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Preliminary Investigation of Coping Styles, Continuous Self-Improvement, & Self Efficacy: Impact on BSN Students

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Background

Competitive Greatness

John R. Wooden's father shared two principles which were a major influence for his life: (1) "Don't try to be better than someone else, and (2) Always try to be the best you can be" (Wooden & Carty, 2005, p. 17). The first principle was a reminder that a successful life does not find peace of mind by comparing one's self to others. There is an interconnection between the second principle and Wooden's competitive greatness construct (CG). The definition of CG: "Be at your best when your best is needed. Enjoyment of a difficult challenge" (Wooden & Carty, 2005, p. 90).

Competitive greatness is linked to continuous self-improvement. By making the focus of life primarily on individual growth and development, there are endless opportunities to expand our skills and abilities. In Wooden's words: "We don't have be superstars or win championships to reach competitive greatness. All we have to do is learn to rise to every occasion, give your best effort and make those around us better as we do it. It's not about winning. It's about learning to give all we have to give" (Wooden & Carty, 2005, p. 91).

Continuous Self-Improvement (CSI)

In the academic environment, Wooden's competitive greatness can be linked to Continuous Self-Improvement (CSI). By focusing on individual growth and development, there are endless opportunities to expand our skills and abilities. CSI nursing students function at an exceptional level of engagement and deeper learning processing of material from textbook readings and lecture presentations. Using an intrinsic reward system, they internalize content and concepts and continuously apply them in new, unique ways. These students appear to feel the satisfaction and receive the validation they are going to be excellent nurses. Not only do they understand the scientific and theoretical aspects of nursing, but they also demonstrate the art and caring nature of an excellent and compassionate nurse.

Self-Efficacy

Researchers have used self-efficacy to investigate online learning, physical therapist, diabetes type 2, work engagement, teacher education, exercise behavior, chemotherapy treatment, Alzheimer disease, counseling, clinical reasoning, and online shopping (Bradley et al., 2017; Costello et al., 2017; Lalnuntluangi, et al., 2017; Lisbona et al., 2018; Malinauskas et al., 2018; Middelkamp et al., 2017; Papadopoulou et al. 2016; Salamizadeh, et al., 2017; Ümmet, 2017; Venskus & Craig, 2017; & Yahong et al., 2018).

Coping

The definitions for the Greenglass (1999) coping scales are: Proactive Coping Scale ... autonomous goal setting with self-regulatory goal attainment cognitions and behavior ... Reflective Coping Scale ... describes simulation and contemplation about a variety of possible behavioral alternatives by comparing their imagined effectiveness and includes brainstorming, analyzing problems and resources, and generating hypothetical plans of action ... Strategic Planning ... focuses on the process of generating a goal- oriented schedule of action in which extensive tasks are broken down into manageable components ... Emotional Support Seeking ... is aimed at regulating temporary emotional distress by disclosing to others feelings, evoking empathy and seeking companionship from one's social network.

Methods

BSN (N=68) traditional students were divided into two groups using the CG/CSI scale (i.e., high versus moderate-low). The purpose of this educational intervention study was to explore the relationship among CG/CSI (Hilty, 2017) construct (i.e., being the best you can be when your best is needed, continuous self-improvement, appreciating difficult challenges), Self-Efficacy (Schwarzer & Jerusaslem, 1995), and Greenglass' et al. (1999) Proactive Coping, Reflective Coping, Strategic Planning, Emotional Support Seeking scales. Since 43% of new RNs leave their first job within three years (Goodman, 2016), exploring these variables may provide insight into turnover rates.

Hypothesis 1: There would be a difference between CG/CSI (high versus moderate to low) scoring groups when compared using the SPSS independent ttest on the following scales: Self-Efficacy, Proactive Coping, Reflective Coping, Strategic Planning, Emotional Support Seeking scales. This hypothesis predicts that moderate to low scoring CG/CSI (or non-CG/CSI) students will have higher scores on the Greenlass scales (Proactive Coping, Reflective Coping, Strategic Planning, Emotional Support Seeking) and lower scores on Self-Efficacy.

Hypothesis 2: There would be a coefficient alpha reliability estimates greater than .80.

Hypothesis 3: Using multiple regression with CG/CSI as the dependent variable and Self-Efficacy and the four coping scales as predictor variables, the outcome will be significantly different from zero.

Results

Hypothesis 1: Using SPSS 25 independent t-test, the moderate to low scoring CG/CSI students reported statistically significant higher scores on the Proactive Coping (p=.001), Reflective Coping (p=.008), Strategic Planning (p=.004), Emotional Support Seeking (p=.028) compared to the high scoring CG/CSI students. CG/CSI high scoring students had high levels of Self-Efficacy (p=.002). Null hypothesis rejected.

Hypothesis 2: Using SPSS 25 coefficient alpha feature, the reliability estimates were Self-Efficacy (.957), Proactive Coping (.816), Reflective Coping (.909), Strategic Planning (.866), and Emotional Support Seeking (.854). Null hypothesis rejected.

Hypothesis 3: Using SPSS 25, the overall regression was significant (F(5,55) =9.141, R=.674, R-squared = .454, p=.001). Null hypothesis rejected.

Discussion

CG/CSI high scoring students use significantly lower levels of their resources coping compared to CG/CSI moderate to low scoring students (i.e., non-CSI). This finding suggests that non-CSI students deplete their resources more quickly which places them a significant disadvantage. Such a finding may influence first job turnover rates.



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