



## Effects of rational emotive behavior therapy for senior nursing students on coping strategies and self-efficacy



Myung Ah Kim <sup>a,1</sup>, Jiyoung Kim <sup>b,2</sup>, Eun Jung Kim <sup>c,\*</sup>

<sup>a</sup> Department of Nursing, College of Nursing, CHA University, Bundang CHA Medical Center, Yatap-dong, Bundang-gu, Seongnam, Gyeonggi-do, 463-712, Korea

<sup>b</sup> College of Nursing, Chonbuk National University, 567 Baekje-daero, Deokjin-gu, Jeonju, Jeollabuk-do, 561-756, Korea

<sup>c</sup> Division of Nursing, College of Medicine, Hallym University, 1 Hallymdaehak-gil, Chuncheon, Gangwon-do, 200-702, Korea

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### SUMMARY

**Background:** Senior nursing students are faced with various types of stressful events such as taking the national licensure exam or finding employment. Such stress can generate maladaptive behaviors as well as physical and psychological symptoms. There is evidence supporting the use of rational emotive behavior therapy (REBT) for reducing disruptive behaviors and negative emotions as well as improving self-efficacy and stress-coping strategies.

**Objectives:** The purpose of this study is to examine the effects of rational emotive behavior therapy (REBT) on stress coping strategies and self-efficacy for senior nursing students.

**Methods:** Thirty-four senior nursing students in a nursing college were assigned randomly to an experimental group ( $n = 18$ ) and a control group ( $n = 16$ ). The REBT program consisted of 8 sessions, and it was implemented for a 4-week period. Outcome measures assessed stress-coping strategies and self-efficacy before and after intervention.

**Results:** After intervention with REBT, the mean difference scores for self-efficacy ( $p = .032$ ) were significantly higher in the experimental group than in the control group. However, the mean difference scores for seeking social support ( $p = .166$ ), problem solving ( $p = .126$ ), and avoidance ( $p = .154$ ) in stress-coping strategies were not significantly different between the two groups.

**Conclusion:** The results imply that group counseling based on REBT enhances the self-efficacy among senior nursing students before graduation. As regards stress coping strategies, a longer intervention period is suggested.

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### Introduction

The levels of self-esteem and stress of nursing students are different at different times throughout their education and training (Edwards et al., 2010). Edwards et al. (2010) found that stress level was higher at the beginning of the final year compared to stress level reported at any other time, and by the time the students finished their course training and completed their examinations, their stress levels went down. Among nursing students in Korea, employability is the most influential factor that affected choosing a nursing major, they want to work in a large hospital and place the highest value on it. Thus, they are in competition with their fellow students for better grade scores. Stress experienced by nursing students may result in them finding competing demands difficult to cope with. This kind of stress can generate maladaptive behaviors such as smoking, drinking, avoidance of preparation of exams, or cutting off relationships as well as physical

and psychological symptoms (Jenkins and Palmer, 2003; Sheu et al., 2002). Even after employment, they are not able to cope well with stress from their workload and relationship conflicts so there have been increases in the number of cases in which they switch jobs within one year of employment (Moon and Lee, 2010). Thus, nursing students need to cope effectively with their stress for a better college life to help them prepare for their future careers.

Rational emotive behavior therapy (REBT) is one of the cognitive-behavioral approaches to counseling and psychotherapy which was developed by Ellis. REBT is being used as treatment of choice for psychological difficulties by changing beliefs and consequent emotional response (MacInnes, 2004). In REBT, it is hypothesized that stress is largely determined not by the unpleasant events or stressors people experience in their lives, but mainly by their irrational beliefs about what is happening to them (Jenkins and Palmer, 2003).

Self-efficacy influence the amount of stress and anxiety individuals experience as they engage in a task and the level of accomplishment they realize. Most people engage in tasks in which they feel competent and confident and avoid those in which they do not (Bandura, 1994).

Senior nursing students are faced with the national licensure exam and ready to enter into society. In this study, in an attempt to enhance senior nursing students' self-efficacy and stress coping strategies,

\* Corresponding author. Tel.: +82 33 248 2725; fax: +82 33 248 2734.

E-mail addresses: [myungahk@hanmail.net](mailto:myungahk@hanmail.net) (M.A. Kim), [kimjijy@jbnu.ac.kr](mailto:kimjijy@jbnu.ac.kr) (J. Kim), [ejerkim@hallym.ac.kr](mailto:ejerkim@hallym.ac.kr) (E.J. Kim).

<sup>1</sup> Tel.: +82 31 825 8316.

<sup>2</sup> Tel.: +82 63 270 2401; fax: +82 63 270 3127.

we constructed the REBT program for senior nursing students and examined the effects of the REBT program.

## Background

Effective coping strategies are vital to nursing students for stress relief. Coping means an individual's conscious or subconscious actions to control stressful situations that are unavoidable (Lazarus and Folkman, 1984), while individual adaptation can be explained more from how they deal with stress rather than the stressful experience itself. Senior nursing students often resort to avoidance or problem solving as a coping strategy for stress, while those students with more competence in handling situations are reported to use the problem solving method to deal with stress (Chan et al., 2009). Individuals with high self-efficacy handle current situations well and decrease their level of stress as well as negative emotions (Bandura, 1994).

Perceived self-efficacy is defined as people's beliefs about their capabilities to produce designated levels of performance that exercise influence over events that affect their lives (Bandura, 1994). Self-efficacy is an important contributor to the attainment of further competencies and success in early adulthood. Higher self-efficacy was associated with problem-focused coping efforts, and lower self-efficacy was associated with greater emotion-focused coping efforts (Chwalisz et al., 1992). Lower self-efficacy is associated with stress, depression, anxiety, and helplessness, while a strong sense of self-efficacy facilitates cognitive processes and performance (Zulkosky, 2009). Park et al. (2002) studied self-efficacy, coping methods, and academic and job-seeking stress among nursing students. The findings suggest that greater self-efficacy is correlated with less academic and job-seeking stress, but that self-efficacy is not associated with coping methods.

REBT is based on the ABC model of psychological disturbance and therapy where "A" represents the activating stressful life event, that is, the external event to which the person is responding, "B" refers to irrational beliefs, and "C" refers to the emotional, behavioral, and cognitive consequences of these irrational beliefs—i.e., psychological disturbance and maladaptive behaviors. The major assumption of this model suggests that rational beliefs lead to functional consequences, while irrational beliefs lead to dysfunctional consequences (Ellis, 1993; David et al., 2005) and empirical support for this assumption has been reported in previous studies (Chang and D'Zurilla, 1996; Muran et al., 1989). The aim of REBT is to replace irrational beliefs which are rigid, inconsistent with reality and illogical with a new set of rational beliefs which are flexible and non-extreme (Dryden and David, 2008). REBT helps people learn to challenge their own irrational thinking and develop the habit of thinking in beneficial and rational ways. This shift enables people to behave more effectively and, ultimately, experience healthy emotions (Ellis, 1993). There is evidence supporting the use of REBT for reducing negative emotions such as anxiety, stress, depression, and irrationality as well as improving self-efficacy and stress-coping strategies (Baek and Yu, 2005; Calear and Christensen, 2010; Gonzalez et al., 2004). The REBT's cognitive strategy, which helps one to quickly accept oneself and solve problems, has been reported to be helpful among nursing students with low scores in decreasing anxiety and in preparing for the National Council Licensure Examination for registered nurses (Poorman et al., 2010).

Therefore, the aim of this study is to examine the effects of an REBT program for senior nursing students facing licensure exam aimed at enhancing stress-coping strategies and self-efficacy.

## Methods

### Study Design

This study employed a quasi-experimental pre- and post-test design to test the effects of REBT for senior nursing students on coping strategies and self-efficacy.

### Participants and Setting

Eligible participants were senior nursing students in a university in Gyeonggi area. All 35 students agreed to participate. Following the informed consent procedure, 35 students were randomly assigned to the experimental group ( $n = 18$ ) and the control group ( $n = 17$ ). One student in the control group dropped out of the study because of missing post-test data. As a result, there were 34 students: 18 in the experimental group and 16 in the control group.

### Ethical Considerations

Ethical approval was obtained from the Institutional Review Board of B University Hospital (BD2010-101D). Written informed consent was obtained from all participants, and they were reassured of confidentiality and anonymity.

### Instruments

#### Coping Strategy Indicator

Coping strategy was assessed utilizing a Korean version of Amirkhan's Coping Strategy Indicator (Shin and Kim, 2002). It was composed of 33 items with a 3-point Likert-type scale (1 = not at all, 2 = a little, 3 = a lot). It was divided into three types: 11 items for seeking support that is coping with stress by looking for advice or emotional support (e.g., confined your fears and worries to a friend or relative), 11 items for problem-solving that is resolving problems directly by fighting rather than running away (e.g., tried to solve the problem), and 11 items for avoidance that is reacting with a flight response rather than facing problems (e.g., avoided being with people in general). Higher scores for each type indicated a more frequent use of that type of coping strategy. The reported reliability of this scale was .84, ranging from .67 to .90 for the subscales (Shin and Kim, 2002). In this study, Cronbach's alpha coefficient was .83, ranging from .76 to .89 for the subscales.

#### Self-efficacy

Self-efficacy was measured with a modified Korean version (Kim, 2009) of the scale originally developed by Sherer and colleagues (1982). The questionnaire was composed of 24 items measuring three subscales: 7 items for self-confidence (e.g., If I can't do a job the first time, I keep trying until I can), 12 items for self-regulation (e.g., When I have something unpleasant to do, I stick to it until I finish it), and 5 items for preference of task difficulty (e.g., I am capable of dealing with most problems that come up in life). A 5-point Likert scale (1 = strongly disagree, 5 = strongly agree) was used with this instrument. The sum of the item scores reflects general self-efficacy. The higher the total score, the more self-efficacious the respondent. The reported reliability of this scale ranged from .76 to .88 for the subscales (Kim, 2009). In this study, Cronbach's alpha coefficient was .86, ranging from .62 to .70 for the subscales.

### Procedures

The purpose and procedures of the study were explained to participants and all of them gave written consent once approval had been granted to conduct the study.

The REBT program was implemented for 8 sessions in 4 weeks, twice a week for 60 min each session. The intervention was implemented by one researcher of our research team who had a doctoral degree in psychiatric nursing and had experience in REBT program for university students. The experimental group was divided into 2 subgroups for morning and afternoon sessions. At the first session (pretest) of the 8 sessions, participants in the experimental group were asked to fill out a self-report questionnaire describing their demographic characteristics, coping strategies, and self-efficacy. The post-test was conducted

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