



Character Strengths and their Influencing Factors among Nursing Students in Changsha, China: The Only-Child versus Non-Only-Child



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ABSTRACT

The purpose of this study was to explore the differences of character strengths and their predictors between only-child and non-only-child nursing students. Using data from 742 participants, linear regression was conducted. Results indicate that there was no significant differences between the two groups concerning anxiety, depression and general self-efficacy ($P > 0.05$). The character strengths status of only-child was better than that of non-only-child ($P < 0.05$) and the predictors of character strengths between the two groups had some differences. This study has suggestions on how to help nursing students to improve their character strengths.

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Character strengths, which are one of positive psychology's most important components, have gained increasing attention from numerous social and behavioral scientists who have been studying various aspects and benefits of human well-being, happiness, and life satisfaction (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2004; Clare, 2012; Colby, James, & Hart, 1998). Researchers have found that character strengths are of great benefit to students' mental health and development (Seligman, Rashid, & Parks, 2006; Wang, 2010). Students with more character strengths can build confidence to make other personal changes and enhance their well-being (Biswas-Diener, 2010; Proctor, Maltby, & Linley, 2011; Seligman, Steen, Park, & Peterson, 2005). Currently, several studies (Lin & Zhou, 2012; Rashid, 2004; Zhang, Meng, & Wang, 2012) carried out around the world have focused on undergraduate students' character strengths, but they have not explored whether only-child and non-only-child students have any differences in their character strengths. Therefore, the present study aimed to illustrate the difference in character strengths status and their predictors for only-child and non-only-child nursing students in China.

LITERATURE REVIEW

In China, many families nowadays tend to have only one child, especially since the 1980s when Chinese family planning policy was carried out in 1979 (Yang & Guo, 2000). A literature search of epidemiological studies indicated that the percentage of only children is increasing, though non-only children still account for a large proportion (Guo, 2001). In 2007, China had approximately 100 million only-child children (Yang & Wang, 2007) and this number is greatly increasing currently. With more and more only-child children entering college, only-child undergraduates have become an important part of various

types of universities and the proportion of them in nursing profession is also expanding dramatically (Liu, Bi, Zhang, & Zhou, 2002). Over one hundred Chinese nursing schools and thousands of Chinese hospitals recruited and retained numerous only-child students in these years. Under these conditions, whether only-child students can live a normal and healthy life and maintain good physical and mental health has become a serious topic, which has attracted great attention and curiosity of nursing educators and psychiatric nurses.

Character strengths, as a concept, can be considered as a collection of well-developed positive traits that are essential for living a healthy and satisfying psychological life (Park & Peterson, 2009). In 2004, Peterson and Seligman developed the Values in Action (VIA) to classify human strengths. They conceptualized these positive characteristics as "character strengths" and suggested that character strengths are psychological ingredients that define character virtues. Character strengths can be understood as a collective entity that shares key defining characteristics but cannot be treated as unrelated individual difference variables (Linley et al., 2007).

Numerous reports indicated that students' mental health is associated with society, school, family and individual factors (Al Gelban, 2009; Amarasuriya, Jorm, & Reavley, 2015; Delara & Woodgate, 2014). Character strengths, as one of individual factors, can arise naturally, feel authentic and increase the probability of health outcomes (Ingrid & Todd, 2010). Several studies demonstrate that character strengths recognition and use can produce some benefits to humans' mental health and youth development (Catalano et al., 2004; Gander, Proyer, & Ruch, 2012; Weber & Ruch, 2012). Seligman et al. (2006) created positive psychotherapy in 2005 and then used it to make undergraduates clear about their character strengths, then directed them to use their strengths in a new way each day of a week. The undergraduates were much happier and less depressed than the control group after the intervention and the results even demonstrated great differences one year later. Rashid (2004) implemented an intervention with an emphasis on exploring and enhancing strengths of undergraduates, and found

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that the health, spirituality, volunteerism and life satisfaction of the intervention group were better than the control group. As noted by Park, 2004, character strengths serve as protective factors, enabling youth to achieve their full potential (Park, 2004), and serve as underpinnings for effective therapeutic interventions (Cardemil, Reivich, & Seligman, 2002; Yu & Seligman, 2002). Several studies (Chen, 2011; Chen & Mu, 2012; Cosentino & Solano, 2012; Rust, Diessne, & Reade, 2009) have been carried out recently to explore the character strengths status of students. However, little is known about the nursing students' character strengths. Due to numerous values within character strengths, it is necessary to investigate the character strengths status of nursing students, especially of the greatly increasing only-child group.

Various studies reported that there was close relationship between character strengths and other variables of interest. For instance, Cardemil et al. (2002) and Yu and Seligman (2002) reported that optimism had been found to be associated with better adjustment and fewer depressive and anxious symptoms. Seligman et al. (2006) found that character strengths, particularly hope, gratitude and confidence, were associated with people's depression. In addition, self-efficacy had a strong relationship with optimism and happiness (Liu, 2010; Posadzki, Stockl, Musonda, & Tsouroufli, 2010; Zhang, 2012). Furthermore, individual factors (such as age, gender, grade, profession) also have influences on character strengths (Cosentino & Solano, 2012; Linley, Joseph, Harrington, & Wood, 2006; Zhang et al., 2012). In previous studies, a variety of variables had been tested to predict character strengths. However, through comments and literature review, the authors found that character strengths' predictors among nursing students, especially among only-child nursing students in China, are unknown. There is clearly a need for further studies to investigate character strengths' predictors within this population.

With the number of only-child students increasing, in the future, many clinical nurses will be in the only-child category. Their psychological status will exert a direct influence on their studies and daily life, and even the quality of their future clinical work and the stability of the nursing team. Therefore, our study aimed to investigate the character strengths status and predictors for only-child students and compare these variables with non-only-child students, to better understand whether the character strengths status of only-child students is better/worse than that of non-only-child students, then find reasons for the differences and put forth some suggestions to enhance their character strengths.

METHODS

Design

This descriptive study was performed using a cross-sectional research design. The survey was conducted from November 2011 to April 2012. A stratified random sampling method was used to select study subjects. Two vocational colleges and three universities were selected from Changsha city in mainland China, including nursing students of these two educational levels. Students were eligible for this study if they met the following criteria: (a) full-time nursing students; (b) no diagnosis of mental illness; (c) Chinese speaker; (d) mentally competent to answer questions. Those were excluded if they had a confirmed diagnosis of mental illness, and had been involved in other mental health programs.

A total of 780 nursing students were recruited as the study subjects. This study was performed by trained investigators who were not the lecturers or tutors of these students. Among the 780 nursing students, 742 completed the survey for a response rate of 95.12%.

Ethical Considerations

This study was approved by the Human Subjects Research Review Committee of Xiangya Nursing School, Central South University.

Written informed consent was obtained from each subject. The objectives and procedures were explained to the subjects before distributing the questionnaires. They were assured that participation in this study was voluntary and withdrawing from this study would not have any impact on their studies or life. Anonymity of the subjects was maintained by removing all their names. All the data was locked and only accessed only by the researchers.

Measures

Nursing students were asked to complete a demographic questionnaire, the Character Strengths Scale of Chinese Undergraduates, the Self-Rating Anxiety Scale (SAS) and the Self-Rating Depression Scale (SDS) and the general self-efficacy scale.

The *Character Strengths Scale of Chinese Undergraduates* consisting of 62 questions was used to assess character strengths (Meng & Guan, 2009). It is a measurement suited for Chinese university students. When nursing students were surveyed, a five-point scale was used for each question, ranging from 1 to 5 (1 = very like me, 2 = more like me, 3 = neutral, 4 = unlike me, 5 = very unlike me). Factor analysis of the 62 questions of character strengths yielded six virtues and twenty character strengths. Each virtue contains several qualities. The higher the score of each dimension, the better the level of character strengths. The Cronbach's α was found to be 0.652–0.922 (Meng & Guan, 2009).

The *Self-Rating Anxiety Scale* (SAS, Zung, 1971) and the *Self-Rating Depression Scale* (SDS, Zung, 1965) were used to subjectively evaluate nursing students' anxiety and depression. Each of these self-report questionnaires contains 20 items. The items are coded from 1 to 4, so the scores range from 20 to 80; higher scores indicate higher levels of anxiety or depression. The raw scores of the SAS and SDS were converted into index scores ranging from 0.25 to 1, depending on a four-level classification of psychological conditions. An SAS or SDS index of 0.5 or below was categorized as Level 1 and considered as normal, an SAS or SDS index between 0.5 and 0.59 was categorized as level 2 and considered as mild depression or anxiety, an SAS or SDS index between 0.60 and 0.69 was categorized as level 3 and considered as moderate to marked anxiety and depression, and an SAS or SDS index of 0.7 or higher was categorized as level 4 and considered as severe or extreme major anxiety or depression. The Cronbach's α of each scale is: SAS: 0.72, SDS: 0.73.

Self-efficacy was evaluated by the *general self-efficacy scale* which was originally devised by German psychologist Schwarzer and colleagues in 1981; it has been shown to give a good representation of self-efficacy in a variety of settings (Schwarzer, Mueller, & Greenglass, 1999; Yang, Shi, & Xu, 2004). The scale is a single-dimension scale with 10 questions. Each question is assigned points from 1 to 4, and the final score is the average score of the 10 questions. The Chinese version, translated by Chinese scholars, has been proven to have good validity and reliability (Wang, Hu, & Liu, 2001); the Cronbach's α is 0.87 (Zhu & Chen, 2006).

Statistical Analysis

SPSS 17.0 (SPSS Inc., Chicago, IL, USA) was used for data analysis. Means, standard deviations and percentages were adopted to describe data. Chi-square analysis was applied to compare the gender and educational level between the two groups. T-test analysis was performed to compare age, character strengths, anxiety, depression and general self-efficacy across the two groups. To examine the unique contributions of anxiety, depression, general self-efficacy and individual factors to character strengths, we performed a multiple linear regression analysis. All tests were 2-tailed, and the significance was set at 0.05.

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