

Conclusion & Recommendation

Conclusion

- 1- From the present study it can be concluded that the majority of studied nurses had negative emotional reaction. The most negative emotional reaction between nurses were distress, reject, disparage, board, helpless inadequate, and anxious. While the most positive reaction were confidently, objectivity, enthusiastic, caring, and empathetic. The most positive reaction illustrated by studied nurses toward suicidal attempt patients were caring, empathetic, objectivity, confident, and important. While the most negative reaction elaborated by studied nurses were dislike, disparage, anxious, board, indifferent empty, overwhelmed, invalid, inadequate, helpless distressed, and reject.
- 2- There was a significant relation between socio-demographic data of nurses and positive reaction as age, social status and years of experience and there was significant relation between positive reaction of nurses and their workplaces (psychiatric, emergency and medical-surgical)
- 3- The study showed that there was significant difference between nurses' positive reaction and their educational level as more than half of studied nurses had nursing diploma and had enthusiastic reaction while the majority of nurses who have B.S of nursing had objectivity in dealing with suicidal attempt patients. On the other hand the majority of nurses who had nursing diploma had negative reactions as being bored, aloof, invalid and dislike. While the majority of BS nursing had negative reactions namely; disparage, on guard anxious, caution, distressed and reject during dealing with suicidal attempt patient.

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Recommendation

Based on the findings of the present study the following recommendations are suggested.

- 1- creating milieus that give nursing staff members the opportunity to express and share their emotional reaction to suicidal client
- 2- The nurse should be alert to symptom of stress and engaged in stress reduction exercise, and regular share their experience and emotional reaction toward this client with other nurses who care with suicidal client.
 1. Increase nurses' awareness about importance of their role in caring and supporting suicidal attempt patients and preventing recurrence of suicidal acts.
 2. Adequate training program must be given to nurses working with suicidal attempt patients.
 3. Continuous up-to-date educational programs to provide nurses with new technology and new information in caring for suicidal attempt patients.
 4. Providing hospital safety measures in emergency wards and other hospital departments for nurses' security and safety during working with suicidal patients.
 5. Adequate clinical training period before caring for suicidal patient and in-service training program must be considered to alleviate nurses' stress.

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6. Providing a system to select psychiatric and emergency nurses who could be able to tolerate job stress and deal with special types of patients.
7. More attention should be given to nurses to improve their financial rewarding system to encourage nurses to work effectively with their suicidal attempt patients.
8. Further researches must be done to identify nurses' attitude towards suicidal patients and psychotic diseases.