



EXPLORING NURSES SELF-EFFICACY REGARDING NURSING COMPETENCIES AMONG ASSOCIATE NURSES IN BALI, INDONESIA

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ABSTRACT

Nurses' self-efficacy refers to their perception of their own capability to carry out specific tasks, which in turn can influence various aspects of practice aimed at delivering improved nursing care. This study aimed to identify and explore nurses' self-efficacy in relation to nursing competencies and its predictors among nurses in Bali, Indonesia. This study employed a descriptive-analytical design involving 149 associate nurses chosen by purposive sampling. Data were collected using questionnaires and Pearson's correlation test is employed to examine the relationships between variables. This study found that nurses' self-efficacy was influenced by their length of work experience. In addition, burnout syndrome, self-esteem, and grit were identified as significant predictors of nurses' self-efficacy. This study implied that the nurses' self-efficacy regarding nursing competencies could be improved as long as the nurses has their optimum personal characteristics as well as self-functionality. Thus, will affects their professional nursing competencies in order to improve better nursing outcomes.

Keywords: burnout; competence; efficacy; grit; nurses; self-esteem

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INTRODUCTION

Nurses considered as front-line guard with important roles in order to enhance the client's health and functionality (Kiblasan et al., 2015). Improved nursing outcomes are influenced by several key factors possessed by nurses, one of which is self-efficacy. Based on the social cognitive theory, nurses' self-efficacy defined by the individual view about their ability to perform a specific task (Taylor et al., 2009). Previous study simplified the nurses' self-efficacy as the specific view in dealing with their competencies at hospital (Triana, 2017). Self-efficacy identified as the nurses' main modals in ensuring good performance as stated from literatures (Aryanti & Mulyani, 2021; Pajares, 2006; Prestiana & Purbandini, 2012; Taylor et al., 2009).

Previous research has been conducted regarding Nurses' self- efficacy and they were seeming to have different outcomes. The study by Nakhaee & Alinejad (2015) found that 79% of the nurses had moderate self-efficacy. Park et al. (2016) signified that associate nurses had moderate level in self-efficacy which was 2,93 from range one to five. On the other hand, our previous study showed that nurses still owned minimum value of self-efficacy (Triana, 2017) and need to be improve by performing several approaches (Triana & Yanti, 2018). Our preliminary study by interview found that eight from 12 nurses seems to be doubts to confront nursing competencies by its difficulty levels. It was also found that five out of eight nurses feeling a lack of focus while perform nursing tasks which we believed could affect the nursing outcomes.

The role of self-efficacy among nursing personnel makes it a critical aspect that requires serious attention. It is considered because self-efficacy is one factor with a significant impact to nursing

service quality based on the previous nursing researches (Handayani et al., 2016; Indrawati, 2014; Lee & Ko, 2010; Putra et al., 2014; Soudagar et al., 2015). However, the research conducted by linking the nurses' self-efficacy and their professional competencies still lack done. Therefore, this study sought to identify and exploring the nurse's efficacy regarding the nursing competencies and its predictors among nurses in Bali, Indonesia.

METHOD

Study design, participants and procedures

This study applied a quantitative approach with a descriptive-analytical design. A total of 149 associate nurses were recruited using a purposive sampling technique based on predetermined inclusion and exclusion criteria.

Research Instruments

Section A. Demographic data questionnaires by length of work experiences in the Hospital.

Section B. *Maslach Burnout Inventory–Human Services Survey (MBI-HSS)*. The MBI-HSS is a widely recognized instrument designed to measure burnout levels among professionals who work in direct contact with other individuals (Maslach, 2018; Triana, 2017). The MBI-HSS questionnaire consists of three dimensions, namely physical and emotional exhaustion, depersonalization, and decreased personal accomplishment. The first dimension represents feelings of exhaustion, depletion of energy, and prolonged feelings of emptiness. The second dimension relates to cynicism and withdrawal towards others at work. While the third dimension is a dimension that represents feelings of helplessness and lack of competence in doing work. Each dimension of burnout is represented by several questions in the questionnaire. The MBI-HSS questionnaire has a total of 22 items with four statement scores. The MBI-HSS instrument was previously utilized in the study conducted by Triana et al. (2017), yielding seven items with validity coefficients ranging from 0.403 to 0.758 and a reliability coefficient of 0.839, thereby demonstrating its validity and reliability.

Section C. *Rosenberg's self-esteem*.

Rosenberg self-esteem instrument is a measuring tool used to measure the level of individual self-esteem as a whole (global). The Rosenberg scale consists of 10 statement items consisting of components of positive and negative statements which are divided into several aspects. These aspects include self-confidence as considered in the favorable component and self-depreciation which is considered as the unfavorable component. The self-confidence aspect in this instrument is represented by statements of items 1, 2, 4, 6, and 7. Meanwhile, the self-depreciation aspect is represented by statement items 3, 5, 8, 9, and 10 (Rosenberg, 1965; Triana, 2017). The Rosenberg scale is an instrument with a Likert scale with four categories including (1) strongly disagree, (2) disagree, (3) agree, (4) strongly agree. The Rosenberg Self-Esteem Scale was previously applied in a study conducted by Triana et al. (2017), involving nurses as participants. The instrument yielded seven items, with validity coefficients ranging from 0.455 to 0.698 and a reliability coefficient of 0.820, thus providing evidence of its psychometric soundness in terms of both validity and reliability.

Section D. *Short Grit Scale*.

Grit was measured using the Short Grit Scale, which was developed based on Duckworth's theoretical framework of grit. This framework emphasizes perseverance and sustained enthusiasm in pursuing long-term goals. The instrument, developed by Duckworth *et al.* (2016), consists of 12 items that have been translated into Indonesian. The scale assesses two dimensions of grit: *Consistency of Interest* and *Perseverance of Effort*. The Short Grit Scale, originally developed by Duckworth & Quinn (2009), was employed in this study. The instrument comprises 12 items, with validity coefficients ranging from 0.730 to 0.830 and a reliability coefficient of 0.840, thereby demonstrating strong psychometric properties in terms of validity and reliability.

Section E. *The Nursing Competence Self Efficacy Scale.*

The Nursing Competence Self-Efficacy Scale was developed based on previously established self-efficacy instruments. This instrument has a total of 22 items with four indicators which include proficiency, altruism, prevention, and leadership (Kennedy et al., 2015). The Nursing Competence Self-Efficacy Scale was previously employed in the study conducted by Triana et al. (2017), with nurse participants, yielding 21 items with validity coefficients ranging from 0.409 to 0.880 and a reliability coefficient of 0.953, thereby confirming its validity and reliability.

Data Collection and Analysis Procedures

This study was carried out in several stages. First, the researcher identified and selected nurses who met the established inclusion and exclusion criteria to participate as respondents. A formal approach was then conducted by providing an explanation of the study objectives, research procedures, as well as the rights and responsibilities of respondents, followed by obtaining their informed consent. After consent was secured, the researcher distributed the questionnaires and provided guidance to ensure proper completion. The collected data were subsequently analyzed using the Pearson correlation statistical test with a 95% confidence level. This research has been approved through an ethical clearance process number 000.9/5841/RSDM/2025 by the ethical commission of RSD Mangusada Kabupaten Badung.

RESULT

Table 1.
An overview of nurses' self-efficacy and its predictors

Variables	Mean $\pm$ SD	NCSE	
		<i>r</i>	<i>p-value</i>
Length of work experiences	5,24 $\pm$ 4,97	0,605	<0,001
MBI-HSS	14,05 $\pm$ 4,09	-0,698	<0,001
RSE	16,74 $\pm$ 3,63	0,708	<0,001
SGS	29,21 $\pm$ 5,83	0,710	<0,001

Note:

MBI-HSS: Maslach Burnout Inventory–Health Services Survey; RSE: Rosenberg Self-Esteem Scale; SGS: Short Grit Scale; NCSE: Nursing Competence Self-Efficacy Scale.

DISCUSSION

Based from the study, we identified that the length of work experience has positive correlation to nurses' self-efficacy which is parallelly supported the previous study (Li et al., 2016). Nurses are tend to have more mature work competencies based on work experience and leading to its success while performing the nursing tasks. Length of work experiences improved nurses' self-efficacy by improving motivation and self-confident (Toode, 2015). These results also reinforce Bandura (2008) social cognitive theory from the individual perspective, which emphasizes that successful experiences contribute to self-mastery by enabling individuals to transform failure into success. Individuals with prior experience are more likely to develop stronger self-belief when encountering similar situations in the future. Similarly, Nursalam (2015) highlighted that work experience reflects a nurse's problem-solving ability and professional skills, including confidence in performing clinical actions. Personal achievements foster a determined approach, while successes gained through persistence provide valuable learning opportunities that help individuals manage and overcome challenges (Pajares, 2006).

Our findings also revealed a strong negative correlation between burnout syndrome and nurses' self-efficacy, which is consistent with previous studies (Consiglio et al., 2014; Yang, 2011). Nurses with higher levels of self-efficacy are more likely to adopt positive coping mechanisms, whereas those with lower self-efficacy tend to rely on less effective coping strategies. Li et al. (2014) and Ding et al. (2015) further suggest that coping may serve as a mediating factor in the relationship between clinical efficacy and burnout among nurses. Ineffective coping mechanisms can lead to

elevated emotional exhaustion, a core indicator of burnout. Burnout syndrome is defined as a condition encompassing both physical and psychological dimensions. Saam & Wahyuni (2013) note that physical strain can trigger changes in psychological well-being. Burnout manifests through a combination of physical, psychological, and mental symptoms that are detrimental, often resulting from chronic fatigue and sustained occupational stress (Sari, 2015). When experiencing burnout, nurses face increased cognitive difficulties that ultimately undermine their self-efficacy (Quan, 2006).

We also found that self-esteem supported significantly to the nurses' self-efficacy. Therefore, this indicated that the nurses will have a high value of if they are adopting high value of self-esteem, vice versa. The research linking the self-esteem and Nurses' self-efficacy related nursing competencies still lack done. However, we found similar studies that could support our findings even by different samples characteristics (Kursad Zorlu, 2012; Prasetya et al., 2013; Saksri et al., 2012). Our study is also supported by Zulkosky (2009), who asserted that low self-efficacy is closely associated with low self-esteem. Individuals with low self-esteem often demonstrate pessimism regarding their abilities and personal growth, which may further diminish their sense of efficacy. Conversely, strong self-esteem is likely fostered by nurses' perception of their own value and recognition within their professional role.

The findings of this study also demonstrated a strong and significant positive correlation between grit and self-efficacy. This indicates that when nurses possess high levels of grit, they are also likely to demonstrate high self-efficacy. Previous studies support these findings, stated that grit correlated positively on self-efficacy. Safariningsih, Rizan and Handaru (2022) found that healthcare workers with higher levels of grit demonstrated greater work engagement, which in turn directly strengthened their self-efficacy in performing professional responsibilities. Other studies have similarly demonstrated that grit can influence individual self-efficacy, including among nurses (Alhadabi & Karpinski, 2020; Fabelico & Afalla, 2020; Kim, 2023; Lucy Lutviantari & Wulan Saptandari, 2024; Portero de la Cruz et al., 2020).

Grit is a personality characteristic that embodies perseverance and sustained consistency in striving toward long-term goals, despite challenges and setbacks. (Duckworth et al., 2018). In the nursing context, particularly among bedside nurses in inpatient care units who encounter high workloads and dynamic work environments, grit plays a vital role in shaping both performance and psychological well-being (Ryu et al., 2023). Nurses with high levels of grit are more likely to endure work-related stress (M. Li et al., 2023; Stoffel & Cain, 2018), remain focused on their professional responsibilities (Duckworth et al., 2007), and demonstrate dedication to delivering optimal patient care. Such perseverance and consistency further strengthen nurses' self-efficacy, namely their confidence in their ability to manage clinical situations, make sound decisions, and face various workplace challenges with assurance (M. Li et al., 2023).

CONCLUSION

The study found that nurses' self-efficacy was significantly associated with length of work experience, burnout syndrome, self-esteem, and grit. It is recommended that further research on nurses' self-efficacy be conducted to enhance nursing outcomes. Future studies are also encouraged to design and implement interventions aimed at strengthening nurses' self-efficacy, as well as to explore additional factors not examined in the present study. The implications of these findings highlight the importance of developing strategies within nursing practice and hospital management to foster nurses' psychological resources, particularly by addressing burnout, strengthening self-esteem, and cultivating grit. For nursing professionals, improving self-efficacy may lead to greater confidence in clinical decision-making, resilience in high-pressure environments, and improved quality of patient care. For future research, it is essential to design longitudinal and intervention-based studies that assess how targeted programs, such as resilience training, mentorship, and stress management workshops which can sustainably enhance self-efficacy among nurses. Furthermore,

exploring organizational and cultural factors may provide a more comprehensive understanding of how work environments shape nurses' self-efficacy and, ultimately, nursing performance.

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