

EXPLORE THE EMOTIONAL SELF-EFFICACY IN NURSING STUDENTS AT PRIVATE NURSING COLLEGE KARACHI

Javed Iqbal ^{1*}, Marayam Ali Khalaf Al Tamimi ², Amir Sultan ³,
Adanan Yousef ⁴, Afsha Bibi ⁵, Ashfaq Ahmad ⁶,
Dr. Gautam Laxmikant Sharma MD ⁷,
Fazal Khaliq ⁸, Dr. Maliha B.Thapur ⁹, Nasir Ali ¹⁰,
Dr. Adnan Yousef ¹¹ and Nafeesa Zafar ¹²

¹ Nursing Management Department Communicable Disease Center-
Hamad Medical Corporation Doha Qatar & PhD Scholar University of Malaya.

*Corresponding Author Email: jiqbal3@hamad.qa, ORCID ID: 0000-0003-2627-685X

² Director of Nursing-Home Health Care Service, Hamad Medical Corporation Doha Qatar.

³ Assistant Professor / Principal, Tasleem College of Nursing and
Health Sciences, Swat, Pakistan.

⁴ Final Year MBBS Student, United Medical College Karachi.

^{5, 6, 8} MSN Scholar at Ziauddin University Faculty of Nursing And Midwifery.

⁷ Improvement Advisor And Program Manager HHQI- Hamad Medical Corporation Doha Qatar.

⁹ Consultant Division of Infectious Disease/Medicine CDC- Hamad Medical Corporation Doha Qatar.

¹⁰ Monitoring And Evaluation Specialist.

¹¹ United Medical College Karachi Pakistan.

¹² Master of Science in Public Health.

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Abstract

Background: Emotional self-efficacy refers to an individual's belief in managing and regulating emotions effectively. **Objective:** To explore the emotional self-efficacy in nursing students at a private nursing college in Karachi. **Methodology:** This cross-sectional study was conducted at a private nursing college in Karachi, Pakistan; students were examined using a convenience sampling technique. The emotional self-efficacy of 50 nursing students was explored using the Emotional Self-Efficacy Scale (ESES). **Result:** The study findings show that, notably, 8.3% lacked confidence in recognizing their emotions, while 30% were only "A Little Confident" in cheering others up. In contrast, 38.3% felt "Very Confident" in restoring their happiness. 53.3% were "Very Confident" in recognizing their happiness, but only 18.3% felt confident in understanding others' emotions through body language. Furthermore, 46.7% were "Very Confident" in sports motivation, while just 13.3% felt "Quite Confident" in understanding the causes behind their emotions. **Conclusion:** Nursing students have a broad range of emotional self-efficacy. They possess high self-awareness, but they also struggle to understand the feelings of others, particularly in intricate settings. Focused treatments are required to improve their interpersonal and empathetic abilities, essential for their advancement as competent healthcare providers.

INTRODUCTION

Emotional self-efficacy or ESE are beliefs about one's ability to function emotionally. Examines the significance of self-efficacy in handling emotional situations from a developmental perspective. Emotional self-efficacy should enable one to use one's capability to control the intensity, frequency, and length of unpleasant dynamic events. They can accomplish this because they think they can do it well, which keeps them from being overcome by bad feelings (1).

Moreover, it is a hierarchical process that enables people to identify, comprehend, and characterize emotions. It also helps people regulate their thoughts and feelings. It is also called a perceived familiarized capacity to compact with the negative effect (2). Individuals who think they have some influence over their emotional intelligence are

better at controlling their emotions than those who believe they have no effective control over this (3). Furthermore, it measures a person's ability to manage or change his emotional life. The organization of unpleasant feelings and the expression of happy ones is perceived as one of the regulatory variables of emotional self-efficacy (4).

Graduate students in China exhibit varying levels of regulation and emotional self-efficacy depending on their gender (5). Many contend that characteristic emotional intelligence is more appropriately labeled emotional self-efficacy (ESE) (6, 7). Nonetheless, Kirk et al. (2008) argue that trait EI should not be interpreted as being associated with ESE because it includes other facets of self-perception and dispositions. They created a metric that only examined self-efficacy concerning emotional functioning as defined by the ability E's four-branch model (8). Since ESE is still a relatively new idea, few empirical studies show it as a reliable indicator of significant outcomes.

Nonetheless, a recent study discovered that ESE predicted employability in a graduating population, indicating that it might be crucial in determining graduates' perceptions of their capacity to select, acquire, and hold fulfilling careers (9). Limited research has been done in this emerging area of study. Still, recent studies have revealed that ESE predicts boys' academic success and helps school-age children and university students handle the detrimental impacts of anxiety regarding mathematics tests(10-12). The possibility exists that ESE has a significant role in outcomes relating to the workplace, namely in graduate employability, but this has not been studied yet. Verifying the relationship between ESE and graduate employability is crucial as it suggests that ESE may have a role in employability, which indicates improved health and well-being (13). Additionally, some data suggests that instructional interventions can improve college students' ESE and EI (14).

Education for nurses is demanding and frequently stressful. Students who possess emotional self-efficacy are better able to handle academic obligations, control their stress, and preserve their mental health. Building emotional self-efficacy helps students become resilient, overcome setbacks, grow from errors, and continue their education (15). With high emotional self-efficacy, nurses can relate to patients' suffering and anxieties, improving the standard of treatment and patient satisfaction (16). Furthermore, emotional self-efficacy contributes to a positive learning environment (17). When students feel emotionally competent, they are more likely to engage in class discussions, collaborate with peers, and seek help when needed.

Emotional self-efficacy is essential in nursing education because it affects students' health, educational experience, and relationships with patients and teachers. Nursing programs can better equip students to deliver compassionate, high-quality care by fostering emotional intelligence, eventually improving patient outcomes and the healthcare system. Therefore, this study aims to explore emotional self-efficacy among nursing students. Higher emotional self-efficacy nursing students are probably going to give better patient care. Knowing what influences emotional self-efficacy can help develop interventions that enhance relationships between patients and providers, improving results and patient satisfaction.

METHODOLOGY

This cross-sectional study was conducted at a private nursing college in Karachi, Pakistan; students were examined using a convenience sampling technique. The emotional self-efficacy of 50 nursing students was explored using the Emotional Self-Efficacy Scale (ESES) developed by Kirk et al. (2008) (8). This scale comprises 27 items, with eight items representing each of the four branches of the Mayer et al. (2004) (18) model. Participants rated their confidence in performing specific functions on a 5-point scale ranging from '1' (indicating 'not at all confident') to '5' (meaning 'very confident'). Previous research by Kirk et al. (2008) (8, 19) demonstrated the scale's reliability with good internal consistency ($\alpha = 0.96$) and 2-week test-retest reliability ($r = 0.85$, $p < .0001$). The tool's reliability was assessed on a subset comprising 10% of the total sample size, and a satisfactory reliability coefficient of 0.74 was obtained. Sample containing 50 nursing students selected based on specific inclusion and exclusion criteria. Inclusion criteria have encompassed students currently enrolled in the nursing program.

In contrast, exclusion criteria have excluded students with a history of psychiatric disorders or those unwilling to participate in the study. Data collection was facilitated through an online Google Form, ensuring convenience for participants. Ethical considerations, such as informed consent, confidentiality, and data protection, were paramount and adhered to throughout the study. The collected data were then analyzed using IBM SPSS Statistics version 26, employing descriptive statistical techniques such as frequency and percentage. These analyses aimed to provide insights into the emotional self-efficacy levels of nursing students, shedding light on their confidence in various emotional functions.

RESULT

Table 1: Demographic information of the participants n=60

Variables	Frequency	Percent
Age		
19-24	56	93.3
25-30	4	6.7
Gender		
Male	59	98.3
Female	1	1.7
Study year		
Year 1	5	8.3
Year 2	19	31.7
Year 3	17	28.3
Year 4	19	31.7

Three variables—"Age," "Gender," and "Study Year"—among the participants are briefly summarised in the table. The age distribution of the participants showed that a minor percentage (6.7%) were between the ages of 25 and 30, while the bulk (93.3%) were in the 19–24 age range. Regarding gender, 98.3% of the participants were men, and the proportion of females in the sample was relatively tiny (1.7%). The participants were spread evenly over the four research years, with 8.3% in Year 1, 31.7% in Year 2, 28.3% in Year 3, and an additional 31.7% in Year 4.

Table 2: Emotional Self-Efficacy in Nursing Students

Statements	Not At All Confident	A Little Confident	Moderately Confident	Quite Confident	Very Confident
I can tell when I feel unhappy or angry.	8.3	13.3	36.7	20.0	21.7
I know how to cheer someone up when they feel unhappy	1.7	30.0	30.0	13.3	25.0
When I feel unhappy, I know how to make myself happy again	8.3	13.3	25.0	15.0	38.3
I can tell what makes me feel good	11.7	13.3	11.7	18.3	45.0
I know how to use good feelings to be creative in solving problems.	11.7	8.3	23.3	13.3	43.3
I know what makes other people feel happy	6.7	11.7	36.7	11.7	33.3
I know how to make myself feel better when in a bad mood.	10.0	25.0	8.3	15.0	41.7
I can tell when I am feeling happy	1.7	1.7	13.3	30.0	53.3
When I feel unhappy, I can tell what has caused it.	21.7	23.3	16.7	20.0	18.3
I know how to control my feelings when I am stressed.	8.3	16.7	25.0	8.3	41.7
I can tell when someone is feeling a pleasant emotion	1.7	5.0	33.3	25.0	35.0
If needed, I know how to change my mood to match the occasion, e.g., make myself feel happy or sad	1.7	10.0	35.0	25.0	28.3
I can tell what makes other people feel unhappy	31.7	10.0	16.7	25.0	16.7
I can tell what I feel from the way my body behaves.	16.7	23.3	21.7	11.7	26.7
I know how to use a good mood to come up with new ideas	5.0	6.7	36.7	18.3	33.3
I can tell why my feelings change	11.7	21.7	26.7	18.3	21.7
I can calm myself down when feeling angry.	21.7	11.7	18.3	23.3	25.0
I can tell what other people feel from the way their body changes	18.3	15.0	26.7	21.7	18.3
I know how to make myself feel calm and focused when needed at school	0	13.3	36.7	25.0	25.0
I can tell why other people's feelings change.	28.3	18.3	26.7	13.3	13.3
I know how to help another person calm down when they are feeling angry	10.0	23.3	20.0	20.0	26.7

I can tell what feelings I show on my face.	1.7	3.3	26.7	36.7	31.7
I can make myself feel full of energy and motivated to do well in sports	3.3	1.7	26.7	21.7	46.7
I can tell what makes me feel different emotions.	18.3	10.0	13.3	31.7	26.7
I can get in the right mood to develop many new ideas.	11.7	1.7	33.3	30.0	23.3
I can figure out what made someone feel the way they think.	1.7	16.7	38.3	16.7	26.7
I can help someone think positively when their pet has gone missing or cheer them up when they have lost someone.	21.7	8.3	28.3	18.3	23.3

Table 2 provides a detailed insight into the emotional self-efficacy of nursing students across a spectrum of statements. For instance, 8.3% of students were "Not at All Confident" in recognizing their emotions, while 13.3% felt only "A Little Confident." When cheering someone up when they felt unhappy, 30% of students were "A Little Confident," and another 30% were "Moderately Confident." Interestingly, 38.3% were "Very Confident" in making themselves happy again when feeling unhappy. Understanding what makes them feel good seemed easier for 45% of the students who felt "Very Confident" in this aspect. 43.3% of students felt "Quite Confident" in using good feelings to be creative in problem-solving.

However, 31.7% felt "Not At All Confident" in identifying what makes others unhappy. On a positive note, 53.3% were "Very Confident" in recognizing when they felt happy, showcasing a strong emotional self-awareness. Students' ability to manage their emotions under stress varied; 41.7% were "Quite Confident," whereas 25% were only "Moderately Confident."

Regarding understanding the reasons behind their emotional fluctuations, 26.7% felt "Moderately Confident," and 21.7% were "Quite Confident." 25% felt "Quite Confident" about calming oneself down in moments of anger, while 23.3% were "Moderately Confident." Understanding other people's emotions through body language was challenging, with only 18.3% feeling "Quite Confident" in this area.

Interestingly, 36.7% of students were "Quite Confident" in calming themselves and staying focused in school. Understanding why others' emotions change proved challenging, with 28.3% feeling only "Moderately Confident." Helping others manage their anger was an area where 26.7% felt "Quite Confident." Recognizing their facial expressions was easier for 31.7%, who were "Quite Confident" in this skill. Notably, 46.7% felt "Very Confident" in getting motivated for sports. Understanding the causes behind their emotions was challenging, with only 13.3% feeling "Quite Confident." Generating new ideas was a strength, with 33.3% feeling "Quite Confident" and 30% feeling "Very Confident." Understanding what caused someone else's feelings was difficult, with only 38.3% feeling "Quite Confident." Lastly, 28.3% were "Quite Confident" in helping others think positively during emotional distress.

Table 3: Association of Demographic Variables with Emotional Self-efficacy Score

Variables	Mean	N	Std. Deviation	p-value
Age				
19-24	91.8036	56	17.52133	0.024
25-30	112.7500	4	15.32699	
Study year				
Year 1	85.2000	5	14.32480	0.649
Year 2	96.1053	19	17.81352	
Year 3	91.3529	17	15.26410	
Year 4	94.0526	19	21.62168	

The table shows mean scores for emotional self-efficacy in different age groups and study years among nursing students. Age significantly influences self-efficacy ($p = 0.024$), with 19-24-year-olds scoring 91.80, compared to 112.75 for the 25-30 age group. Study year differences were insignificant ($p = 0.649$), indicating consistent self-efficacy across the academic years.

DISCUSSION

Emotional self-efficacy is crucial in the medical field, particularly in nursing, where compassionate and skillful communication can significantly impact patient outcomes and satisfaction (20). As aspiring healthcare professionals, nursing students must have high emotional self-efficacy to handle the various challenging and frequently emotional situations they face in the workplace (16). Current findings revealed that 8.3% of students were "Not at All Confident" in recognizing their own emotions. In this regard, another study demonstrates that the ability to deal with, comprehend, and experience one's own emotions as well as those of others, as well as the capacity to react and behave appropriately in both intrapersonal and interpersonal contexts, stress management, flexibility, and overall mood, are all indicators of emotional intelligence. Emotional intelligence, specifically concerning nursing professionals, has been shown to prevent burnout, predict commitment to the job, and be associated with job satisfaction, well-being, problem-solving skills, and perceived competence (16, 21, 22).

Present findings show that 23% are pretty confident to down when angry. Another study shows that the feeling of self-efficacy significantly impacted the stress level of nursing students and the way they coped with more complex situations (23).

Current findings show that 43.3% of students felt "Quite Confident" in using good feelings to be creative in problem-solving. The ability to solve problems is the capacity of a nursing care provider to intervene on behalf of a patient in a timely and accurate manner, regardless of whether it is the nurse's first patient. This is because solving problems is fundamental for identifying and resolving patients' health issues in a complicated nursing environment and can enhance an individual's critical and creative thinking. Furthermore, it has been noted that the capacity for problem-solving influences nursing performance (21, 22). Moreover, Problem-solving abilities assess an individual's capacity for constructive interaction (23).

Current findings show that 41% are confident in controlling feelings when stressed. Focus and attentiveness can both be enhanced by effective stress management. Nursing students can improve their study habits, academic performance, and comprehension of the course material by learning how to manage stress (24).

CONCLUSION

In summary, the emotional self-efficacy of nursing students appears to be a multifaceted and nuanced aspect of their development. While a significant portion of students demonstrated confidence in recognizing and managing their own emotions, challenges emerged in understanding and responding to the feelings of others, particularly in complex situations. The findings highlight the need for targeted interventions and support systems that enhance students' empathy, emotional intelligence, and interpersonal skills. Strengthening these areas could contribute significantly to their overall emotional well-being and effectiveness as future healthcare professionals.

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