significant positive correlation between patient safety nursing activities and the nursing work environment (r=.60, p<.001). The influential factors on the emergency department nurse's patient safety nursing activity were identified as the nursing work environment (β=.60, p<.001) and clinical careers in emergency (β=.17, p=.021), and the explanatory power of these variables were 37.1% (F=14.38, p<.001).

Conclusion: Research results suggest that institutional support to enhance the nursing work environment, tailored programs based on their experience, and patient safety education to improve patient safety nursing activities among emergency department nurses.

Key words: Communication, Emergency nursing, Safety nursing activity, Work environment

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Poster 39

Nurse's Good Death Recognition and Attitude Toward Life-Sustaining Treatment

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Background: Since the introduction of the life-sustaining treatment (LST) decision-making system, patients' right to self-determination has been strengthened. With the increasing number of patient deaths in hospitals, the role of nurses in LST decision-making has become more significant. Nurses' perceptions of death are crucial, as a greater awareness of a good death has been shown to positively influence end-of-life nursing attitudes and impact decisions regarding LST. This study aimed to examine nurses' perceptions of a good death and their attitudes toward LST, and the influence of these perceptions on their attitudes toward LST.

Objective: Participants were nurses working in oncology wards, emergency rooms, and intensive care units, where patient deaths are frequently experienced. A total of 104 nurses were included in the study.

Methods: Data were collected using structured questionnaires, and analyzed using a t-test, one way ANOVA, Pearson correlation coefficients, and a multiple regression analysis with SPSS 28.

Results: As a result of the study, perception of a good death was found to be significantly and positively correlated with attitudes toward LST ($r = .261$, $p = .008$). Additionally, perceptions of a good death ($\beta = .26$, $p = .005$) and gender ($\beta = .32$, $p < .001$) were identified as factors influencing attitudes toward LST, explaining 16% of the variance ($F = 10.443$, $p<.001$)

Conclusion: This study found that nurses with higher perception of a good death exhibited more negative attitudes toward LST, reflecting their emphasis on patients' quality of life and dignity. Systematic education and support are needed to help nurses mediate and fulfill their role as counselors in LST decision making while addressing patient and family needs.

Key words: Attitude to death, Death, Life support care, Terminal care, Terminally ill

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Poster 40

Effects of Compassion Fatigue, Resilience and the Communication Ability on the End-of-Life Care Performance of Hospice Nurses

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Background: End-of-life (EOL) care helps terminal patients reduce anxiety about death and facilitates a meaningful conclusion to life, highlighting its crucial role in hospice setting. Despite its importance, there remains lack of research focusing specifically on hospice nurses, who provide comprehensive care to terminally ill patients and their families in the final stages of life as their main role.

Objective: This study aimed to assess the level of end-of-life care performance and to examine the effects of compassion fatigue, resilience, and communication ability on end-of-life care performance among hospice nurses.

Methods: A total of 150 hospice nurses working hospital or home hospice settings in 16 specialized institutions participated in the study. Data were collected using written or online questionnaires from January 8, 2024 to March 8, 2024. Descriptive statistics, independent t-test, ANOVA, Pearson's correlation coefficient, and multiple linear regression were performed using SPSS Win 29.0.

Results: The mean score for EOL care performance averaged 3.07 out of 4. End-of-life care performance was significantly related to compassion fatigue (r=-.245, p=.003), resilience (r=.515, p<.001), and communication ability (r=.516, p<.001). Multiple regression analysis revealed that resilience (β=.28, p=.042) and communication ability (β=.26, p=.040) significantly associated to EOL care performance, accounting for 28.0% of the variance(F=20.34, p<.001).

Conclusion: To improve the quality of EOL care performance in hospice nurses, targeted interventions that bolster resilience and communication skills should be developed and implemented. These findings highlight the importance of psychological and interpersonal competencies in delivering effective EOL care.

Key words: Communication, Hospice, Resilience, Terminal care

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Poster 41

The Influence of Compassion Satisfaction, Nursing Practice Environment, and Infection Control Fatigue on Burnout Among Intensive Care Unit Nurses

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Background: Intensive care unit (ICU) nurses face high physical and emotional demands due to complex patient care and ongoing infection control. Prolonged exposure to these stressors can lead to burnout, impacting both nurse well-being and patient safety. Compassion satisfaction may serve as a protective factor, while infection control fatigue and poor nursing practice environments may increase burnout risk. Understanding the interplay among these factors is essential for developing effective interventions to support ICU nurses' mental health and ensure a sustainable work environment.

Objective: This study aims to identify the influence of individual factors including compassion satisfaction and infection control fatigue and organizational factors such as the nursing practice environment on burnout among intensive care unit nurses, in order to inform practical strategies for burnout reduction.

Methods: This descriptive study was conducted with 154 ICU nurses who had more than six months of clinical experience. Participants were recruited from two university hospitals in B Metropolitan City and one university hospital in C City, Gyeongsangnam-do. Data were collected between January 31 and February 21, 2023, using a self-administered questionnaire and analyzed using SPSS/WIN 25.0.

Results: The mean burnout score among ICU nurses was 62.63 ± 15.20 (range: 21–95). Burnout was significantly negatively correlated with compassion satisfaction ($r = -.594$, $p < .001$) and the nursing practice environment ($r = -.223$, $p = .005$), and significantly positively correlated with infection control fatigue ($r = .415$, $p < .001$). Stepwise regression analysis identified compassion satisfaction ($\beta = -.535$, $p < .001$) and infection control fatigue ($\beta = .315$, $p < .001$) as significant predictors of burnout, explaining 44.2% of the total variance.

Conclusion: The findings suggest that enhancing compassion satisfaction through simulation-based education and addressing infection control fatigue through organizational support and resource management are essential strategies to reduce ICU nurse burnout and promote sustainable clinical practice.

Key words: Burnout, Fatigue, Infection control, Intensive care units, Nurses

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Poster 42

The Impact of Leader-Member Exchange on Turnover Intention among Competent Nurses: A Two Mediator-Serial Mediation Effect of Team-Member Exchange and Nursing Performance

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Background and Objective: This study aimed to investigate the two-mediator serial mediation effects of team-member exchange and nursing performance on the relationship between leader-member exchange and turnover intention of competent nurses.

Methods: A nationwide online survey was performed using structured questionnaires. Participants were 214 clinical nurses working in tertiary hospitals in South Korea. Data were collected by self-reported questionnaires, including general characteristics, leader-member exchange, team-member exchange, nursing performance, and turnover intention, between September 30 and November 4, 2024. Data were analyzed with descriptive statistics, independent t-test, one-way analysis of variance, Scheffé test, Pearson's correlation coefficient, multiple linear regression analysis, heteroscedastic regression, and bootstrap regression and bootstrapping. The analysis used SPSS/WIN version 29.0 and SPSS PROCESS macro version 4.2 program.

Results: The mean leader-member exchange, team-member exchange, nursing performance, turnover intention score was 4.13±1.02 out of 7, 3.81±0.40 out of 5, 3.12±0.32 out of 4, and 2.78±0.97 out of 5, respectively. Team-member exchange and nursing performance had no two-mediator effect on the relationship between leader-member exchange and turnover intention.

Conclusion: Leader-member exchange is a factor that strengthens team-member exchange and reduces turnover intention of competent nurses. Although the two-mediator effect of team-member exchange and nursing performance was not statistically significant, the mediating effect of team-member exchange between leader-member exchange and turnover intention was significant. Additionally, team-member exchange acted as a mediating factor in the relationship between leader-member exchange and nursing performance. Therefore, to reduce turnover intention of competent nurses and improve nursing performance, it is necessary to prioritize leader-member exchange and implement strategies to enhance team-member exchange.

Key words: Interpersonal Relationships, Mediation Analysis, Nurses, Personnel Turnover, Work Performance

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Poster 43

Nurse Objectification: A Hybrid Concept Analysis

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Background: Nurse objectification occurs when nurses are treated as replaceable tools within hierarchical and capitalist work systems. Despite the unique nature of nursing care, most prior research has focused on mechanical labor roles, leaving a lack of conceptual understanding specific to nurses.

Objective: To clarify the concept of nurse objectification through a hybrid concept analysis.

Methods: This study used Schwartz-Barcott and Kim's (2000) hybrid concept analysis, including literature review and field interviews. An initial search in PubMed, CINAHL, PsycInfo, and DBpia yielded 5,733 records, from which 34 relevant articles were selected. Five hospital nurses were interviewed after obtaining IRB approval, and the data were analyzed through conventional content analysis and synthesized to clarify the concept.

Results: Nurse objectification can be defined as viewing nurses as instrumental beings for others' goals while neglecting or denying their subjectivity and autonomy. The defining attributes are instrumentalization (e.g., instrumentality, interchangeability, ownership by others, violability) and dehumanization (e.g., denial of autonomy, inactivity, denial of subjectivity). Antecedents include task characteristics (repetitive, fragmented work due to shift systems, physician-directed tasks), hierarchical work relationships (seniority-based hierarchy), and non-face-to-face communication. Consequences of objectification include self-objectification (increased compliance with others), physical and emotional drain (e.g., fatigue, occupational burnout, health problems, increased job stress), harsh work environment (e.g., reduced helping behavior and empathy, sexual harassment, workplace bullying), reduced work engagement (e.g., reduced job performance, low job satisfaction, higher turnover rates), and diminished quality of life.

Conclusion: This study clarifies the key concept of nurse objectification, which is crucial for raising awareness of the 'Nurse as a Human Being' within the nursing profession as well as in the broader healthcare and societal context. Future research should focus on developing measurement tools and conducting experimental studies to promote the re-humanization of nurses.

Key words: Hybrid concept analysis, Nurse objectification, Objectification

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Poster 44

Factors Affecting Gout in Adults: Using Data from the National Health and Nutrition Examination Survey (2019~2021)

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Background: Gout is a clinically and pathologically complex and serious disease, but is under-recognized. Appropriate treatment can prevent gout attacks and even reduce or delay serious complications of gout.

Objective: This study aimed to identify factors affecting gout in Korean adults aged 19 years or older using raw data from the 8th National Health and Nutrition Survey(2019~2021).

Methods: Of the 22,559 subjects surveyed in the 8th National Health and Nutrition Survey (2019~2021), 17,899 adults aged 19 years or older were included as analysis subjects. The differences in general characteristics and lifestyle characteristics between the normal group and the gout group were confirmed by chi-square test. Factors affecting gout were identified by logistic regression analysis.

Results: The factors affecting gout were identified as age, gender, and uric acid levels. Compared to women, men were 4.09 times (95% CI: 2.10~7.98, p<.001) higher, and for every year of age increase, the risk of gout was 1.02 times higher (95% CI: 1.01~1.03, p<.001), and for every unit increase in uric acid level, the risk of gout was 1.66 times higher (95% CI: 1.41~1.95, p<.001). The Nagelkerke R2 explanatory power was 13.7%.

Conclusion: Based on the results of this study, we hope to prevent gout in the future and further develop a gout intervention program.

Key words: Complications, Gout, Uric acid

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Poster 45

Factors Affecting Nursing Students' Adaptation to College Life

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Background and Objective: This study was conducted to specifically examine the factors affecting nursing students' ego-resilience and self-efficacy on their college life adaptation. It was a descriptive research study conducted to identify factors affecting college life adaptation and provide basic data for developing a nursing education program to enhance nursing students' college life adaptation.

Methods: This study targeted 255 nursing students attending two schools in City B. Data were collected from November 3 to December 10, 2023. Data were analyzed using the SPSS 26.0 program, including frequency, percentage, mean, standard deviation, t-test, ANOVA, Scheffé test post-hoc test, Pearson's correlation coefficient, and multiple regression analysis.

Results: The ego-resilience of nursing students was 3.32 (±0.42), self-efficacy was 3.24 (±0.45), and college life adaptation was 3.34 (±0.65). As a result of analyzing the difference in college life adaptation according to the general characteristics of the subjects, there were statistically significant differences in college life adaptation in health status ($F=3.55$, $p=.008$), motivation to apply ($F=4.75$, $p=.001$), grades ($F=3.37$, $p=.04$), peer relationships ($t=3.05$, $p=.003$), and major satisfaction ($F=46.26$, $p<.001$). There was a statistically significant positive correlation between college life adaptation and ego-resilience ($r=.57$, $p<.001$) and self-efficacy ($r=.45$, $p<.001$). Factors influencing nursing students' adaptation to college life were ego-resilience ($\beta=.45$, $p<.001$), major satisfaction ($\beta=.24$, $p<.001$), motivation to apply ($\beta=.17$, $p<.001$), and self-efficacy ($\beta=.14$, $p=.039$), and the total explanatory power was 36.2%.

Conclusion: Through the above, this study found that ego-resilience, peer relationships, motivation for application, and self-efficacy had a significant effect on nursing students' adaptation to college life. Therefore, strategies to enhance ego-resilience, peer relationships, and self-efficacy in nursing students could help improve their adaptation to college life.

Key words: Adaptation, Nursing Student, Resilience, Self-efficacy

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Poster 46

Influence of Self-Awareness, Communication Efficacy, Empathy, and Nursing Organizational Culture on Communication Competence among Hospital Nurses

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Background: Nurses play an important role as advocates and facilitators who communicate and interact with patients and their families. In addition, nurses have many opportunities to communicate with staff from various departments about patients' test results and treatment plans. Therefore, nurses' effective communication skills are an important factor in patient care in hospitals. To improve nurses' communication skills, it is necessary to comprehensively examine the effects of various factors, including personal characteristics, interpersonal characteristics, and environmental conditions.

Objective: This study aimed to identify the influence of various factors on communication competence among hospital nurses, including self-awareness, communication efficacy, empathy, and nursing organizational culture.

Methods: Data were collected using structured self-report online questionnaires from July 18 to August 31, 2023. The participants were 136 nurses working at five general or tertiary hospitals with over 100 beds in Busan, Ulsan, and Geoje Island. The collected data were analyzed using descriptive statistics, t-test, one-way ANOVA, Scheffe test, Pearson's correlation coefficient, and stepwise regression analysis using IBM SPSS 25.0 software.

Results: Self-awareness (β=.43, p<.001), relationship-oriented organizational culture(β=.34, p<.001), surgical ward (β=.19, p=.003), communication efficacy (β=.17, p=.011), and hierarchy-oriented organizational culture (β=.16, p=.011), special unit (β=-.14 p=.023) were significant influencing factors on the nurses' communication competence. The model showed 52% of the explanation for communication competence (F=28.43, p<.001).

Conclusion: To enhance the communication competence of hospital nurses, healthcare institutions should provide learning opportunities to improve nurses' self-awareness and communication efficacy. It is also essential to establish rules and order within a hierarchy-oriented organizational culture while simultaneously fostering a relationship-oriented organizational culture based on trust and respect among colleagues.

Key words: Communication competence, Communication efficacy, Empathy, Organizational culture, Self-awareness

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Poster 47

An Analysis of World Views on the Whole Person

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Background: In nursing, the concept of the 'whole person' underscores a holistic understanding of human beings, forming the basis for various approaches to holistic nursing care. However, although the term is widely used in nursing, its interpretation varies depending on the underlying world view. Despite frequent usage, clarity and consensus on its meaning remain limited.

Objective: To explore the philosophical foundations of the whole person concept using a world view analysis.

Methods: This study examined philosophical perspectives on the concept of the whole person using Fawcett's world view framework. A comprehensive literature search was conducted in August 2023 across PubMed, CINAHL, APA PsycArticles, RISS, and DBpia, yielding 2,142 records. Of these, 49 articles were deemed relevant for analysis.

Results: Three distinct world views emerged from the analysis: reactive, reciprocal interaction, and simultaneous action world views. The reactive world view aligns with technoscientific holism and encompasses dualism, reductionism, and mechanistic perspectives, which conceptualize human beings as the sum of their separable parts. The reciprocal interaction world view is informed by Smuts' holism, generalism, general systems theory, person-based holism, and the biopsychosocial (-spiritual) model. This perspective posits that the whole is more than the sum of its parts and reflects a pragmatic, integrative approach to holism. In contrast, the simultaneous action world view represents a strong form of holism, emphasizing the human being as an irreducible, unitary whole—an idea exemplified by Martha Rogers' theory. This world view rejects mechanistic and reductionist frameworks, asserting that humans are not composed of separate entities such as body, mind, or spirit, but rather exist as unified wholes in which these dimensions are inseparable aspects or expressions of personhood.

Conclusion: This study contributes to clarifying the whole person concept in nursing. When applying holistic care, nurses should reflect on the world view informing their practice. The ongoing conceptual ambiguity highlights the need for further concept analysis. Identifying one's worldview can guide the integration of nursing theories in designing holistic interventions.

Key words: Nursing philosophy, Whole person, World view

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Poster 48

Nursing in the Age of Capitalism: Toward Self-Care and Self-Transcendence

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Background: Although nurses care for others, they often experience burnout from neglecting their own well-being. Beyond individual or institutional issues, deeper causes lie in capitalism's performance driven healthcare system. Understanding these structural pressures is essential for promoting nurses' self-care and self-actualization.

Objective: To analyze the impact of capitalism on nursing and propose strategies for nurses' self-care and personal growth.

Methods: A critical framework integrating Marxist theory and Maslow's hierarchy of needs was used to examine capitalism's effect on nurses and their pathway from self-care to self-actualization and self transcendence.

Results: Capitalism prioritizes productivity and efficiency in pursuit of economic profit, whereas the philosophy of nursing centers on ethical practices grounded in human dignity and the value of care. These conflicting value systems create structural tensions within healthcare environments. Holistic, patient-centered nursing care is at risk of being reduced to efficient labor and cost-saving strategies under capitalist logic. Within such a context, nurses are often objectified and dehumanized as tools of the healthcare system, subjected to economic valuation rather than recognized as autonomous professionals. In response, nurses must engage in self-care as a vital practice to preserve life—both patients' and their own. Self-care entails reflective awareness of personal needs and intentional acts of care toward oneself. To resist capitalism's lure of unnecessary desire for wealth, nurses must shift focus toward genuine self awareness and fulfillment. Through this shift, self-care becomes the foundation for self-actualization and ultimately self-transcendence—where caring for others is no longer a duty, but a personal expression of meaning. In this orientation, nursing moves away from the logic of capitalism and toward a "logic of authenticity," where helping others becomes a source of true joy and professional artistry.

Conclusion: In a society fatigued by capitalist demands, a meaningful life begins not with the pursuit of profit but with the act of caring for oneself. Self-care is not a selfish act but a mature and altruistic form of being—one that leads to self-actualization and ultimately self-transcendence. Authentic nursing begins with self-care.

Key words: Capitalism, Marxism, Maslow, Self-actualization, Self-care, Self-transcendence

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Poster 49

Validity and Reliability of the Korean Version of Spirituality and Spiritual Care Rating Scale

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Background: Spiritual nursing care is recognized as a core component of holistic nursing. However, in the Korean clinical setting, conceptual ambiguity and religious prejudice often make its practice difficult. Therefore, there is a need for an appropriate tool to accurately assess nurses' perceptions of spiritual nursing care. The Spirituality and Spiritual Care Rating Scale is widely used internationally to measure nurses' understanding and attitudes toward spirituality and spiritual care.

Objective: This study aimed to examine the validity and reliability of the Korean version of the Spirituality and Spiritual Care Rating Scale.

Methods: This methodological study followed the World Health Organization guidelines for the process of translation and adaptation of instruments. The Spirituality and Spiritual Care Rating Scale, originally developed by McSherry and colleagues, was translated into Korean and refined through forward translation, expert panel review, back-translation, and pilot test. Data were collected from 220 nurses in Korea via an online survey conducted between June 24 and July 24, 2024. Construct validity was assessed using confirmatory factor analysis, as well as item-level convergent and discriminant validity. Criterion-related validity was evaluated by examining the correlations compared with the Spiritual Care Competence Scale. Reliability was examined using Cronbach's α.

Results: The confirmatory factor analysis supported a four-factor structure of the instrument. The item-level convergent and discriminant validity were acceptable for some factors, but not for others that failed to meet the recommended thresholds. A significant positive correlation with the Spiritual Care Competence Scale confirmed the criterion-related validity. The model fit for the reliability analysis was acceptable, and the instrument demonstrated good internal consistency.

Conclusion: The Korean version of the Spirituality and Spiritual Care Rating Scale was found to be a valid and reliable tool for assessing nurses' perception of spiritual care and can support improvements in spiritual care education and practice.

Key words: Nurses, Reliability, Spiritual care, Spirituality and spiritual care rating scale, Validity

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Poster 50

Factors Influencing Disaster Response Competency among Students in the Department of Emergency Medical Technology

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Background: The disaster response competency of students in the Department of Emergency Medical Technology future paramedics deployed for patient treatment and transport during disaster response is critically important.

Objective: This study is a descriptive survey designed to examine the effects of disaster awareness, willingness to participate in disaster response, disaster preparedness, and perceived safety control on the disaster response competency of undergraduate students in the Department of Emergency Medical Technology.

Methods: This study examined the factors influencing disaster response competency based on survey responses from 130 students in the Department of Emergency Medical Technology. Standardized instruments comprised 25 items measuring disaster awareness, 8 items measuring willingness to participate in disaster response, 15 items measuring disaster preparedness, 8 items measuring perceived safety control, and 15 items measuring disaster response competency. Analyses included descriptive statistics, t-tests, one-way ANOVA, Pearson's correlation, and multiple linear regression using IBM SPSS 25.0.

Results: Among the 130 participants, the mean score for disaster response competency was 3.20 ± 0.45. The mean scores for disaster awareness(3.52 ± 0.41), willingness to participate in disaster response(4.52 ± 0.50), disaster preparedness(3.32 ± 0.52), and perceived safety control(3.45 ± 0.52). Disaster response competency showed significant positive correlations with disaster awareness ($r = .34$, $p < .001$), willingness to participate in disaster response ($r = .52$, $p < .001$), disaster preparedness ($r = .50$, $p < .001$), and perceived safety control ($r = .45$, $p < .001$). Multiple regression analysis revealed that disaster awareness , disaster preparedness, and willingness to participate in disaster response significantly predicted disaster response competency, explaining 42.1% of the variance ($F = 30.45$, $p < .001$).

Conclusion: This study aims to identify the factors influencing disaster response competency among students in the Department of Emergency Medical Technology and to provide foundational data for the development of disaster education programs tailored to these students.

Key words: Awareness of disaster, Disaster competence, Safety control, Students department of emergency medical technology, Willingness to participate in disaster

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Poster 51

The Impact of Work-Life Balance, Organizational Companionship, and Compensation on Job Embeddedness among Hospital Nurses

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Background: Job embeddedness has emerged as a crucial factor in promoting nurse retention. Although nurses play an essential role in healthcare settings, turnover rates remain high. This highlights the need to examine job embeddedness and its related factors, including work-life balance, organizational companionship, and compensation.

Objective: This study aims to identify the impact of work-life balance, organizational companionship, and compensation on job embeddedness among hospital nurses.

Methods: A descriptive cross-sectional survey was conducted with 144 nurses who had at least one year of clinical experience and were recruited from one tertiary hospital and one general hospital in B metropolitan city, Korea. Data were analyzed using IBM SPSS Statistics 29.0, including descriptive statistics, independent sample t-tests, one-way ANOVA with Scheffé post hoc test, Pearson's correlation coefficients, and multiple regression analysis.

Results: Significant predictors of job embeddedness included compensation ($\beta = 0.39$, $p < .001$), organizational companionship ($\beta = 0.37$, $p < .001$), and work–life balance ($\beta = 0.24$, $p < .001$). These variables explained 58.0% of the variance in job embeddedness ($F=33.89$, $p<.001$).

Conclusion: To enhance job embeddedness among hospital nurses, organizational efforts should develop a compensation system that enhances nurses' perceptions of reward, a supportive organizational culture that strengthens perceived organizational companionship, and implement institutional policies that enable nurses to maintain work-life balance.

Key words: Organizational commitment, Organizational culture, Reward, Work-life balance

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Poster 52

Development and Pilot Study of a Metaverse-Based Simulation for Infectious Disease Response in Schools

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Background: Schools are high-risk settings for infectious disease outbreaks, especially among children and adolescents. Despite annual tabletop drills, current training methods lack engagement and realism. This study developed a tuberculosis response simulation using a metaverse platform to improve school staff' engagement in drills and preparedness.

Objective: To develop and pilot a metaverse-based simulation for tuberculosis response in schools, aiming to enhance engagement in drills and preparedness to outbreaks among school staff.

Methods: A metaverse-based simulation program was developed through collaborative scenario design and platform implementation. A pilot test was conducted with eight school nurses and fifty-nine staff members in Y City. Participant experiences were collected through interviews and analyzed qualitatively.

Results: A four-stage tuberculosis response scenario was developed and implemented using two metaverse-based simulation platforms. The simulations included interactive role-play, quizzes, and AI chatbot integration to enhance engagement and realism. Participants reported high levels of interest and immersion, noting improved understanding and applicability to real school settings. However, technical issues such as connectivity problems and usability challenges were identified. Overall, the program was considered effective, with suggestions for improving platform stability and user interface.

Conclusion: The metaverse-based simulation enhanced engagement and preparedness for infectious disease response in schools, demonstrating its potential as an effective training tool despite some technical challenges.

Key words: Infectious disease response, Metaverse, Simulation training, Tuberculosis

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Exploring School Nurses' Experiences of a Metaverse-Based Tuberculosis Response Simulation

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Background: As schools remain vulnerable to infectious disease outbreaks, especially in post-pandemic contexts, effective and engaging training for school health personnel is essential. A previous pilot study developed a metaverse-based simulation for tuberculosis response in schools. Building on that foundation, this follow-up study explores how school nurses experience and perceive the simulation in real-world educational settings.

Objective: This study aimed to explore school nurses' experiences and perceptions of a metaverse-based infectious disease simulation training, focusing on its educational value and applicability in real school settings.

Methods: A qualitative study was conducted using focus group interviews with ten school nurses who explored a tuberculosis simulation implemented via a metaverse platform. Data were analyzed thematically to identify core experiences and improvement needs.

Results: Participants reported high engagement, improved understanding of response procedures, and increased motivation through gamified and visually immersive features. However, challenges included technical limitations, digital literacy gaps, and concerns about platform accessibility and ethical use. The simulation was viewed as a valuable and expandable tool for school health education, provided that support systems and infrastructure are strengthened.

Conclusion: Metaverse-based simulation can enhance infectious disease preparedness among school nurses through immersive and interactive training. Given its positive impact on participation and understanding, its application in real-world settings is recommended. However, future development should address technical and user-related barriers—such as the need for prior training on metaverse use—to maximize its usefulness.

Key words: Metaverse, school health, infectious disease training, simulation, qualitative study

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70th Foundation Anniversary International Conference

Oral Presentation

May 22 (Thursday) 15:40~16:40
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Oral Presentation 1

May 22 (Thursday) 15:40~16:40
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Oral Presentation 01

School-Based COVID-19 Response: Staff Satisfaction and Improvement Priorities

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Background and Objective: This study aimed to assess school staff's satisfaction with the COVID-19 response and to provide foundational data to inform future infectious disease response strategies within school settings.

Methods: A descriptive survey was conducted with 488 school staff members in U City. The questionnaire was developed based on national response protocols and the guidelines of the World Health Organization. It included items on general characteristics, satisfaction with organizational dimensions (response team operations, role distribution, support from education offices and public health centers), policy dimensions (effectiveness of human and material resources, clarity and timeliness of guidelines, implementation of health education, temperature screening, self-diagnosis systems, social distancing, and visitor restrictions), and improvement priorities. Data were analyzed using descriptive statistics, t-test, and ANOVA, with IBM SPSS Statistics version 26.

Results: The mean satisfaction score for the organizational dimension was 3.22, with response team operations rated highest (3.29 ± 0.73) and support from public health centers lowest (3.08 ± 0.81). School nurses reported significantly lower satisfaction across all subdimensions compared to administrators, teachers, and administrative staff ($p < .01$). In the policy dimension, the overall mean satisfaction was 3.44, with temperature screening receiving the highest score (3.79 ± 0.43) and clarity of guidelines the lowest (3.01 ± 0.79). School nurses also showed significantly lower satisfaction across all policy subdimensions ($p < .001$). Staff from large schools and those with less than 10 years of experience reported lower satisfaction in specific subdimensions ($p < .05$). Key improvement priorities included enhanced epidemiological management (18.9%), adequate resource allocation (18.4%), and activation of response teams (16.2%).

Conclusion: Satisfaction with school-level COVID-19 responses varied by job type, professional experience, and school size. Strengthening epidemiological systems, supporting school nurses, and activating structured response teams are essential for future preparedness.

Key words: COVID-19, Health policy, Public health, School nursing

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Oral Presentation 02

Nurses' Experience of End-of-Life Care for Patients with COVID-19: A Descriptive Phenomenology Study

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Background and Objective: This study aimed to explore nurses' experiences of end-of-life care and to conduct an integrative analysis of the scope and effectiveness of interventions that promote family involvement in end-of-life care for hospitalized patients.

Methods: The study consisted of phenomenological qualitative research and an integrative literature review. Semi-structured interviews were conducted with eight ICU nurses, and data were analyzed using Colaizzi's method. The integrative review included studies on interventions supporting family involvement in end-of-life care, selected from PubMed, CINAHL, Embase, Web of Science, Google Scholar, and ProQuest. The analysis was guided by Olding et al.'s 'Components of Family Involvement', which includes: Presence; Receiving care and having needs met; Communicating and receiving information; Decision-making; and Contributing to care.

Results: The qualitative analysis identified four themes: Only companion in the death journey; Helping families prepare for death; End-of-life care trapped within a framework; and End-of-life care in retrospect. When families were excluded from the end-of-life process, patients, family members, and healthcare professionals experienced emotional distress, reaffirming the importance of family involvement in end-of-life care. The integrative review included 26 studies. Interventions enhanced emotional stability, supported decision-making, and improved family preparedness. However, challenges were reported, including cultural barriers to implementation and emotional burdens on family members. Among the five components, interventions reflecting 'Communicating and receiving information' were found in 20 studies (76.9%). Interventions incorporating 'Decision-making' and 'Receiving care and having needs met' were each identified in 13 studies (50.0%). In contrast, interventions addressing 'Contributing to care' and 'Presence' were least represented, appearing in 5 studies (19.2%) and 3 studies (11.5%), respectively.

Conclusion: This study highlights the essential role of family involvement in end-of-life care. To address the imbalance in current interventions, future programs should be designed as integrated models that fully reflect all components of family involvement.

Key words: Family, Nurse, Qualitative research, Review, Terminal care

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Oral Presentation 03

Factors Affecting Post-Traumatic Growth of the Nurses in Regional Trauma Centers

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Background and Objective: This study aims to indentify regional trauma centers nurses' experience of traumatic event, deliberate rumination, self-disclosure, social support, secondary traumatic stress, and post-traumatic growth (PTG) and to identify factors affecting PTG.

Methods: This study was a descriptive research study, and the subjects were 155 nurses working at the regional trauma centers. Data were collected through an online survey. The research tool was a structured self-report questionnaire consisting of general characteristics, Experience of traumatic events, Deliberate rumination, self-disclosure, Social support, Secondary traumatic stress, and PTG. The collected data were analyzed using descriptive statistics, t-test, ANOVA, and Pearson's correlation coefficient and hierarchical regression.

Results: The subjects' traumatic event experience was 53.50±8.10 out of 76, deliberate rumination was 16.32±6.46 out of 30, self-disclosure was 40.65±8.28 out of 60 points. Social support was 4.99±0.81 out of 7, secondary traumatic stress was 2.50±0.87 out of 5 points. PTG was 46.24±13.18 out of 80 points, and there were statistically significant differences in marital status(t=-2.196, p=.030) and presence of children(t=2.687, p=.008). PTG had significantly positive correlations with deliberate rumination, self-disclosure, and social support. Factors that affect PTG significantly were found in the order of deliberate rumination(β=.32, p<.001), support from supervisors(β=.29, p=.005), support from family and friends(β=.19, p=.038), self-disclosure(β=.16, p=.022). The explanatory power of this regression model was 36.6%(F=9.91, p<.001).

Conclusion: This study confirmed that in order to improve the PTG of nurses in regional trauma centers, individual efforts and organizational strategies to activate deliberate ruminations and self-disclosure are needed, and a positive hospital culture and environment are needed to boost the support of the supervisors. Based on this, it is necessary to develop and apply an integrated intervention that can promote PTG after experiencing trauma event for nurses in regional trauma centers.

Key words: Deliberate rumination, Post-traumatic growth, Regional trauma center's nurse, Self-disclosure, Social support

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Oral Presentation 04

Emotional Eating: A Literature Review of Its Conceptual Attributes and Measurement Tools

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Background: Emotional eating refers to the consumption of food in response to emotional states rather than physical hunger. It often occurs as a strategy to alleviate or regulate emotions in various stressful or affective contexts. When habitual, emotional eating can lead to adverse health outcomes such as obesity, diabetes, and eating disorders. Therefore, a clear understanding of the conceptual attributes of emotional eating and the identification of appropriate measurement tools are essential for effective assessment and intervention.

Objective: This study aimed to identify the conceptual attributes of emotional eating through a literature review and to compare and analyze the tools developed to measure these attributes.

Methods: A literature search was conducted using seven databases (PubMed, Embase, CINAHL, Cochrane, RISS, KISS, DBpia) for studies published up to November 20, 2024. The primary search terms included "emotional eating," "measure," "assess," and "scale". Studies were included if they explored the concept of emotional eating or developed tools to measure it. Extracted data included the definition and explanation of emotional eating, names of the tools, authors, year of publication, target population, subscales, and number of items.

Results: A total of 26 studies were included in the final analysis. Emotional eating was described as being triggered by positive or negative emotions, independent of physical hunger, and expressed through either increased or decreased food intake with a tendency to become habitual. The most commonly used tools were the TFEQ, DEBQ, and EES, which reflect limited aspects of emotional eating. In contrast, more recently developed tools such as the EES-II, BEES, EMAQ, and SEES were found to incorporate a broader range of emotional eating attributes.

Conclusion: The conceptual understanding of emotional eating has evolved. Selecting measurement tools that reflect its expanded attributes is crucial for accurate assessment and effective intervention.

Key words: Conceptual attributes, Emotional eating, Measurement tools, Review

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Oral Presentation 05

Protective and Risk Factors for Adolescent Drug Use: A Secondary Analysis Based on Problem Behavior Theory

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Background: Substance use is a critical global problem, and adolescents are considered a high-risk group. An estimated 2.2 million or 8.5% of US adolescents met criteria for a substance use disorder. South Korea has traditionally been considered relatively safe from substance use disorders, but in recent years there has been a rapid increase in adolescent substance use disorders. In particular, substance use during adolescence can impair physical and psychological development and is strongly associated with increased risk of delinquency and criminal behavior.

Objectives: This study aimed to identify protective and risk factors associated with substance use among Korean adolescents, providing an integrated perspective based on the Problem Behavior Theory.

Methods: Cross-sectional data from the 2022, 2023 and 2024 Korea Youth Risk Behavior Web-based Survey were used. Descriptive statistics, χ2 test and logistic regression were used to analyze the 159,383 adolescents (81,256 males and 78,127 females).

Results: In this study, approximately 1.5% of adolescents had ever used drugs. Demographic characteristics, risk and protective factors were categorized by gender. Among female adolescents, drug use was influenced by school type, economic status, body mass index (kg/m2) and father's educational level. Risk factors included perceived stress, alcohol consumption and smoking, while protective factors included living with a family, physical activity, breakfast consumption and sleep satisfaction. For male adolescents, school type, mother's education level and father's education level were influential. Risk factors included perceived stress, alcohol consumption and smoking, and protective factors included living with family and breakfast consumption.

Conclusions: Adolescence is a period of growth and development characterized by differences between males and females. This study suggests that there are also differences between males and females. By recognizing these characteristics, intervention strategies for drug use can be developed.

Key words: Adolescent, Adolescent behavior, Health risk behaviors, Substance-Related Disorders

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Oral Presentation 06

Impacts of Depression, Daily Singing, and Healthy Lifestyle on the Risk of Dysphagia and Frailty in the Community Elderly

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Background: Presbyphagia is an age-related swallowing difficulty that can occur even without underlying disease. The risk of dysphagia is associated with poor nutrition, depression, and frailty. While interventions like singing and exercise have shown benefits, research on the impact of daily singing and a healthy lifestyle among community-dwelling older adults remains limited.

Objective: This study assessed the risk of dysphagia in community-dwelling older adults and examined how demographics, depression, daily singing, and healthy lifestyle affect the risk of dysphagia and frailty

Methods: A descriptive correlational study was conducted with 183 older adults aged 65 or above from four senior facilities between January and February 2025. Data were collected using self-reported questionnaires. The risk of dysphagia, frailty, and depression were measured using the K-EAT-10, K-FRAIL, and GDSSF-K, respectively. Healthy lifestyle was assessed based on smoking, alcohol use, exercise, and nutrition. Analyses included descriptive statistics t-test, ANOVA, Pearson's correlation, and multiple regression using SPSS/WIN 28.0.

Results: The risk of dysphagia was identified in 30.6%(n=56) and was significantly associated with depression, daily singing, and healthy lifestyle. Frailty correlated with the risk of dysphagia, depression and healthy lifestyle. In the multiple regression analysis, significant predictors of the risk of dysphagia were depression ($\beta = .23$, $p = .002$), past medical history ($\beta = .21$, $p = .002$), and daily singing ($\beta = -.17$, $p = .031$). Significant predictors of frailty included the risk of dysphagia ($\beta = .35$, $p < .001$), age ($\beta = .19$, $p = .003$), healthy lifestyle ($\beta = -.15$, $p = .017$), depression ($\beta = .14$, $p = .040$), and gender ($\beta = .12$, $p = .045$).

Conclusion: Engaging in daily singing, alongside maintaining a healthy lifestyle, has the potential to reduce the risk of dysphagia and frailty. Integrating daily singing into health promotion strategies may be beneficial in preventing the risk of dysphagia and frailty in older adults.

Key words: Depression, Dysphagia, Elderly, Healthy lifestyle, Singing

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Oral Presentation 07

Development of Sarcopenia Intervention App for Older Adults in the Community

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Background: As the older adult population increases worldwide, the need for prevention and management of sarcopenia is becoming more important.

Objective: This study aimed to develop a sarcopenia intervention app for older adults in the community by applying the Delphi method to design app content and evaluate the effectiveness and usability of the app.

Methods: Two Delphi surveys were conducted with 13 experts (4 nurses, 3 doctors, 3 exercise prescriptors, 3 dietitians) to design the content of the sarcopenia intervention app. The Delphi study resulted in 3 criteria for diagnosis of possible sarcopenia, 11 items for exercise intervention, and 3 items for nutrition intervention. Based on the designed content, a sarcopenia intervention app was developed and its effectiveness and usability were evaluated. Participants were 9 older adults, and recruited by posting recruitment notices at one senior welfare center in B City. The intervention was applied for 6 weeks (from February 10 to March 28, 2025), and muscle indices such as appendicular skeletal muscle, skeletal muscle index, and muscle strength were measured before and after using the app, and a usability evaluation questionnaire was conducted after using the app. Collected data were analyzed by descriptive statistics, Wilcoxon Signed Rank Test using the SPSS/WIN 29.0 program.

Results: After using app, appendicular skeletal muscle (z=-2.243, p=.025), skeletal muscle index (z=-2.240, p=.025), and muscle strength (z=-2.374, p=.018) of participatns significantly increased. In terms of the usability, the three visibility items were 3.78±1.09, 3.56±1.01, and 3.89±0.60, respectively, the two consistency items were 4.56±0.53 and 4.67±0.50, the user controllability item was 4.22±0.67, the convenience item was 4.44±0.53, and the three satisfaction items were 4.33±0.71, 4.56±0.73, and 4.78±0.44, respectively.

Conclusion: The sarcopenia app developed in this study could be a clinically useful sarcopenia intervention strategy for community-based older adults.

Key words: Internet-Based Intervention, Mobile applications, Sarcopenia

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Oral Presentation 08

The Effect of Facilitated Tucking on Pain Relief During Endotracheal Suctioning in Preterm Infants: A Randomized Crossover Study

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Background: Endotracheal suctioning is an essential procedure for preterm infants receiving mechanical ventilation, but it is known to cause moderate to severe pain. Facilitated tucking is a non-pharmacological intervention that may help promote pain relief for neonate.

Objective: This study aimed to examine the effect of facilitated tucking on pain relief during endotracheal suctioning in preterm infants receiving mechanical ventilation.

Methods: Twenty-six preterm infants admitted to the neonatal intensive care unit of P University Hospital in B City were enrolled in a randomized crossover experimental study. Data were collected from September 11, 2024, to March 24, 2025. Infants were randomly assigned to either Group A or Group B. Group A received suctioning with facilitated tucking, followed by suctioning without it, whereas Group B received suctioning without facilitated tucking, followed by suctioning with it. The effects of the intervention were evaluated using the Premature Infant Pain Profile–Revised (PIPP-R), heart rate, and oxygen saturation. Data were analyzed using IBM SPSS Statistics (Version 29.0), applying descriptive statistics, chi-square test, paired t-tests, and repeated-measures ANOVA.

Results: Statistical analysis of the PIPP-R scores revealed significant differences between the experimental and control groups during endotracheal suctioning, as well as at 1, 2, and 3 minutes post-suctioning ($p < .05$). However, the interaction effect between group and time was not statistically significant ($F = 1.60$, $p = .188$). Additionally, no significant main or interaction effects were observed for heart rate or oxygen saturation across groups, time points, or their interaction ($p > .05$).

Conclusion: Facilitated tucking was effective in reducing pain during endotracheal suctioning and may be serve as a valuable non-pharmacological nursing intervention for pain management in mechanically ventilated preterm infants. Key words: Preterm infant, Pain, Endotracheal suctioning, Facilitated tucking.

Key words: Endotracheal suctioning, Facilitated tucking, Pain, Preterm infant

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Oral Presentation 09

Changes and Predictors of Happiness in Early Adolescents Based on a Theoretical Framework: A Longitudinal Study Using Latent Growth Modeling

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Background: Early adolescence is a critical developmental stage characterized by significant physical, emotional, and social changes that influence happiness.

Objective: This longitudinal study analyzed changes in adolescent happiness based on Bronfenbrenner's Ecological Systems Theory.

Methods: This study is a secondary data analysis. Data was used from the 11th (age 11) to 15th (age 15) waves of the Korean Children Panel Survey (PSKC), analyzing 1,053 adolescents. Descriptive statistics, independent t-tests, one-way ANOVA, and correlation analyses were conducted using SPSS 29.0; latent growth modeling, including unconditional and conditional models with predictor variables, was conducted using AMOS 29.0.

Results: Latent growth modeling (LGM) analysis revealed nonlinear changes in happiness, with a sharp decline, particularly between the ages of 12 and 13 years. Adolescents with higher self-esteem and greater exposure to a creative school environment at age 11 tended to experience a slower decline in happiness. However, higher levels of maternal attachment at age 12 were associated with a more pronounced decrease.

Conclusion: This study highlights the critical role of multilayered ecological influences, including intrapersonal traits, family dynamics, and school environment, in shaping changes in happiness during early adolescence. The observed decline in happiness between ages 12 and 13 years emphasizes the need for timely and developmentally tailored interventions. Educational programs that support emotional well-being alongside academic achievement while fostering self-esteem and creativity may serve as effective strategies for promoting sustained adolescent happiness. These findings provide valuable evidence for designing targeted interventions and policies aimed at enhancing well-being during this formative stage.

Key words: Adolescent, Ecologic System, Happiness, Latent Variable Modeling, Psychological Well-Being

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Oral Presentation 10

Ageism among Nursing Students in East Asia: A Scoping Review

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Background: As the population of older people in East Asia increases rapidly, ageism, which can have a negative impact on health of older people, has become an important issue. However, reviews on nursing students' ageism in East Asia are limited.

Objective: This scoping review aimed to examine the patterns and influencing factors of ageism among nursing students in East Asia.

Methods: This study is a scoping review that follows Joanna Briggs Institute guidelines. The research question was: what are the patterns of ageism among nursing students in East Asia? And how do the factors that influence ageism among them manifest? The literature search was conducted using electronic databases: PubMed, CINAHL, Embase and Web of Science. The main keywords were ageism and nursing students. Only literature written in English was included, with no restriction on publication year. A total of seven studies were selected.

Results: In this review, we identified nursing students' ageism toward older adults, which is characterized by stereotypes and prejudice. Nursing students in East Asia tend to have positive or neutral attitudes toward older adults, as measured by the Kogan Attitudes Towards Old People Scale (KAOP) and Fraboni Scale of Ageism (FSA). There were no significant differences in ageism according to gender and academic year. Some studies found higher ageism in female students and in upper academic years, contrasting with findings from Turkey and Greece, where ageism was higher in male students and lower academic years. Having a good interaction with older adults and keeping in touch with them were identified as key factors in a positive attitude toward older adults.

Conclusion: It is necessary to continue studying ageism among nursing students who will become future healthcare professionals. Analyzing the factors can improve their attitudes toward older adults. Moreover, enhanced geriatric nursing education are recommended.

Key words: Ageism, Aging, East Asia, Nursing students, Review

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Oral Presentation 11

Concept Analysis of Reflection and Reflective Practice in Nursing: An Integrative Literature Review

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Background: Reflection and reflective practice are critical concepts for enhancing professional development, clinical judgment, and critical thinking in nursing education and clinical settings. Despite differences in definitions, components, and applications, they are often used interchangeably, resulting in conceptual ambiguity and inconsistencies in education and practice.

Objective: This study aimed to clarify the conceptual differences between reflection and reflective practice through an integrative review of relevant concept analysis studies.

Methods: A comprehensive literature search was conducted across international and Korean databases between February 11 and March 23, 2025. Search terms included "nurse," "reflection," "reflective practice," and "concept analysis." Only concept analysis studies of reflection or reflective practice in nursing were included. Out of 1,167 retrieved articles, nine were included in the review.

Results: Reflective thinking and critical reflection were classified as reflection, as they emphasized cognitive and metacognitive processes aimed at gaining insight. In contrast, reflection-in-action and debriefing-based reflection were categorized as reflective practice due to their focus on applying insights to enhance clinical performance. Although critical reflection did not explicitly include behavioral change in its definition, it was often used interchangeably with both reflective thinking and reflective practice.

Conclusion: Findings of this integrative review suggest that reflection can be more relevant in educational settings to foster critical thinking. On the other hand, reflective practice can better support clinical performance through action-based strategies. Promoting effective use of both concepts may involve developing complementary educational strategies tailored to their distinct features, along with institutional efforts to clarify their appropriate application.

Key words: Concept analysis, Integrative review, Nursing, Reflection, Reflective practice

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Oral Presentation 12

Developing a Metaverse-Based Program for Adolescent E-Cigarette Prevention : Applying Intervention Mapping Protocol and Positive Youth Development

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Background: Adolescent e-cigarette use is increasing, posing significant health risks. Existing prevention efforts often lack structured approaches that can adapt to evolving digital and social environments, highlighting the need for systematically developed programs that empower youth to resist e-cigarette initiation.

Objective: The aim of this methodological study was to systematically develop a metaverse-based prevention program using Intervention Mapping (IM) to enhance adolescents' self-efficacy, emotional regulation, and social responsibility, grounded in Positive Youth Development (PYD) principles.

Methods: Following the first four steps of the IM, we conducted a needs assessment (Step 1) through stakeholder focus groups and literature reviews to identify key risk factors and contexts. Step 2 specified behavioral and environmental objectives aligned with PYD goals. In Step 3, immersive six-session metaverse curriculum was designed using quests, role-playing, and peer collaboration to reinforce refusal skills and healthy decision-making. In Step 4, the interactive elements of the program, including modules, facilitator guides, and feedback mechanisms, were refined based on expert review and feedback from small-scale pilots.

Results: The needs assessment identified key determinants of adolescent e-cigarette use: limited knowledge of associated risks, prevalent misconceptions, and low expectations for prevention education. To address these, change objectives were established to enhance emotional regulation, self-control, confidence to resist social pressure, and engagement in healthy alternative behaviors. These objectives guided the development of interactive, scenario-based content within the metaverse environment. The program will be implemented and evaluated in school settings to assess its effectiveness.

Conclusion: Integrating the Intervention Mapping (IM) with Positive Youth Development (PYD) provided a structured approach to developing a metaverse-based prevention program that addresses risk factors while fostering adolescents' strengths. This methodology translates PYD principles into practical strategies, offering a promising model for future youth health education programs.

Key words: Adolescent, E-cigarette, Intervention mapping, Metaverse, Positive youth development

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Oral Presentation 13

Effects of Self-Care Competency, Perceived Health Status, Family Resilience, and Spirituality on Successful Aging of Middle-aged Women

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Background: Successful aging involves self-care competency, perceived health status, family resilience, and spirituality. Middle-aged women face unique challenges in managing multiple roles. This study explores these factors to support strategies for their successful aging.

Objective: This study aimed to examine the levels of self-care competency, perceived health status, family resilience, and spirituality as perceived by middle-aged women, and to identify their effects on successful aging.

Methods: A total of 149 middle-aged women residing in Busan, Ulsan, and Gyeongsangnam-do participated in an online survey. The survey included questions on general characteristics, self-care competency, perceived health status, family resilience, spirituality, and successful aging. Data were analyzed using SPSS/WIN 29.0.

Results: The mean score for successful aging was 2.81 (4-point scale), and scores for self-care competency, perceived health status, family resilience, and spirituality were 3.87, 3.68, 3.86, and 3.75, respectively (5-point scale). Successful aging was positively correlated with all four factors. Key predictors were self-care competency, perceived health status, and spirituality, explaining 73% of the variance (F=97.414).

Conclusion: Supporting middle-aged women's successful aging requires institutional and social support for self-care competency, health promotion, and spiritual programs. These findings offer useful baseline data for developing related policies and practical strategies.

Key words: Family resilience, Perceived health status, Self-care competency, Spirituality, Successful aging

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Oral Presentation 14

Impact of Grit, Teamwork, Organizational Communication Competence, and Perception of Patient Safety Culture of Nurses on Patient Safety Nursing Activities in Integrated Nursing Care Units

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Background: Integrated nursing care services were introduced to reduce caregiver burden and improve the quality of health care. In the absence of family caregivers, ensuring patient safety has emerged as a critical issue. However, hospitals with limited resources lack structured safety management and nursing care. This study investigates how nurses' grit, teamwork, organizational communication, and perception of patient safety culture influence patient safety nursing activities.

Objective: This study examined factors influencing patient safety nursing activities in integrated nursing care units.

Methods: A survey was conducted with 134 nurses from hospitals (100–300 beds) in Busan using self-administered questionnaires (August 17–September 15, 2024). Data were analyzed using descriptive statistics, Pearson correlation, and multiple regression analysis.

Results: The mean score for patient safety nursing activities was 4.31±0.55. Positive correlations were found with grit, teamwork, communication, and patient safety culture awareness. The predictor variables explained 46.0% of the variance in patient safety nursing activities. Significant factors included communication (β = .31, p = .032) and leadership (β = .29, p = .035) within teamwork, incident reporting frequency (β = .24, p < .001) within patient safety culture awareness, and experience in patient safety education (β = .17, p = .018).

Conclusion: The findings of this study highlight the importance of enhancing teamwork, particularly in leadership and communication, and creating a safety culture that promotes incident reporting and education to strengthen patient safety nursing practices. Improving patient safety training, developing systematic evaluation and feedback mechanisms, and establishing structured support systems through campaigns and workshops will boost staff involvement and elevate the quality of patient safety practices.

Key words: Delivery of health care, Nursing services, Patient safety, Patient care team, Organizational culture

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Oral Presentation 15

Effectiveness of A PERMA-Based Positive Psychology Intervention to Promote Happiness and Alleviate Emotional-Behavioral Problems in Adolescents

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Background: South Korean adolescents are exposed to intense academic pressure, which has been associated with increased levels of depression and emotional-behavioral difficulties. Despite sustained public efforts, their level of happiness remains low.

Objective: This study aimed to develop and evaluate the effectiveness of a PERMA-based positive psychology program designed to enhance happiness and alleviate emotional-behavioral problems among middle school students.

Methods: This study included 61 middle school students (n = 30, experimental; n = 31, control) from two schools in B City from October 2024 to January 2025. A PERMA-based positive psychology program was delivered weekly (40 minutes per session) for 10 weeks. The intervention aimed to enhance happiness and alleviate emotional-behavioral problems. Data were analyzed using descriptive statistics, chi-squared test, Mann–Whitney U test, and Wilcoxon signed-rank test in the SPSS/WIN 28.0 program.

Results: The PERMA-based positive psychology program significantly enhanced happiness and reduced emotional-behavioral problems in the experimental group. Post-intervention, the experimental group showed greater improvements than the control group in both happiness domains and total problem scores ($Z = -5.83$, $p < .001$; $Z = -4.57$, $p < .001$). Notably, internalizing problems such as anxious/depressed ($Z = -4.09$, $p < .001$) and withdrawn/depressed ($Z = -3.15$, $p = .002$), as well as externalizing problems such as aggressive behavior ($Z = -3.55$, $p < .001$), also showed significant reductions.

Conclusion: To promote adolescent happiness and reduce emotional-behavioral problems, it is necessary to develop and implement school-based positive psychology programs grounded in the PERMA model.

Key words: adolescent, behavior, emotions, health education, positive psychology

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Oral Presentation 16

The Experience of Role Conflict of Patient Safety Coordinators in Korea

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Background: With the enactment of the Patient Safety Act in Korea in 2016, an institutional foundation for patient safety coordinators was established. However, a comprehensive understanding of their actual roles remains insufficient. Therefore, in-depth exploration was needed to examine the roles patient safety coordinators perform in clinical practice and the conflicts and challenges they experience.

Objective: This study aimed to explore the meaning of the conflict experiences of patient safety coordinators in Korea.

Methods: This study used a qualitative research design using content analysis. Participants were selected through purposive sampling and included individuals who had worked as patient safety coordinators for more than one year. Data was collected until thematic saturation was reached, and semi-structured, in-depth individual interviews were conducted from July 26 to November 2, 2024

Results: Data analysis revealed three themes and twelve sub-themes. Role conflict experienced by patient safety coordinators was categorized into three themes: organizational factors related to structural issues and lack of managerial support; relational factors reflecting difficulties in collaboration; and emotional factors associated with burden and stress. Organizational factors included unclear role definitions, lack of administrative support, inefficient work systems, and insufficient budget. Relational factors encompassed a lack of collaboration with other departments and team members, role conflicts, communication issues with medical staff, and limited influence. Emotional factors included burdensome administrative tasks, emotional stress and burnout, pressure to perform assigned roles, and difficulty in balancing work and life.

Conclusion: To ensure the effective role performance of patient safety coordinators, it is necessary to establish clear role definitions, strengthen organizational and administrative support, promote inter-departmental collaboration, and implement strategies to alleviate emotional burden and burnout. These findings suggest the need for organizational and policy-level support measures to ensure the stable and sustainable performance of patient safety coordinators.

Key words: Content analysis, Experience, Patient safety coordinator, Role conflict

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Oral Presentation 17

Theory-Based Mobile Self-Management Interventions for Type 2 Diabetes Patients: A Scoping Review

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Background: Diabetes self-management is crucial for preventing complications, and mobile-based interventions have emerged as promising tools. However, many existing interventions lack clear theoretical foundations or systematic evaluation of their theory implementation.

Objective: This review aimed to analyze the application of behavior change techniques (BCTs), and the extent of theory implementation using the Theory Coding Scheme (TCS).

Methods: A scoping review was conducted searching four electronic databases (PubMed, EMBASE, CINAHL, CENTRAL) and Google Scholar for grey literature. Two independent reviewers screened studies according to predetermined criteria. The BCTs was used to categorize intervention techniques, and the TCS measured theory implementation quality.

Results: Seventeen studies were included in the final analysis. A total of 25 unique behavior change techniques were extracted (mean 8.1). The most commonly used types of BCTs were 'social support (unspecified)' (n=14), 'instruction on how to perform the behavior' (n=14), 'feedback on behavior' (n=11), and 'prompts/cues' (n=11). However, techniques related to 'habit formation', 'material rewards (behavior)', 'non-specific rewards', 'framing/reframing', and 'verbal persuasion about capability' were each used in only one study in only one study. Theory implementation scores ranged from 5 to 15 (mean 10.0). All 17 studies fulfilled the criteria of 'theory of behavior mentioned', 'theory used to select intervention techniques', and 'randomization of participants to condition', while no study met the criteria of 'results used to refine theory' and only one study met the criterion of 'mediational analysis of constructs'.

Conclusion: This review reveals that mobile self-management interventions for type 2 diabetes typically employ a narrow range of behavior change techniques and demonstrate limited theory implementation beyond basic citation. Future interventions require a broader range of behavior change techniques and more rigorous theory application through tailoring interventions to individuals, empirically testing theoretical mechanisms, and using results to refine theories, ultimately enhancing intervention effectiveness.

Key words: Diabetes mellitus, Health Behavior, Mobile Applications, Self-Management, Type 2

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Oral Presentation 18

Consistency Between One-Day and Three-Day Average Dietary Intakes and their Associations with Cardiovascular Risk Factors in Patients with Metabolic Syndrome

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Background: The rising global prevalence of metabolic syndrome (MetS) underscores the need for reliable dietary assessment methods to determine the optimal duration and number of days required to accurately reflect usual intake for the prevention of complications.

Objective: This study aimed to examine the consistency and stability of dietary assessments using a 24-hour dietary recall (24HR) by analyzing the association between one-day intake and the three-day average intake. In addition, the study sought to evaluate the validity of dietary intake data by examining the associations between nutrient and food group intakes and cardiovascular disease (CVD) risk factors.

Methods: This secondary analysis used data from 185 adults aged 40-69 years who participated in a parent case-control study. Dietary intake was assessed using a 24HR, from which nutrient and food group intakes were calculated. CVD risk factors included blood glucose, HbA1c, lipid profile, blood pressure, body mass index (BMI), and waist circumference (WC). Statistical analyses included descriptive statistics, one-way repeated-measures analysis of variance, and Pearson correlation coefficients using SPSS version 29.0.

Results: One-day dietary intake was highly correlated with the three-day average dietary intake based on the 24HR method. In nutrient groups, total energy intake was significantly associated with BMI, WC, total cholesterol (TC), and HbA1c. Carbohydrate intake was associated with TC and LDL, while fat intake was associated with TC and triglycerides (TG). Saturated fat and cholesterol intakes showed significant associations with blood glucose. In food groups, protein intake was associated with blood pressure, TC, and TG, while vegetable intake was associated with TG.

Conclusion: This study demonstrated that one-day dietary intake was highly correlated with three-day average dietary intake using the 24HR method. Additionally, it is necessary to implement dietary education and interventions focused on nutrient and food group intake to help reduce the risk of CVD.

Key words: Cardiovascular diseases, Correlation of data, Metabolic syndrome, Nutrition surveys

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Oral Presentation 19

Factors Influencing Sleep Quality among College Students: A Cross-Section Study

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Background: College students experience a critical transitional period between adolescence and adulthood, during which significant changes occur in their physiological processes and daily routines. Understanding the behavioral and environmental factors that influence sleep quality in this population is crucial for identifying modifiable targets to promote better sleep health.

Objective: To examine sleep quality and insomnia among college students and identify factors that affect sleep quality.

Methods: This study employed a cross-sectional descriptive design, utilizing a convenience sample of 290 college students recruited from a national university in South Korea. Data collection occurred between March 26 and March 28, 2025. Participants completed a structured questionnaire that assessed key behavioral factors, including chronotype, exercise, bedtime procrastination, and night eating behaviors. Environmental factors, such as sleep hygiene practices, were also assessed. Sleep quality was the dependent variable, measured using the Pittsburgh Sleep Quality Index (PSQI). To identify factors influencing sleep quality, logistic regression analysis was performed, controlling for potential confounding variables, such as age, gender, and academic year.

Results: Of the 290 participants, 156 (53.8%) reported good sleep quality, while 134 (46.2%) reported poor sleep quality. Students with poor sleep quality had a significantly higher rate of severe insomnia (14.9%) compared to those with good sleep quality (1.3%). After adjusting for general characteristics, a lack of exercise (OR = 0.49, 95% CI = 0.26-0.94), sleep hygiene (OR = 1.04, 95% CI = 1.02-1.06), night eating behaviors (OR = 2.01, 95% CI = 1.13-3.57), and bedtime procrastination (OR = 3.35, 95% CI = 1.78-6.30) were found to be significant factors influencing poor sleep quality.

Conclusion: Promoting better sleep health among college students requires addressing both behavioral and environmental factors. Educating students on bedtime procrastination, night eating behaviors, exercise, and sleep hygiene can significantly improve sleep quality. By providing targeted interventions, students can be empowered to adopt healthier sleep habits and create conducive environments for restful sleep. This comprehensive approach is essential for enhancing overall well-being and prioritizing sleep health.

Key words: Sleep quality, students, sleep hygiene, night eating syndrome, sleep wake disorders

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70th Foundation Anniversary International Conference
Pusan National University College of Nursing

본 학술대회는 부산대학교 국립대학육성사업 및 간호대학 발전 기금으로 추진되어
사회적 가치 실현과 간호과학 발전에 기여하고자 합니다.

This conference was supported by the Pusan National University Development Project
and Nursing College Grant.

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