

：

* . ** . *** . *** . *** . ***

1.

(Kim, Kim & Lee, 2001)

가 (Kim, 1983; Hur, 1983; Kim & Kim, 1999),

(Lee, 1985).

가 1930

(Peplau, 1997)

가

가

(Lee

& Chun, 1996).

(Hong, 1982;

Lee, 1985; Lee & Chung, 1999), 가

가

가

가

(Caldwell &

Weiner, 1981; Wheeler, 1998),

*
**

2001 9 17

2002 3 18

2002 4 29

W
가
4 7
6
가
2.
4 7
1)
가 Benner (1984) Jang (2000)
2)
3)
1.
4 7
3.
가
가
가
(ethnography)
가 (qualitative research methodology)
(lived experience)
(intersubjectivity), (existential intuition)
4.
2000 10 4
2. 2001 5 14 8
가

- (formulating meaning) .
- 5) (theme) (theme cluster) .
- 6) (description) (exhaustive description) .
- 7) 가
- 가 1 1 40
- 가
- 가
- 가 6
- 가 2-3
- 가 6
- 가
5. 6.
- Colaizzi(1978)가 , Colaizzi ,
- 1) 가
- (description) .
- 2) 3
- 3) (significant statement or phrase) 1'
- 4)

<Table 1>

1. (formulated meaning)

2.

1998).
6
(sentence) (phrase)
185
(formulated statement)

(Lee, Lim, & Park, 1998).
6
(sentence) (phrase)
185
(formulated statement)

7
77가 ; 1)
, 2)
, 3)
, 4)
, 5)
, 6)
, 7)

<Table 1> The statements formulated by researchers from significant statements

significant statements	meaning formulated by researchers
After I became familiar with routine work, I experienced difficulty in dealing with other nurses. I could not get along with nursing colleagues who had different personalities. I only needed to work hard to be familiar with work, but I had trouble in interpersonal relations...	Nurses experience difficulty in interpersonal relations after becoming familiar with work,
when I was junior nurse, I easily got angry and because I was inexperienced. I made quick judgements on right and wrong in treating patients and their significant others. And now, I have become more flexible, appreciative and think of the situation of others.	In the beginning, nurses were in skilled in dealing with patients, their significant others and doctors, but they became more confident in treating them as experience increased,
I was always yes-person when my senior nurses told me something to do, and I accepted my mistakes unconditionally, whenever they were pointed out to me. However these days, junior nurses seldom agree with seniors' advice, they always tend to make excuses for their errors. I recognize that they are different from me in their way of thinking and behavior. How rude they are!	Nurses evaluate other nursing colleagues on their past experience in ward settings. They feel a generation gap with junior nurses if the juniors have different way of thinking and behavior.
There was a new nurse on my ward, but I didn't say anything personal to her. I only communicate on work related matters when I don't like a nurse. This is my style of treating others who are in conflict with me.	Nurses avoid nursing colleagues with whom they are in conflict,
There are some close colleague groups. I relieve my stress when I get together and chat with 2-3 close colleagues. I don't associate with others except for my familiar colleagues.	Nurses resolve their conflict through close peer groups. They have limited interpersonal networks meeting informally with close colleagues.

가 Cho(1993) 가

가

가 가

가 8가

가 가

가 가

가 가

(Kim, Kim Lee, 2001)

(Smith, 1983).

Kim, Kim Lee(2001)

가 가 가

(Lee, 1985), (Hall 가

et. al., 1997), (Lee & Chun, 1997) 가

가

가

3

- Clinical Nurses' Professional Conflicts. *Journal of Korean Academy of Nursing*, 31(3), 492-505.
- Kim, S. S. (1983). *A Study on Nurses' Job Satisfaction in the General Hospital*. Master's thesis of Seoul University.
- Kim, Y. H. & Kim S. G. (1999). A Study on the Pay and Job Satisfaction of Clinical Nurses in Some Hospital. *Journal of Korean Administration of Nursing*, 5(1), 137-148.
- Lee, K. J. (1985). A Study on the Self-disclosure of Nurses after Human Relations Training. *J Korean Acad Nurs*, 15(3), 31-38.
- Lee, K. J. (1995). *Human Relations and Communication in Nursing situation*. KNA Continuous Education Materials. 3-42.
- Lee, G. J. & Chun, I. Y. (1997). The Effect of Human Relations Training as the Program to Improve the Ability of University Employees. *Nursing Science*, 9(1), 31-38.
- Lee, E. O., Lim, N. Y., & Park, H. A. (1998). *Nursing · Medical Research and Statistical Analysis*. Seoul: Soo Moon Sa.
- Lee, C. S. & Jung, K. H. (1998). A Study on Nurses' Human Relationships and Ego States Displayed by Ego Gram. *Chonnam Journal of Nursing Science*, 4(1), 107-126
- Patterson, C. H. (1972). Ethical standards for group. *The Counseling Psychologist*, 3(3), 93-101
- Peplau, H. E. (1997). Peplau's Theory of Interpersonal Relations. *Nursing Science Quarterly*, 10(4), 162-167.
- Smith, C. M. (1983). *Concepts of Organizational Dynamics*. In Jacobson, S. F. & McGrath, H. M., Power. *Nurses Under Stress*(140-175). New York: John Wiley & Sons.
- Wheeler, H. H. (1998). Nurse Occupational Stress Research 5: Sources and Determinants of Stress. *British Journal of Nursing*, 7(1), 40-43.

- Abstract -

Clinical Nurses' lived Experience of Interpersonal Relations in the Ward Setting of the hospital

Ahn, Yang-Heui · Kim, Dae-Ran
Seo, Bok-Nam · Lee, Kyoung-Eui
Lee, Eun-Ha · Yim, Eun-Shil*

Purpose: The purpose of the study was to describe the essential structure of the lived experience of clinical nurses' interpersonal relations among nurses, patients, and others in the ward setting of the hospital.

Method: Six nurses who have experienced from 4 to 7 years on the same ward setting, were interviewed. The data were collected from September, 2000 to May, 2001 and analyzed using Colaizzi's (1978) method of phenomenology.

Result: In this study, 7 themes were extracted: difficulty of interpersonal relations after being familiar with work, developing good relations with doctors, patients, and their significant others as experience increased, generation gap among individual nurses, evaluating other nursing colleagues on their past experience in ward settings, avoiding nurses with whom one was in conflict, sometimes, resolving conflict through getting together with colleagues informally, having a limited interpersonal network, experiencing becoming mature through struggling with the difficulty of interpersonal relations.

Conclusion: Nurse managers need to provide resources, opportunities, and information to clinical nurses through fully understanding the characteristics of nurses' interpersonal relations. In addition, they should minimize the factors which intervene with good interpersonal relations among clinical nurses.

Key words : Clinical nurse, Lived experience, Interpersonal relations

* Department of Nursing, Wonju College of Medicine, Yonsei University