

Preliminary Analysis: Nursing Turnover Rates, Nursing Students, Self-Efficacy, Continuous Self-Improvement, and Coping Skills

Dale Hilty, PhD

Background

Halter and colleagues (2017) reviewed primary research articles using the Nursing Turnover Cost Calculation Methodology and found the turnover rate was 27% (Duffield et al, 2014) in the United States. Halter and colleagues (2017) summarized Li and Jones' (2013, p.) findings: "This review was based on ten studies, eight of which were in acute hospital settings, all conducted in the USA, with one also in each of Australasia and Canada. The review reported costs of per nurse turnover ranging from \$10,098 to \$88,000"

Dimitriadou, Koukourikos, and Pizirtzidou (2014, p. 9) reviewed the self-esteem literature in relation to nursing education and the practice of the nursing profession.

The high esteem of the nurse involves the use of the real self, the ability of empathy, ability to cooperate and healthy interpersonal relationships with patients and colleagues (Randle, 2003b). The self-esteem affects the relationship between job roles and job satisfaction as well as the link between work performance and work roles conflict (Papanis, 2004). Moore et al., (1997) determined that there is a positive correlation between self-esteem and social intimacy and job satisfaction. In addition, other researchers linking the high esteem with better handling of stress, since it seems to act as a barrier to the negative effects of stress and reduces anxiety (Greenberg et al., 1992, Boey, 1998). In the Boey's (1998) study nurses with low self-esteem, are fatigued from stress and physical problems and symptoms of neurosis versus nurses with high self-esteem that are resistant to stress and enjoyed a good state of physical and mental health ... Research results suggest that although the majority of students begin their education with self-esteem to normal levels when completing the level of self-esteem corresponds to lower average (Randle 2003a). The students experience was often negative and had an impact on how they feel about themselves not only as nursing students as well as individuals, because they undermined their self-esteem in their education through intimidation (Randle, 2003b). The bullying is persistent, the humiliation and the abasement of human malignant through words and cruel actions gradually undermine the confidence, the sense of competence and self-esteem (Adams, 1997, Missouridou, 2011).

Sturm and Dellert (2015) investigated the association among self-esteem, personal dignity, and nurses' work satisfaction. The correlation coefficient between self-esteem and personal dignity was .62 ($p=.000$; Spearman Rho Correlation) and self-esteem and nurses' work satisfaction was .29 ($p=.001$). The relationship between self-esteem and the work-educational environments (Dimitriadou et al., 2014; Sturm & Dellert, 2015) influenced the inquiry to explore whether continuous self-improvement would increase self-efficacy (i.e., overcoming obstacles) which would raise low self-esteem and decrease nursing turnover rates.

Aim

The purpose of this educational intervention was to determine whether high and moderate-low scores on self-efficacy differentiated coping skills with a sample of nursing students. Instrumentation: Self-Efficacy (Schwarzer & Jerusalem, 1995), Wooden's Competitive Greatness (Hilty, 2017) construct (i.e., being the best you can be when your best is needed, continuous self-improvement, appreciating difficult challenges), and Greenglass' et al. (1999) proactive coping, reflective coping, and strategic planning. If nursing students reported different levels of continuous self-improvement and coping skills in relation to self-efficacy, it may be possible to track these students following graduation to determine the relationship between turnover rates and these research constructs.

Methods

A sample of Bachelor of Science in Nursing (BSN) traditional students were divided into two groups using the self-efficacy scales.

Hypothesis 1: There would be a difference between self-efficacy (high and moderate-low scoring groups) when compared to the Proactive Coping, Reflective Coping, Strategic Planning scales (SPSS 25, Independent *t*-test).

Hypothesis 2: A difference would be found using self-efficacy as the dependent variable and competitive greatness (i.e., continuous self-improvement) as the predictor variable (SPSS 25, linear regression).

Hypothesis 3: Determine if the reliability estimates would be greater than .80 for engagement common factors for the Self-Efficacy, Proactive Coping, Reflective Coping, and Strategic Planning scales (SPSS 25, Coefficient Alpha).

Findings

Hypothesis 1: The Self-efficacy scale was used to divide the nursing student sample into two groups. The high scoring self-efficacy group ($N=28$) and the moderate-low scoring group ($N=33$) had essentially the same numbers of students. Independent *t*-test ($N=61$) analyses found significant differences between Proactive Coping ($p=.001$), Reflective Coping ($p=.001$), and Strategic Planning ($p=.001$) scales.

Hypothesis 2: The linear regression analysis confirmed the hypothesis 2 prediction and produced a correlation between self-efficacy and competitive greatness of .515 (r square = .265) which is significant ($F(1, 59)=21.307$, $p=.001$). Higher levels of self-efficacy are associated with higher levels of continuous self-improvement.

Hypothesis 3: The coefficient alpha reliability estimates were greater than .80 (Self-Efficacy, .957; Proactive Coping, .816; Reflective Coping, .909; Strategic Planning, .866).

Discussion

The statistical analysis of the students scoring high and moderate-low on the self efficacy scale found significant findings on the proactive coping, reflective coping, and strategic planning scales. Students with higher self-efficacy scores had higher scores on the proactive coping, reflective coping, and strategic planning scales.

Conclusions

Regarding hypothesis 1, a future investigation could be designed to determine if students scoring moderate-low on the self-efficacy scale would benefit from an intervention designed to improve their competitive greatness (continuous self-improvement) skills. Next it would be interesting to explore whether the self-efficacy and self-esteem levels (i.e., students with low scores on efficacy and esteem) would increase to the high scoring levels based on the continuous self-improvement intervention. Last, if student levels of self-efficacy and self-esteem increased as a result of the intervention, it may have a positive influence on RNs with lower self-esteem considering the likelihood of leaving (i.e., turnover) the nursing profession.

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