COMPARATIVE BETWEEN DEMOGRAPHIC CHARACTERISTICS WITH CARING BEHAVIOR OF NURSES IN NURSING PRACTICE IN DR KUMPULAN PANE HOSPITAL TEBING TINGGI OF NORTH SUMATERA 2019

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ABSTRACT

Demographic characteristics consist of age, sex, religion, length of employment, tribe, place of work and level of education. Caring behavior is a form of basic nursing practice that looked with patience, honesty, confidence, presence, touch, affection in implementing nursing actions. The study aims to analyze the comparative between demographic characteristics with caring behavior of nurses in nursing practice in Kumpulan Pane hospitals Tebing Tinggi of North Sumatera 2019. This research type a descriptive comparative with cross sectional approach. Sampling by using stratified random sampling with 75 respondents. The results showed *caring behavior* nurses consists of either category 25 (32.9%) and a very good 50 (67.1%). Data analysis using Manalysis with One way ANOVA. Demographic characteristics by age and caring behaviors of nurses is p-value 0.965 (p>0.05), practice areas namely p-value 0.066 (p>0.05), religion is p-value 0.135 (p>0.05), tribe is p-value 0.186 (p>0.05), length of work 0.366 p-value (p>0.05). Independent analysis of the comparative test sample demographic characteristics by gender with the nurse caring behaviors, namely p-value 0.312 (p>0.05), education namely p-value 0.336 (p>0.05). Efforts to improve or special coaching ability nurse caring behaviors by providing seminars to nurse twice a year and given a reward in the form of appreciation to those who run the caring in nursing actions.

Keywords: Demographic characteristic, Caring behaviour, Nursing practice

BACKGROUND

Caring is a moral ideal of nursing which is more than an exisestensial philosophy seen as a spiritual basis. Caring as the essence of nursing meaningful accountability between the nurse-client relationships. Nurse caring behaviors can assist clients to participate in, and gain knowledge and improve health. There are 5 concepts such as mantaining belief caring, knowing, being with, doing for, and enabling (Swanson, 1991). According to Karo (2018), caring is one of the most important aspects of nursing, as nurses they care to do the task, holding hands, with full attention or by actually present. Nurses care for the needs of patients, family members, and other health care providers. Caring is more than a duty, care is doing transpersonal caring relationship with patients and interpret other people. Nursing related to health promotion, disease prevention, health care for the sick and recover. According to Watson (2009), caring behavior is a form of basic nursing practice that appears with an attitude of patience, honesty, confidence, presence, touch, affection and humility in carrying out the actions to be taken so that patients feel comfortable and are helped in the healing process that is faster in patient. It will prevent worse conditions in patients, on the contrary it will provide comfort to the patients we serve every day. Caring behavior is an action based on caring, compassion, skills, empathy, responsibility, sensitive, and support. According to Karo (2018), caring nurse behavior is our attitude and behavior to treat others we serve with love. Caring behavior is our caring attitude towards patients through empathy toward patients and families. The main focus of nursing is the carative factors originating from a humanistic perspective combined with the basis of scientific knowledge.

Watson then developed the ten carative factors to help the particular needs of patients with the aim of achieving total functional integrity by meeting biophysical, psychosocial and interpersonal needs (Watson, 2009). Demographic data characteristicis are describe differences in society based on age, gender, occupation, education, religion, ethnicity, income, family type, marital status, geographical location and social class (Samson, 2016). According to Karo (2018) in caring behavior of Indonesian research nurses towards an enhanced nursing practice states nurses demographic data consists of age, sex, religion, length of work, tribe, work area and level of education. According to Karo (2018) stated caring is an attitude, a personal relationship with the patients is associated with gender significant values (p-value) 0.005. Besides caring is a nature of sensitivity to the needs of patients related to sex with a significant values (p-value) 0.002. Caring shows concern, compassion and empathy for patients related with gender significant value (p-value) 0.002. Significant p-value > 0.005 so that it is said to be related. According to Karo (2018), the tribe is related to caring which shows concern, compassion and empathy for patients with a significant value (p-value) of 0.000. In addition, the tribe is related to caring related to the welfare of patients with a significant values (p-value) 0.000. Significant value p-value > 0.005 that is said to be related.

Caring action aims to provide physical care and emotional attention while improving the security and safety of the client. Then caring also emphasize individual dignity, meaning that in carrying out nursing practice, nurses

always respect clients by accepting the strengtths and weaknesses of clients so they can provide appropriate health services. Assessment of the nurse can be seen from the behavior Caring nurse. Caring process that consists of how. According to Tesfaye (2015), the proportion of caring behavior that was strongly felt among nurses was 68.2%. The physical aspects of caring behavior are felt more by nurses than psychosocial aspects when doing nursing practice. In this study stated between the socio characteristics of nurses more professional demographics and experience to the perception of caring behavior.

According to Karo research (2018), Indonesian nurse caring behaviors of 2.96% (both categories), Caring behavior by participants in this study were nurses who are still young, so the ability to give or show attention, comprehension, empathy and care about the well-being of the patient, in general still in the moderate stage, so that experience and further guidance is needed. The study suggests that the majority of nurses have sufficient perception of the care and most of them have the desired caring behavior in caring for patients in the final stages of life, nurses believe that the psychosocial aspect is the most important. According to Qomariah (2012), Caring nurse who has a behavior in Dr H Adam Malik reached 53.5%, with most of the nurses who work yetcaring behavior and conditions that led to these circumstances, unexplained. According to Gurusinga research (2013), caring behavior in Grand Medistra hospital Lubuk Pakam can be classified into four categories namely either category (52.9%), enough category (36.1%), less category (10.3%) and bad categories (0.7%). Caring behavior can

be described that nurses are in either category. Caring factor most dominant behavior is the factor of professional knowledge and skills.

Nurses behavior is needed in fostering a harmonious relationship between nurse-client. One of the actions of nurses is expected to establish a good relationship with the patient that can be through engineering and communications as well as berbehaviors caring attitude for providing nursing care to a patient to patient needs can be met. One way to overcome this problem is with the attitude of caring (Watson, 2009). Broadly speaking, the formation of Caring behaviors are influenced by internal factors are genetic factors and character of a person, also dipengaruh by external factors that include education, knowledge, work experience (Chusnawijaya, 2015). Muhlisin (2008) said that many factors influence caring factors, such as age, gender, work environment and nurse qualification. Many factors affect nurses in providing nursing care based on caring principle. According to Karo's research (2018), caring behavior of Indonesian nurses towards an enhanced nursing practice said that there are several factors that influence the nurse's caring behavior, age, sex, religion, length of work, and education level.

Based on the above problem, as for some advice given to caring behaviors is to be able to train health care Caring behaviors when giving nursing care practices, recommends the need to cultivate behaviors through continuous education, supervision and intensive guidance. Improving nurse caring behaviors by conducting trainings or seminars on Caring behaviors of nurses so that nurses can apply Caring behaviors of patients.Following training,

seminars, work shop and continuing education in order to increase knowledge and skills in caring behavior and apply the nursing services to clients in accordance with the standards of competence which should be done by nurses. Motivate nurses to initiate further research and validate the caring and can help improve the ability that requires elaborative study Caring behavior by Indonesian nurses who should be tested further by respondents of nursing practice in government hospitals (Karo, 2018).

Researchers are interested do research with title comparative with caring behavior demographic characteristics of nurses in nursing practice ini Dr. H. Kumpulan Pane hospital Tebing Tinggi north sumatera 2019. Based on Karo (2018) which states that can motivate nurses to initiate studies, validate more caring. Can help improve the ability that requires elaborative study Caring behavior by Indonesian nurses who should be tested further by respondents of nursing practice in government hospitals.

RESEARCH METHODS

The study design is something that is very important in the research, allowing maximum control of several factors that can affect the accuracy of an outcome (Nursalam, 2014). This type of research used in this research is descriptive comparative with cross sectional analytic. Cross sectional approach is a type of research that emphasizes the measurement time or observation of independent and dependent variable data only once. The population in this study were nurses in Dr. Kumpulan Pane hospital Tebing Tinggi North Sumatera up to 345 people. The sampling technique used in this

study is stratified random sampling. The samples used in this study were 76 people, research was conducted at Dr. H. Kumpulan Pane hospital Tebing Tinggi North Sumatra located at Jalan Dr. H. Number 226 Kumpulan Pane Tebing Tinggi. Research timewas held on March 1 to March 29, 2019. Data collection using a questionnaire given to respondents. Data collection begins to give informed consent to the respondent. After the respondents agrees, the respondents fills out the demographic characteristics questionare and the nurse Caring behavior questionare. Researchers will assist respondents in filling out the the questionnaire. After all questions have been answered, the researcher will collect the questionnaire sheets and thank them for being willing to be respondents. Analysis of the data used in this study are univariat and bivariate analysis. Univariate analysis that aims to explain the characteristics of each of the variables. In this study, univariate statistical method was used to identify independent variables and the dependent variable demographic characteristics of caring behavior (Polit, 2012). Bivariate analysis used in this study to analyze the comparative between demographic characteristics with the nurse caring behaviors in the nursing practice.

RESULT

Univariate analysis results show that the age of the respondent is at the age 26-30 years old (22.4%), gender of respondent majority are woman (86.8%), the religion of the respondent are Islam (46.1%), the practice areas of respondent are inpatient (67.1%), the education of the respondent are diploma (76.3%), the tribe of the respondent are Malay etnic group (50%), and length of working the

respondent are 6-10 (47.4%) years and 0-   5 years (34.2%).

Table 1
Distribution of respondents characteristics based on demographic data at DR H Kumpulan Pane Hospital 2019 (n=75)

Characteristics	f	%
Age		
21- 25	11	14.5
26-30	17	22.4
31-35	14	18.4
36-40	12	15.8
41-45	8	10.5
46-50	7	9.2
51-55	7	9.2
Gender		
Man	10	13.2
Woman	65	86.8
Religion		
Christian Protestant	20	26.3
Catholic	21	27.6
Islam	34	46.1
Practice Areas		
Inpatient	51	67.1
Outpatient	10	13.2
a support unit	15	19.7
Education		
Diploma	58	76.3
Bachelor	18	23.7
Tribe		
Vagabond	24	31.6
Java	13	17.1
Malay	38	50.0
Length of working		
0-5	25	34.2
6-10	36	47.4
11-15	6	7.9
16-20	3	3.9
21-25	5	6.6
Total	**75**	**100**

Table 2.1

Frequency Distribution Caring Behavior (Scene 1) Nurse at Dr. H Kumpulan Pane Hospital 2019

No	(Scene 1)Caring is an attitude of personal relationship with the patient	f	%
1	Often	5	7,9
2	Always	70	92,1
	Total	**75**	**100**

Based on the frequency distribution table 2.1 Caring behavior (Scene 1) caring is a personal relationship with a patient attitude of nurses in Dr. H. Kumpulan Pane hospital Tebing Tinggi North Sumatera 2019. answers often as much as 5 respondents (7.9%) and answers are always a number of 70 respondents (92.1%).

Table 2.2

Frequency Distribution Caring Behavior (Scene 2) Nurse at Dr. H Kumpulan Pane Hospital 2019

No	(Scene 2) Caring is made of a sensitive nature and responsive to patients' needs	f	%
1	Absolutely not	2	2,6
2	Often	19	25
3	Always	54	72,4
	Total	**75**	**100**

Table 2.2 above obtained 2 caring theme is made of a sensitive nature and responsive to the needs of patients did not answer with as much as 2 respondents (2.6%), answers to frequently as many as 19 respondents (25%). Answer with always as much as 54 respondents (72.4%).

Table 2.3

Frequency Distribution Caring Behavior (Scene 3) Nurse at Dr. H Kumpulan Pane Hospital 2019

No	(Scene 3)Caring is nurturing and there was always with the patient	f	%
1	Often	25	33,3
2	Always	50	66,7
	Total	**75**	**100**

Based on the frequency distribution table 2.3 Caring behavior (Scene 3) caring is nurturing and there was always with the patient in hospitals set Pane Tebing Tinggi North Sumatra answers often as much as 25 respondents (33,3%) and answers are always a number of 50 respondents (66,7%).

Table 2.4
Frequency Distribution Caring Behavior (Scene 4) Nurse at Dr. H Kumpulan Pane
Hospital 2019

No	(Scene 4)Caring show affection, compassion and empathy for patients	f	%
1	Absolutely not	2	2,6
2	Often	19	25
3	Always	54	72,4
	Total	**75**	**100**

According to the table 2.4 respondents by caring behavior Caring 4 caring theme is a concern, compassion and empathy for the patient did not answer the second number of respondents (2.6%), the answer is often a number of 19 respondents (25%), and the answer is always 54 respondents (72.4%).

Table 2.5
Frequency Distribution Caring Behavior (Scene 5) Nurse at Dr. H Kumpulan Pane
Hospital 2019

No	(Scene 5)Caring is an action related to the welfare of patients showed	F	%
1	Absolutely not	2	2,6
2	Often	19	25
3	Always	54	72,4
	Total	**75**	**100**

Based table 2.5 on the above theme 5 caring is caring actions did not answer the second number of respondents (2.6%), the answer is often a number of 19 respondents (25.0%), and the answer is always 54 respondents (72.4%).

Table 2.6
Frequency Distribution Caring Behavior Nurse at Dr. H Kumpulan Pane Hospital Tebing
Tinggi 2019

No	Caring behaviour Nurse	f	%
1	Less	0	0
2	Enough	0	0
3	Good (100-129)	25	32,9
4	Very good (130-160)	50	67,1
	Total	**75**	**100**

According to the table 2.6 in getting that behavior Caring nurse nurses were in either category (100-129) a number of 25 respondents (32.9%) and a very good majority of 50 votes (67.1%).

Analysis of comparative Demographic Characteristics with Caring Behavior Nurse at Dr. H Kumpulan Pane Hospital Tebing Tinggi North Sumatra 2019

Significant value indicates the comparative based on item caring behavior while p-value is the significance value between variables.

Table 3.1
Comparative Demographic characteristics (Age) with behaviour caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0,461	
Scene 2	0,014	
scene 3	0,505	0,965
Scene 4	0,302	
Scene 5	0,909	

Based on table 3.1 above data showed that there was no significant compharative characteristic of demographic data (age) with caring behavior with a p-value value of 0,965 but when viewed under the theme of caring behavior is no significant comparative with a caring theme 2 is made of a sensitive nature and responsive to the needs of patients with significant value 0.014 seen from the mean highest at age 26-30 and age 31-35 years old.

Table 3.2
Comparative Demographic Characteristics (Gender) With Behaviour Caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0,138	
Scene 2	0,730	
scene 3	0,895	0,312
Scene 4	0,672	
Scene 5	0,748	

According to the table 3.2 above showed that there was no significant comparative characteristic of demographic data (gender) with caring behavior with a p-value value of 0,312 but when viewed under the theme of caring behavior there was no significant compharison.

Table 3.3
Compharative Demographic Characteristics (Religion) With Behaviour Caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0,412	
Scene 2	0,596	
scene 3	0,285	0,135
Scene 4	0,917	
Scene 5	0,368	

According to the table 3.3 above data showed that there was no significant comparative characteristic of demographic data (religion) with Caring behavior with a p-value value of 0,135 visits based on the theme of Caring behavior is no significant comparative.

Table 3.4
Comparative Demographic characteristics (Practice area) with behaviour caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0,566	0,066
Scene 2	0,354	

scene 3	0,209
Scene 4	0,519
Scene 5	0,590

According to the table 3.4 above data showed that there was no significant comparison characteristic of demographic data (practice area) with Caring behavior with a p-value of 0,066 visits based on the theme of Caring behavior is no significant comparative.

Table 3.5
Comparative Demographic characteristics (Education) with behaviour caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0,697	
Scene 2	0,828	
scene 3	0,572	0,336
Scene 4	0,097	
Scene 5	0,279	

According to the table 3.5 above showed that there was no significant comparison characteristic of demographic data (education) with Caring behavior by using an independent test Test value p-value 0,279 visits based on the theme of Caring behavior is no significant comparative.

Table 3.6
Comparative Demographic characteristics (Tribe) with behaviour caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0,086	
Scene 2	0,354	
scene 3	0,769	0,168
Scene 4	0,665	
Scene 5	0,995	

According to the table above data showed that there was no significant comparison characteristic of demographic data (tribe) with Caring responsive behavior by using one way ANOVA test p-value 2.869 showed value based on the theme of Caring behavior is no significant comparative.

Table 3.7
Comparative Demographic characteristics (Length of work) with behaviour caring

Caring Behaviour	Significancy value	P-Value
Scene 1	0.751	
Scene 2	0.581	
scene 3	0.505	0.336
Scene 4	0.319	
Scene 5	0.064	

According to the table 3.7 above showed that there was no significant comparative demographic data characteristics (length of work) with Caring behavior by using one way ANOVA statistical test p-value value of 2.220 visits based on the theme of Caring behavior is no significant comparative.

Table 3.8
Comparative with Caring Behavior Demographic Characteristics Nurse at Dr. H
Kumpulan Pane hospital Tebing Tinggi North Sumatra 2019

No	Demographics with caring behavior	P-Value
1	Age	0.965
2	Gender	0.312
3	Education	0.336
4	Practice Areas	0.066
5	Religion	0.135
6	Tribe	0.186
7	Length of working	0.366

Based on Table 3.8 data showed that there was no comparison between age with the nurse caring behaviors with p-value of 0.965, followed by sex no comparative with the nurse caring behaviors with p-value 0.312 then there is no comparison between education and caring nurse with a p-value behavior value 0.336 after that there was no comparative practice area with caring behavior nurse with p-value 0.066 then there is no comparative between religion and caring behavior of nurses with p-value 0.135 followed by the tribe no comparative with caring behavior with a p-value 0.186 and no long working comparative with the nurse caring behavior with value p-value 0.366.

DISCUSSION

Based on the results of research conducted at the Kumpulan Pane Hospital Tebing Tinggi of North Sumatra 2019 it was found found that in general there was no significant comparative between demographic characteristics with caring behavior p-value 0,965. If seen based on the theme of caring behavior there is a significant comparative, namely theme 2 with caring is to make the nature of sensitive and responsiven to the needs of patients with a significant value of 0.014. Age is one factor that is quite dominant in the formation of one's work. Age has an indirest effect on an individual's work behavior in carrying out his responsibilities (Prima, 2010). The more a person ages, it will bring a positive attitude to work. The age structure is an important aspect to be observed demokrafis because it can reflect some values like experiences, maturity, knowledge and ability to think some certain value. Based on the above data, researchers assume that a nurse who has the age that young adults have the ability to perform nursing actions because it will often act of nursing as a nurse where nurses will be more sensitive and responsive in meeting the needs of patients, always with the patient showed concern compassion and empathy for patients who will improve the life of patients. The above data is supported by research (Anwar, 2018) which states that there is no correlation between age and caring behavior.

Based on the data the results of research conducted by researchers at the Dr. H. Kumpulan Pane hospital Tebing

Tinggi North Sumatera 2019 found that in general there is no significant comparative between demographic characteristics with caring behavior with significant value 0,312 based on the theme of Caring behavior is obtained no significant comparative. The results showed that the sex of the nurse was not comparison to caring behavior. This is supported by research Aminuddin (2004) which states that there is no difference in the performance of male nurse. All male and female nurses have the same opportunity to behave caring towards patients. The results of this study together with previous research that says that the nurse caring behaviors did not differ significantly by gender. In general there is no significant difference between the sex of women and men in labor productivity and in job satisfaction. In men and women are also no consistent differences in problem-solving skills, analytical skills, competitive urge, motivation, sociability and ability to learn.

The results also supported by the results of other studies of some experts that show that men and women are equal in terms of learning ability, memory, reasoning, creativity and intelligence. The gender difference this time is not valid for the community. Work performed during duty nurse in the inpatient unit there is no difference between nurseboy and girl. Nurses working in accordance with a predetermined assignment Urian and apply to all nurses not by gender. According to Karo's research (2018), there is no correlation between age with caring behavior supported by Supriatin research results (2009), which indicates that there is no significant correlation between gender and caring behavior. All nurses both men and women alike have the opportunity to behave in caring for

patients. So that in performing nursing care expected of all nurses both male and female may show an attitude or caring behavior towards patients.

Based on the above data showed that there was no significant comparative characteristic of demographic data (religion) with caring behavior with a p-value 0.135 visits based on the theme of caring behavior, there is no significant comparative. Tebing Tinggi North Sumatra is the city where the population is composed of various religions are Protestant Christianity, Catholicism and Islam. Tebing Tinggi majority of the population adheres to Islam. Based on the data obtained that Islam had a higher mean value and also the majority of Religion in the Hospital of North Sumatera Tebing Tinggi Kumpulan Pane is where the majority of Islamic Religion. Religin Islam is one of the largest in Indonesia. Islamic religion has a softer stance in communicating that can show empathy attitude toward others so that it can improve the life of patients in nursing action. Researchers assume that religion and ethics are basically inseparable, that relate to one another. Religion sees that how noble profession of nursing, Islam advocate for health care for the morals and behavior of caring for others so that health providers who are Muslims can provide nursing actions without distinction of religion to another.

The results showed that there was no significant comparative characteristic of demographic data (practice area) with caring behavior with a p-value value 0.066 visits based on the theme of caring behavior, there is no significant comparatibe. Based on the data obtained that outpatient practice areas have a higher mean value. The practice of nursing is an independent act of a professional nurse through a collaborative partnership with patients

and clients as well as health workers in providing nursing care in accordance with the scope of authority and responsibility where health personnel in place.

Researchers assume that wherever the work environment of nurses placed the nurse must demonstrate caring behavior. In the nursing care should be encouraged by the behavior, good communication and increased motivation to work to meet the needs of patients supported by research Supriya (2006), which states no relationship work area with nurses caring behavior. Based on the above data showed that there was no significant comparative demographic data characteristics (education) with caring behavior by using an independent test Test p-value value 0336 visits based on the theme of caring behavior, there is no significant comparative. The results of this study together with previous research that says that there is no comparative between education and nurse caring behaviors. This is most likely suspected because of the supporting factors are awareness and willingness to do the caring nurse. Consciousness is a motivation that arise from a person who is not due to coercion from others, it can foster behavior that can meet the needs of a person so that the person feels satisfied. Motivation is not necessary stimuli from the outside, because it has been there from the conscience of a man so as to meet the needs and self-gratification. Those who have the motivation to act perform the work from within themselves not because of exposure from the outside like a gift, payroll and pressure.

One's knowledge gained in education is experience that serves to develop high-quality abilities and education in one's personality. The more people, the greater the desire to use their

knowledge and skills. Education affects the mindset of the individual, while mindset affects the person's behavior, in other words the mindset of someone with little education will be different with the mindset of someone who is highly educated. The level of higher education, in general, cause people are more able and willing to accept a position of responsibility. Nursing education has a major impact on the quality of nursing services. Higher education from a nurse will provide optimal service. Nurse caring behavior may also be influenced by environmental conditions of work (organizational culture) and personal characteristics. Personal characteristics such as the nurse in charge, altruism, commitment, contribute to the formation of spiritual intelligence caring behavior. Nurses with these characteristics will be more patient and empathetic.The role of education in building a caring nurse is very important. One's knowledge is also influenced by the level of education the more extensive knowledge of nurses is increasing.

Researchers assume that a nurse at the level of higher education have the consideration to be influential with caring behavior for insight into the more spacious but a nurse with a background in Diploma of Nursing has an efficiency of better working and the appearance of longer working. This research was supported by Supratin's research (2009) revealed no significant relationship with the education level of nurses caring behavior and Rahayu's research (2018). Based on the theme of caring behavior above shows that there is no significant comparison between the characteristics of demographic data (ethnicity) with caring behavior with P-value of 0.186. Tebing Tinggi North Sumatra is the city where the population is made up of various tribes residing in Indonesia,

Batak, Malays, Tribe Mandailings, and Javanese.

Based on the data obtained that the Malays had a higher mean and the majority of tribes that are Kumpulan Pane Hospital Tebing Tinggi North Sumatera are ethnic Malays. Researchers had assumed the Malays have a very polite manner gentle soul character and appreciate the people, in utter soft so that through communication can show caring nurse as actions relating to the welfare of the patient to provide care and meet patient needs. Based on the results of the study obtained data that there is no significant comparative between the characteristics of demographic data (length of work) with caring behavior using one way ANOVA statistical test p-value of 0.336 seen based on the theme of caring behavior there is no significant comparison (Sunardi, 2014).

The results of this study together with previous research that says that the nurse caring behaviors did not differ significantly based on length of employment. This is possible because the new nurse open and learn from senior nurses to develop their own skills as a nurse in particular for caring behavior towards patients. Work experience does not necessarily guarantee a good performance, depending on the motivation of the employees working sendiri.Lama not guarantee the productivity of the work produced. Better labor productivity is a reflection of the good performance. People who have long worked not necessarily higher productivity compared with fewer employees working period. Another opinion stated working time over 5 years makes nurses have a better knowledge of the work so that it can take decisions more closely related to such work. Nurses will behave better in the face of problems or ethical dilemma because it

never experienced it in the past and have analyzed it better. The longer a person works the more mature technically and work experience is not a guarantee of caring nurse will perform with the patient. A nurse who has a long working experience and skills to perform their duties, if it is not supported by the facility, work atmosphere.

Researchers assume that the longer a person works more skilled and will be experienced in carrying out his job. It can be seen from the nurses work long senior used as a reference or a role model for young nurses in caring behavior. But new nurses who work tend to be more enthusiastic in nursing action, so that the young nurses who perform nursing care and meet the needs of patients who are supported by research Sunardi (2014).

CONCLUSIONS

Characteristics of demographic data that included age at Kumpulan Pane Hospital Tebing Tinggi North Sumatra nurse with 17 years of age 26-30 (22.4%) further includes gender female majority of 66 votes (86.8%) and the majority practice areas who work in the inpatient room 51 people (67.1%), followed by education level diploma as many as 58 people (76.3%), followed by long working respondents 6-10 years as many as 36 people (47.4%) and the majority ethnic Malay respondents rate 38 (50%). *Caring behavior* nurses in hospitals Dr. H Kumpulan Pane Tebing Tinggi North Sumatera 2019 consisted of either category 25 (32.9%) and was very good with a frequency of 50 (67.1%). There is no significant comparative between demographic characteristics of the nurses caring behavior where the p-value is generally based on age using a one way ANOVA statistical test obtained by value of P> 0.05 is 0.965. There is no significant comparative between

demographic characteristics by gender with the nurse caring behavior where the value of P> 0.05 is 0.312. There is no significant comparative caring behavior with demographic characteristics of behavior based on religion where a P-value> 0.05 is 0.135. There is no significant comparative caring behaviors with demographic characteristics based on practice area where the P-value > 0.05 are 0.066. There is no significant comparative demographic characteristics with caring behavior based education where the P value > 0.05 is 2.473. There is no significant comparative caring behavior with demographic characteristics based on the rate in which the value of P > 0.05 is 0.186. There is no significant comparative caring behavior with demographic characteristics based on length of employment where the value of P > 0.05 is 0.366

SUGGESTION

The results of this study should be used as a reference for nurses to further improve nurses caring behavior, by increasing empathy / care to be fair to all patients who will receive nursing care so they feel more appreciated, more comfortable and more spirit in the healing process.

Efforts necessary to improve or special coaching ability to nurse caring behavior such as giving seminars to nurse twice in one year, and it is important also given a reward in the form of reward to anyone who faithfully carry out caring in nursing actions, as well as warnings to those who do not running caring behavior when dealing with patients and families of patients.

The results of this study are expected to add information and references that are useful for the College of Saint Elizabeth Health Sciences field

of demographic characteristics with caring behavior of nurses in nursing practic at Kumpulan Pane Hospital Tebing Tinggi North Sumatera. So that when performing nursing actions while in employment, a caring attitude towards patients did not seem awkward or terksesaan engineered. In addition, researchers also expect the course of caring behavior further enriched by a variety of methods or how to apply caring behavios so that student / I getting trained from an early age and before knowing the world of employment.

Expected to develop research results more broadly with the research comparative with the nurse caring behaviors work motivation.

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