

THEORY-BASED INTERVENTION

Beliefs about the likely impact of the behavior (Attitude)

At workshop (After T1)

Education and discussion of the value and importance of daily pain estimates and cancer pain treatment. A group reflection was conducted concerning attitudes towards pain management.

Case studies involved both negative and positive attitudes regarding pain management and was discussed in the workshop.

Beliefs about the normative expectations (Subjective Norm)

At T1

The Director of the surgical department declared full support for the intervention.

At T1, T2 and T3

The ward sister declared support for the intervention at each measure point.

At workshop (After T1 to T3)

The workshop emphasized desired behavior among RNs. Guidelines about daily pain estimates and treatment was introduced.

Beliefs about the factors that help or hinder behavior (Perceived Behavioral Control)

At workshop (After T1)

Learning activities targeted specific cases concerning surgical cancer familiar to the RNs context and experiences. VAS scales, guidelines about pain treatment and pain analysis was handed out in a pocket size format to all RNs

Clinical context (After T1 to T3)

Daily systematic pain assessment was introduced for all patients with cancer-related pain.

INTENTION

If the combined components of the three elements in the intervention are generally positive the RNs will have an intention to perform the *desired behavior*