



## Investigation of the relationship between empathy levels of midwifery students and the privacy consciousness\*

### *Ebelik öğrencilerinin empati düzeyleri ile mahremiyet bilinci arasındaki ilişkinin incelenmesi*

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#### ABSTRACT

**Aim:** The study was conducted to examine the relationship between the empathy levels of midwifery students and their awareness of privacy. **Materials and methods:** The study is descriptive and relationship-seeking in nature. The universe of the study included students who continue their education in the midwifery department in Turkey. The sample consisted of 211 students determined using the snowball sampling method. The data of the study were collected by interview method via WhatsApp and e-mail using the "Personal Information Form", "Empathetic Tendency Scale" and "Privacy Consciousness Scale". Descriptive and comparative statistics were employed to evaluate the study data. **Results:** It was determined that the mean age of the participants was  $20.56 \pm 2.45$ , the total mean score of the Empathetic Tendency Scale was  $71.33 \pm 7.97$ , and the total mean score of the Privacy Consciousness Scale was  $4.63 \pm 0.37$ . Considering that the students take courses related to privacy, a statistically significant difference ( $p < 0.05$ ) was found between the privacy scale ( $p = 0.049$ ) and the sub-dimension of maintaining the privacy of others ( $p = 0.014$ ). **Conclusions:** The data obtained in the current study suggest that there is a relationship between the empathic tendency of the students and the awareness of privacy.

#### ÖZ

**Amaç:** Araştırma, ebelik öğrencilerinin empati düzeyleri ile mahremiyet bilinci arasındaki ilişkiyi incelemek amacıyla yapılmıştır. **Gereç ve yöntem:** Çalışma, tanımlayıcı ve ilişki arayıcı niteliktedir. Araştırmanın evrenini Türkiye'de ebelik bölümünde eğitimine devam eden öğrenciler oluşturmaktadır. Örneklem, kartopu örnekleme yöntemiyle belirlenen 211 öğrenciden oluşmaktadır. Araştırmanın verileri "Kişisel Bilgi Formu", "Empatik Eğilim Ölçeği" ve "Mahremiyet Bilinci Ölçeği" kullanılarak WhatsApp ve e-posta aracılığıyla görüşme yöntemiyle toplanmıştır. Araştırma verilerini değerlendirmek için tanımlayıcı ve karşılaştırmalı istatistikler kullanılmıştır. **Bulgular:** Katılımcıların yaş ortalamalarının  $20.56 \pm 2.45$ , Empatik Eğilim Ölçeği toplam puan ortalamalarının  $71.33 \pm 7.97$ , Mahremiyet Bilinci Ölçeği toplam puan ortalamalarının  $4.63 \pm 0.37$  olduğu belirlendi. Öğrencilerin mahremiyet ile ilgili ders aldıkları dikkate alındığında mahremiyet ölçeği ( $p = 0.049$ ) ile başkalarının mahremiyetini koruma alt boyutu ( $p = 0.014$ ) arasında istatistiksel olarak anlamlı bir fark ( $p < 0.05$ ) bulunmuştur. **Sonuç:** Bu çalışmada elde edilen veriler, öğrencilerin empatik eğilimleri ile mahremiyet bilinci arasında bir ilişki olduğunu düşündürmektedir.

#### ARTICLE INFO/MAKALE BİLGİSİ

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#### INTRODUCTION

Midwifery, which is an indispensable part of the health care system, is based on ethical values, combining science and art and intensely getting involved in human relations (1). The main purpose of the midwifery profession is to provide a healthy start in life with care based on current and reliable evidence (2). The essence of helping the individual in need is to provide holistic

care and to meet the care needs through effective communication established with a sense of mutual trust (3). It is important for midwives to have some professional skills in order to meet their care needs effectively. One of these skills in midwifery, which is a profession where human relations are intense, is empathy. Empathy is defined as the individual's putting himself in the place of the other person and trying to feel and understand the situation, emotion and thought



he or she is in (4). It is inevitable that the quality of midwifery care will increase thanks to the effective use of empathy skills (5).

It is observable that another professional feature for quality midwifery care is the awareness of privacy. The adoption of the concept of privacy is extremely important and necessary in terms of supporting a life worthy of human dignity and establishing effective interpersonal relations. Although the perception of privacy shows individual and social differences, it refers to the personal, confidential, private and individual space where individuals protect their tangible and intangible values as they wish (6). This individual space must not be violated by others. The Turkish Language Association (7) defines privacy as confidentiality. According to the International Confederation of Midwives (ICM), it is among the professional responsibilities of midwives to protect the privacy of the person, to keep the information of the person confidential, and to be responsible for the decisions he or she made in the light of moral and professional values, unless otherwise required by law (8). of Midwives, 2014). Respecting and observing privacy, which is a fundamental value in the delivery of health care, is a human right. In addition to this right, it is one of the important duties of the health worker to protect both body and information privacy in all attempts to be made. The existence of privacy consciousness also has an important place in midwifery practices. According to international midwifery associations, the values put forward for midwifery are professional competence, informed consent, and respect for privacy, diversity, women's values and self (9). The sense of privacy gives patients the confidence that the information disclosed will not be disseminated to others, and encourages honest and accurate communication (10).

Observing privacy and making the patient feel this way facilitates the patient's compliance, communication and increases their trust in the healthcare personnel. This not only reduces the anxiety of patients and their relatives, but also reduces the workload of the healthcare professional thanks to the patient who adapts (11). Midwifery students should know that skills such as empathy and observing privacy are important as well as behaving in accordance with scientific principles in their professional practice. A midwife with a high level of empathy understands the situation of her patient and tries to provide the most optimal benefit in the care she gives. When midwives act with empathy and privacy awareness, they can accurately identify and fully meet the needs of the individuals they care for. In this study, it was aimed to investigate the relationship between midwifery students' awareness of privacy and their empathy levels, and attempts were made to find answers to the following questions:

1. What is the empathy level of midwifery students?
2. What is their level of privacy consciousness?
3. Is there a relationship between the empathy level of midwifery students and the consciousness of privacy?

## MATERIALS AND METHODS

### Type, Place and Time of the Research

This research is descriptive and relationship-seeking in nature and was carried out in the 2020-2021 academic year with students studying in the midwifery departments in Turkey. Population and Sample of the Research

The universe of the research consisted of students who continue their training in the midwifery departments in Turkey. The sample was determined using the snowball sampling method. In determining the sample group, 67 students registered in the WhatsApp group, which included representatives of the students studying in the midwifery departments in Turkey, were contacted and invited to the research. Each of the representatives who agreed to participate in the research was asked to reach out to 5 students at their departments apart from themselves. However, 77 students, including 19 representative students who refused to participate in the research, 37 students who filled in the forms incompletely, and 40 students who did not respond to the questionnaire, were excluded from the research. Thus, the research was completed with 211 students.

### Data Collection Tools

Study data were gathered using a Introductory Characteristics Form, the Privacy Consciousness Scale (PCS) and the Empathetic Tendency Scale (ETS).

### Personal Information Form

This form was created by the researchers and consists of 4 questions including the age of the participant, what grade he or she is in, whether he or she has received any training on privacy in any of the courses he or she has taken until this term, and whether he or she thinks that the patient's privacy is given the necessary care during the clinical practice.

### Privacy Consciousness Scale

The scale developed by Tabata and Hirotsune (2014) was adapted into Turkish by Öztürk et al. (2019). The scale consists of three sub-scale: consciousness and behaviors regarding privacy of the self, 'consciousness regarding privacy of others', and 'behaviors regarding privacy of others' (12). The 5th, 7th, 8th, and 9th items

are reverse scored in the 5-point Likert-type scale. It is stated that the score that can be obtained from the scale varies between 11-55, and as the score obtained from the scale increases, the awareness of privacy increases positively.

In addition, when the score obtained is evaluated on a 5-point Likert scale, 2.5 points and below are defined as low, between 2.5 and 3.5 medium, between 3.5 and 5 points as having high privacy awareness. As a result of the confirmatory factor analysis (13) performed for the scale by Öztürk et al. (2014), the Cronbach Alpha internal consistency reliability coefficient for the whole scale was found to be .77 while the Cronbach Alpha value of the scale for this study is .70.

### Empathic Tendency Scale (ETS)

Developed by Dökmen (1988), ETS measures the tendency of people to empathize in their daily life. About half of the items of the scale, which is prepared in Likert type and consists of 20 items, are negative. Individuals were asked to mark one of the numbers from 1 to 5 next to each item and indicate to what extent they agreed with the opinion on that item. The numbers that individuals mark after reading the items form the scores for that item. While negatively written items are scored in reverse, 'totally agree' is given 1 point and 'strongly disagree' is given 5 points. A high score means a high empathic disposition, whereas a low score means a low empathic disposition. The ETS was administered by Dökmen (1988) to a group of 70 students twice, with an interval of three weeks, and the reliability coefficient of the repetition of the test obtained from these two applications was found to be .82 (14) while the Cronbach Alpha value of the scale for this study was observed to be .76.

### Data Collection

The data were announced by the representatives of the university where the researchers were working, by making an announcement to the students in the web based social platform, and the data were collected by sending the data collection tools to the students who agreed to participate in the research via Google forms. The data was analysed with the Statistical Package for the Social Sciences SPSS Statistics 25.0 program.

The data of the study show normal distribution. In the analysis, mean, standard deviation, number, percentile calculations, T Test for Independent Groups, Kruskal Wallis, One Way Anova and Tukey test were used, while correlation analysis and Regression analysis were performed to determine the relationship between the scales. The significance level was taken as  $p < 0.05$ .

### Ethical Dimension of the Research

Ethical approval (Date: 19.10.2020/Decision Number: 2020/081) was obtained from the Non-Interventional Clinical Research Ethics Committee of the relevant university for the implementation of the study. Before the research was conducted, it was stated that the participation was on a voluntary basis and written consent was obtained from the students who stated that they were volunteers.

## RESULTS

The comparison of students Empathic Tendency Scale and Privacy Consciousness Scale and their sub-scales, mean scores and some introductory characteristics is given in Table 1. The mean age of the participants was determined to be  $20.56 \pm 2.45$ , the total mean score of the Empathic Tendency Scale  $71.33 \pm 7.97$  and the total mean score of the Privacy Consciousness Scale  $4.63 \pm 0.37$ . When the introductory characteristics of the students were examined, no significant difference was found between the Empathic Tendency Scale and the Privacy Consciousness Scale and its sub-scales according to the college year. However, a significant difference ( $p < 0.05$ ) was found between the place where they grew up, the sub-scale of PCA self-awareness of privacy ( $p = 0.027$ ) and behaviors regarding privacy of others ( $p = 0.039$ ). As a result of the Tukey test, which was conducted to determine which group caused the difference, it was seen that the difference was caused by those participants growing up in the town/village. There was no difference observed between students' taking courses related to privacy and the Empathic Tendency Scale mean score ( $p > 0.005$ ), while a statistically significant difference was found between the Privacy Consciousness Scale ( $p = 0.049$ ) and the sub-dimension of maintaining the privacy of others ( $p = 0.014$ ).

In the correlation analysis made between the Empathic Tendency Scale of the students and the Privacy Consciousness Scale, a positive low-level significant relationship was determined while in the regression analysis, it was seen that 067% of the variance in the empathic tendency was explained by the privacy consciousness ( $p < 0.001$ , Table 2). In the study, no significant relationship ( $p > 0.05$ ) was found in the correlation analysis between the empathic tendency scale of the students and the sub-scale of privacy consciousness and behaviors regarding privacy of the self. However, in the correlation analysis between the privacy consciousness and consciousness and regarding of privacy for others sub-scale, a positive low-level significant relationship was found, and

Table 1. Comparison of Students' Empathic Tendency Scale, Privacy Consciousness and Sub-scales with Mean Scores and Some Descriptive Characteristics (n=211)

Introductory features	Consciousness and behaviors regarding privacy of the self	Consciousness and regarding of privacy for others	Behaviors regarding privacy of others	Privacy Consciousness Total	Empathic Tendency scale
College year					
1.class (n=72)	4.71±0.47	4.60±0.50	4.36±0.56	4.57±0.35	71.61±7.77
2.class (n=66)	4.85±0.31	4.68±0.36	4.45±0.61	4.68±0.27	71.09±7.85
3.class (n=31)	4.79±0.46	4.74±0.38	4.60±0.61	4.71±0.36	73.09±7.29
4.class (n=42)	4.78±0.41	4.50±0.66	4.46±0.75	4.59±0.50	69.95±8.97
Statistical test	F=1.373 p=.252	F=1.854 p=.138	F=1.039 p=.376	F=1.657 p=.178	F=0.974 p=.406
<b>The place where they grew up</b>					
City (n=121)	4.79±0.38	4.64±0.49	4.45±0.66	4.64±0.39	71.75±8.16
Town (n=68)	4.83±0.27	4.62±0.49	4.52±0.54	4.67±0.31	71.44±7.93
Village (n=22)	4.56±0.73	4.57±0.43	4.15±0.64	4.45±0.40	68.72±6.81
Statistical test	<b>F=3.678</b> <b>p=.027</b>	F=0.142 p=.867	<b>F=3.070</b> <b>p=.049</b>	F=3.001 p=.052	F=1.352 p=.261
<b>Learning status related to privacy</b>					
Yes (n=139)	4.82±0.38	4.66±0.46	4.51±0.62	4.68±0.34	71.33±7.91
No (n=72)	4.70±0.45	4.45±0.54	4.32±0.62	4.54±0.40	71.33±8.14
Statistical test	t=1.918 p=.056	t= 1.520 p=.130	<b>t=2.081</b> <b>p=.039</b>	<b>t=2.478</b> <b>p=.014</b>	t= 0.004 p=.997
				<b>Mean ± SS / (min- max)</b>	
Age					20.56±2.45 (18-33)
Empathic Tendency scale					71.33 ±7.97 (53-93)
Privacy consciousness scale total					4.63 ±0.37 (3-5)
Consciousness and behaviors regarding privacy of the self					4.78 ±0.41 (2-5)
Consciousness and regarding of privacy for others					4.63 ±0.49 (3-5)
Behaviors regarding privacy of others					4.44 ±0.63 (2-5)
The state of considering how much attention is paid to privacy in midwifery practices					4.83 ±0.59 (1-5)
The state of thinking how much attention is paid to patient privacy in clinics					3.61 ±1.03 (1-5)

t: the independent samples t-test, z= z score of Mann Whitney U test, K= Kruskal Wallis test score, F: The one-way analysis of variance F statistic.

in the regression analysis, it was seen that 069% of the variance regarding the empathic tendency was explained by consciousness and regarding of privacy for others sub-scale of privacy consciousness (p<0.001, Table 2). In addition, in the correlation analysis conducted between the Empathic Tendency Scale, the Privacy Consciousness Scale, and the sub-scale of behaviours regarding privacy of others, a positive low-level significant relationship was found while in the regression analysis performed, it was observed that 050% of the variance in empathic tendency was explained by the behaviours regarding privacy of others sub-scale of privacy consciousness (p<0.001, Table 2).

## DISCUSSION

In this study, the relationship between the empathy levels of midwifery students and the consciousness of privacy was investigated, and the findings were discussed in this direction with the relevant literature. When looking at the studies on the subject, we have observed that the majority of them are related to nursing students, whereas studies on those in other health disciplines, especially on midwifery students, are limited (15). Privacy is a right and sensitive subject area based on autonomy and respect for the individual. It is one of the ethical principles to be followed for midwives and prospective midwife students. At the

**Table 2.** Explanation and Correlation of the effect of empathic tendency on privacy consciousness with regression analysis

	Empathic Tendency Scale Total Score							Correlation	
	R	R <sup>2</sup>	β	t	p	df1, df2	F	r	p
Privacy Consciousness Scale*	0.258	0.067	0.258	6.858	0.000*	1. 210	14.912	.258	0.000*
Consciousness and behaviors regarding privacy of the self	0.071	0.005	0.071	1.025	0.306	1. 210	1.051	.071	0.306
Consciousness and regarding of privacy for others*	0.262	0.069	0.262	3.929	0.000*	1. 210	15.434	.262	0.000*
Behaviors regarding privacy of others*	0.224	0.050	0.224	3.326	0.001*	1. 210	11.061	.224	0.001*

\*Correlation is significant at the 0.001 level (2-tailed)

same time, it is one of the values that are taken care of and taught first in midwifery education. The total mean score of the Privacy Consciousness Scale was determined to be  $4.63 \pm 0.37$ , and the mean total score of the Empathic Tendency Scale  $71.33 \pm 7.97$ . Considering the lowest and highest scores that can be obtained from the scales, it is seen that the empathic tendency and privacy consciousness levels of the participants are moderate.

In the study by McKenna et al. (2011) investigating midwifery students' empathy and attitudes towards certain medical conditions, it was found that students generally have a moderate level of empathy and there is a constant increase from first year to senior year (16). In the study conducted by Özcan in which the empathic tendencies and skills of nurses were examined, the total score they got from the empathic tendency scale was  $65.95 \pm 10.66$  (17). In a study in which the effectiveness of a training program aimed at increasing the cultural empathy of midwifery undergraduate students at a state university in Austria was evaluated, it was determined that there was a significant increase in the empathy levels of the students after the training program (18). Although not in the same occupational group, Akıncı and Akgün's study with nursing students found that the total score on ETS was 71.8 (19). Again, in the study conducted by Yiğitbaş et al., the mean ETS score obtained by nursing students was  $66.07 \pm 9.50$ , being similar to that in our study (20). Increasing the empathy levels of both midwifery and nursing students who are trained as health professionals is extremely important in terms of increasing the quality of care given to patients. Health professionals should be free from prejudice, be respectful, and show empathy and compassion towards patients. With this type of behavior, the empathy established in situations where privacy is most important makes the woman comfortable in the presence of the midwife and she feels that she is cared for and moves away from her concerns (21).

In our study, it was determined that the total mean score of the students on the Privacy Consciousness Scale was  $4.63 \pm 0.37$ , and there was a significant difference ( $p < 0.05$ ) between the place where they grew up and behaviors regarding privacy of the self ( $p = 0.027$ ) and behaviors regarding privacy of others ( $p = 0.039$ ), the sub-scale of PCA. It has been observed that the participants living in towns or villages have a high level of behaviors regarding privacy of others. It can be said that the high level of intimacy in the settlements far from the city centers and the fact that the people living in the region are generally close relatives are effective in the strength of their awareness of privacy. In the study conducted by Eti Aslan et al. (2019), it was determined that the high level of privacy awareness among healthcare professionals is due to the culture of the region they live in (22).

In a study conducted with nursing students, the average score of behaviors to maintain the privacy of others, one of the sub-scale of the compassion awareness scale of nursing students, was found to be low (5). In the study conducted by Öztürk et al. (2014), it was stated that the behaviors of nurses showed the necessary care and respect for patient privacy (12). While the privacy consciousness scores were found to be moderate and low in studies conducted with students in the literature (2, 5, 10), in studies conducted with health professionals, the average of privacy consciousness scores was found to be moderate and good (12, 17, 22). These results show that students' privacy consciousness improves when they start their professional life. The students mentioned empathy, patience, establishing a therapeutic relationship with women and putting women at the center of the service provided, among the qualities they expect from the midwives they will choose as role models (23). Privacy is related to a person's sense of self and need to be respected and is one of the main factors contributing to women's satisfaction with their birth experience (24). In addition, one of the important



ways to help women cope with labor is to protect privacy (25). In a study conducted by Folmer et al. (2019) with 13 women who preferred to give birth at home, they especially stated that they were afraid they would not be respected in the hospital and that their autonomy would not be maintained if they went to the local delivery house (25). In a study conducted with nursing students, those who found their ethics education sufficient had a high level of privacy awareness, while their behavior score for maintaining the privacy of others was lower than that of the other groups (5). From this point of view, it seems to be important to include basic ethical principles such as empathy and privacy in education for students studying in health sciences, especially midwifery students.

### Limitations of study

The limitations of the study are that the results of the study are limited to the sample group and the data is obtained online.

### CONCLUSION

The data obtained in the study show that the empathic tendency and privacy consciousness levels of the students are moderate. It was found that as students' empathy levels increased, their awareness of developing behaviors that would protect their own and others' privacy also increased. It is important to include course content that will evaluate the empathy ability of the students, one of the communication skills, and develop the awareness of privacy in the courses that midwifery students take in their undergraduate programs. Thus, students will be able to evaluate the concept of privacy awareness in terms of others and comprehend its importance. It is especially important for students to get support from health professionals and develop a critical perspective in maintaining privacy in clinical practices.

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