

Using the Theory of Reasoned Action and Self-Efficacy to Explore Nursing Students' Spiritual Health Promotion



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Abstract:

Purpose: The purpose of this study was to apply the theory of reasoned action and self-efficacy in order to explore nursing students' behavioral intention and predict its effects on the practice of spiritual health promotion.

Design: An exploratory research design was adopted.

Methods: In total, 191 5th-year nursing students participated in the curriculum on professional care. A self-reported open-ended questionnaire was used to collect the data. Both investigator triangulation and content analysis were used for the data analysis.

Results: The results of this study showed that 75% of all of the themes represented nursing student's behavioral beliefs, normative beliefs, and self-efficacy to predict the effect of behavioral intention on the practice of spiritual health promotion.

Conclusions: Following the results of this study, the aim is to build a structured questionnaire including items on behavioral beliefs, evaluations of behavioral outcomes, normative beliefs, motivation to comply, attitudes, subjective norms, self-efficacy, and behavioral intention to survey nursing students on the practice of spiritual health promotion in the future.

Clinical Relevance: In further studies, nursing students will be surveyed on their behavioral attitudes, subjective norms, and self-efficacy to predict the effect of their behavioral intention on the practice of spiritual health promotion. Furthermore, nursing students may increase their self-reported levels of physical, psychological, spiritual, and social health promotion to help clinical patients.

Keywords: *spiritual health promotion, spirituality, nursing students, theory of reasoned action, self-efficacy.*

Background

Nursing students have many questions in their daily life, but they do not have the knowledge, attitudes, and behaviors to manage these questions themselves. Many problems present themselves in nursing students' lives such as health, knowledge, homework, grades, friends, career, travel, happiness, money, love, and fun, and they need to determine solutions to these problems. What is the best solution to manage students' problems? What is the best way for nursing students to solve their problems? There are five methods of problem solving: identify the problem, define the problem, examine options, act on a plan, and review the consequences. Nursing teachers should be responsible for leading nursing students in the promotion of their physical,

psychological, spiritual, and social health and for helping them to problem solve in their daily life.

Spiritual Health Promotion

In 1998, the World Health Organization (WHO) held a discussion on whether a spiritual dimension should be included in health promotion in addition to physical, mental, and social well-being (Vader, 2006). Spiritual health and religious beliefs are positively correlated with self-esteem and negatively correlated with anxiety and depression for nursing students in clinical practice (Papazisis, Nicolaou, Tsiga, Christoforou & Sapountzi-Krepia, 2014). Therefore, nursing students should be equipped with the promotion of their physical, psychological, spiritual, and social health by nursing teachers in modern nursing education.

The holistic approach to health promotion includes physical, psychological, spiritual, and social health promotion (Lundberg & Kerdonfag, 2010). The functions of nursing are to promote health, prevent illness, restore health and alleviate suffering in clinical settings (Lundberg & Kerdonfag, 2010). The definitions of spirituality in multi-dimensional concepts address many problems related to facing emotional stress, physical illness, pain, suffering, frustration, helplessness, and death among others (Lundberg & Kerdonfag, 2010).

Personal health completely integrates a person's body, mind and spirit; thus, nursing students' holistic care of patients is becoming increasingly important in nursing programs (Lundberg & Kerdonfag, 2010). Nursing students should provide spiritual care which integrates all subjective and dynamic concepts in the unique care of clinical patients. Spiritual care leads to positive consequences, for examples, spiritual healing for clinical patients and spiritual promotion for nurses. Spiritual health promotion could facilitate nursing students, nursing educators, clinical nurses, and nursing managers to develop nursing knowledge and practices in clinical settings (Ramezani, Ahmadi, Mohammadi & Kazemnejad, 2014).

It has been reported that spiritual health is unrelated to practice stress and depressive tendencies for nursing students in clinical settings, but it is related to health promoting behaviors (Hsiao, Chien, Wu, Chiang & Huang, 2010). Nursing teachers should develop numerous strategies to influence the promotion of spiritual health in nursing students (Hsiao, Chiang, Lee & Han, 2013) that could help them reduce stress and depression (Hsiao, Chiang & Chien, 2010), and increase health promoting behaviors in clinical settings (Hsiao, Chien, Wu, Chiang & Huang, 2010).

Theory of Reasoned Action (TRA)

Fishbein and Ajzen developed the theory of reasoned action (TRA) in 1967. The TRA is used to explain the relationship between attitudes and behaviors (Evans, Ndetan & Williams, 2009). Additionally, the purpose of the TRA is to predict individual behavior based on pre-existing attitudes and behavioral intentions. Thus, a person's decision to engage in health promoting behaviors is based on the expectations of individual outcomes for predicting one's intention to perform health behaviors (Evans, Ndetan & Williams, 2009).

The TRA is used to understand an individual's health behavior and behavioral intention. Behavioral intention is important to the theory of reasoned action because it is determined by behavioral attitudes and subjective norms. The TRA is a stronger intention to enhance one's effort to perform a behavior (Gibbons, Houlihan & Gerrard, 2009).

Two scholars have suggested two factors about attitudes and subjective norms that determine behavioral intention. An attitude is a personal opinion that relates to positive or negative behavior. A subjective norm is a perceived social pressure arising from a personal perception. The TRA is a framework that includes personal behaviors, normative beliefs, and attitudes that influence behavioral intention (Gurman, Dhillon, Greene, Makadzange, Khumlao & Shekhar, 2015).

Therefore, The TRA could affect the relationship between behavioral intention and actual behavior. The TRA has been used in many studies as a framework for examining behavioral intention, for example, drug abuse (Roberto, Shafer & Marmo, 2014), tobacco cessation (Noonan & Kulbok, 2012; Trumbo & Se-Jin 'Sage', 2015), sexual education (Alvarez, Villurruel, Zhou & Gallegos, 2010; Zhiwen, 2012), and many other areas of health promotion.

Self-efficacy

In 1986, Albert Bandura was a psychologist who defined self-efficacy as the result of a person's belief and ability to succeed in a number of situations or goals (Lee, Salman & Cooksey-James, 2016). Therefore, a person's sense of self-efficacy could play a role in how approaches challenges, goals, and tasks (Silberman, Litwin, Panzarella & Fernandez, 2016). The theory of self-efficacy is a famous social cognitive theory which emphasizes the role of observational learning (Wing, Belanger & Brunet, 2016) and social experience in the development of personality according to Albert Bandura (Alvarez, Villurruel, Zhou & Gallegos, 2010).

The social cognitive theory is a major concept in a person's actions and reactions that include social behaviors and cognitive processes. Self-efficacy is the strength of a person's belief to increase the promotion of healthy behavior (Gandoy-Crego, Clemente, Gomez-Cantorna, Gonzalez-Rodriguez & Reig-Botella, 2016). Many studies have developed self-efficacy from a number of perspectives in many different settings (Aqtash & Servellen, 2013).

A study was conducted to evaluate self-efficacy in an intervention at a center to prevent adolescent drug abuse and high-risk sexual behavior (Ortega, Huang, & Prado, 2012). A person's self-efficacy could be considered his/her ability to persist and succeed in a task. For example, high and low self-efficacy could be directly determined by whether or not someone chooses to engage in a challenging task. Additionally, it strongly influences a person's decision to face a challenging mission and address health behavior (Silberman, Litwin, Panzarella & Fernandez, 2016).

Purpose

The purpose of this study was to apply the theory of reasoned action and self-efficacy in order to explore nursing students' behavioral intention and predict its effects on the practice of spiritual health promotion.

Design

An exploratory research design was adopted.

Methods

Framework

This study used the framework of the theory of reasoned action (Evans, Ndetan & Williams, 2009) and self-efficacy (Alvarez, Villurruel, Zhou & Gallegos, 2010) (Figure 1) to explore nursing students' behavioral beliefs, normative beliefs, and self-efficacy to predict the effects of behavioral intention on the practice of spiritual health promotion.

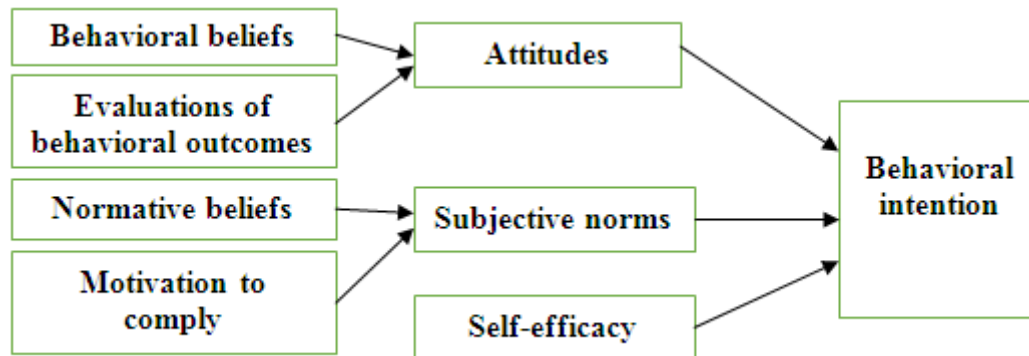


Figure 1. The framework of the theory of reasoned action and self-efficacy Participants

Participants

In total, 191 5th-year nursing students participated in the curriculum on professional care. The inclusion criteria for the study sample included nursing students in four classes. A purposive sample was used in this study. All participants voluntarily completed the study during the course of their professional care.

Ethical considerations

This study involved a teaching project to improve nursing students' learning of spiritual health promotion. The institutional committee of the University of Kaohsiung, Taiwan, approved this study. Nursing students voluntarily participated in the curriculum on professional care. In addition, nursing students were recruited and provided their informed consent to the researcher. A description of the study was provided to minimize the participants' risks or discomfort. Furthermore, participants were informed that anonymity and confidentiality would be maintained.

Data collection

An open-ended questionnaire was used to collect data. This questionnaire was designed by our researcher group. The questionnaire included six open-ended questions as follows. What is the advantage for you of practicing spiritual health promotion? What is the disadvantage for you of practicing spiritual health promotion? Who will support or encourage you to practice spiritual health promotion? Who will not support or encourage you to practice spiritual health

promotion? What factors will increase you to practice spiritual health promotion? What factors will decrease you to practice spiritual health promotion?

After a nursing teacher explained the course syllabus and content of the curriculum on professional care, the researcher administered a questionnaire to each nursing students. The researcher explained the questionnaire in order for the nursing students to understand spiritual health promotion. Additionally, the researcher informed the nursing students that they could decide to completely or incompletely fill out the questionnaire. The questionnaires were completed by the nursing students as a self-report of six open-ended questions. Finally, the researcher collected all completed questionnaire. The data were collected from February 23, 2015, to February 27, 2015.

Data Analysis

Denzin and Patton identified four types of triangulation including method triangulation, investigator triangulation, theory triangulation, and data source triangulation (Begley, 1996; Carter, Lukosius, DiCenso, Blythe & Neville, 2014). Many researchers determine their data collection methods based on the research questions (Carter, Lukosius, DiCenso, Blythe & Neville, 2014). Investigator triangulation is frequently used in qualitative studies including interviews, observation, and field notes (Begley, 1996; Carter, Lukosius, DiCenso, Blythe & Neville, 2014). Additionally, it involves the participation of two or more researchers to provide multiple observations and conclusions (Begley, 1996; Carter, Lukosius, DiCenso, Blythe & Neville, 2014).

Themes from the content and their frequency are identified and manually coded by two researchers (Lopes, Delellis, DeGroat & Jacob, 2014).

To ensure the study's reliability, two researchers coded the individual questionnaires, discussed the outcomes, and reached an agreement with each other. The responses from these questionnaires were read and coded by the two researchers. Furthermore, 75% of all beliefs and their frequency of occurrence in the responses were identified and developed through consensus. Therefore, both investigator triangulation and content analysis were used for the data analysis in this study.

Results

The results of this study showed that 75% of all of the themes represented nursing students' behavioral beliefs, normative beliefs, and self-efficacy to predict the effect of behavioral intention on the practice of spiritual health promotion.

Behavioral Beliefs

In behavioral beliefs (Table 1), the themes included positive thinking, acceptance, harmony, meaning of life, internal needs, emotional control, forgiveness, frustration, and optimism. Nursing students reported that their behavioral beliefs in positive thinking, acceptance, harmony, meaning of life, internal needs, emotional control, forgiveness, frustration, and optimism allowed them to take advantage of the practice of behavioral intention to promote spiritual health.

Table 1. Behavioral Beliefs

Beliefs (themes)	Times	Frequency	Percentage
positive thinking	56	56	
acceptance	48	104	
harmony	39	143	
meaning of life	28	171	
internal needs	22	193	
emotional control	17	210	
forgiveness	16	226	
frustration	14	240	
optimism	13	253	75%

Normative Beliefs

In normative beliefs, the themes included grandfather, grandmother, father, mother, classmates, friends, boyfriend, and girlfriend. Nursing students agreed that the themes of grandfather, grandmother, father, mother, classmates,

friends, boyfriend, and girlfriend allowed them to practice behavioral intention to promote spiritual health.

Self-efficacy

In self-efficacy (Table 2), the themes included stress, frustration, negative thinking, helplessness, difficulty, negative emotion, and suffering from pain. When nursing students felt stress, frustration, negative thinking, helplessness, difficulty, negative emotions, and suffering from pain, their self-efficacy increased to practice behavioral intention to promote spiritual health.

Table 2. Self-efficacy

Beliefs (themes)	Times	Frequency	Percentage
Stress	33	33	
Frustration	27	60	
negative thinking	23	83	
Helplessness	22	105	
Difficulty	19	124	
negative emotions	16	140	
suffering from pain	16	156	75%

Discussion

Spirituality could influence health promotion in Afro-Caribbean populations, such as the concepts of compassion for service, divine authority, and shared responsibility (Marshall & Archibald, 2015). In this study, religiousness and psychology were equal to spirituality. Understanding forgiveness increased collaboration among individuals in the health care system. The theme of forgiveness was a powerful force and had a significant role in the process of healing to promote physical, psychological, spiritual, and social health (WEBB, Toussaint & Conway-Williams, 2012).

In 1986, Bandura proposed the social cognitive theory to develop social learning, which was offered to understand spiritual modeling. Spiritual modeling is defined by the spiritual qualities of compassion, self-control, and faith in every-day situations (Oman, Thoresen, Park, Shaver, Hood & Plante, 2009). The social cognitive theory is used in faith-based health counselling in churches, and it is used to change people's health behavior (Fallon, Bopp & Webb, 2013).

There is value in the brevity of life. A health strategy for spiritual health includes the Buddhist approach to end-of-life care. The Buddhist philosophy is to develop kindness, empathy, and compassion for all people and to impart well-being and peace in the world. Everyone should support and

encourage other people to pursue acceptance and contentment in their daily life (Johnson-Bogaerts, 2015).

In several studies, spirituality has been included in nursing models to increase nursing students' spiritual awareness through nursing education (Mitchell, Bennett & Manfrin-Ledet, 2006). Spirituality and religiousness lead the aspects of a person's well-being. It is important to include spiritual or religious dimensions in mental health care (Slay, 2007). Many studies have shown that the problem-solving abilities of ineffective management are related to depression, psychological stress, and suicidal ideation; however, the problem-solving abilities of effective management are associated with effective life satisfaction, emotional awareness, and good mental health (Abdollahi, Yaacob & Ismail, 2014).

According to several studies, this study concurred with others studies, and there were no differences among them. According to the results of this study, nursing students were interested in practicing spiritual health promotion for the health advantages of positive thinking, acceptance, harmony, meaning of life, internal needs, emotional control, forgiveness, frustration, and optimism. Spiritual health promotion was an important element for nursing students to equip themselves in daily life. Specifically, nursing students should gain skills in spiritual health promotion to take care of themselves and their patients. Holistic care includes the four dimensions of physical, psychological, spiritual, and social health promotion.

Nursing students can use spiritual health promotion to solve many problems in their daily life. Additionally, nursing students can encourage their families including grandfather, grandmother, father, mother, classmates, friends, boyfriend, and girlfriend to practice spiritual health promotion and increase their health. Nursing students can encourage their parents to practice spiritual health promotion, and their parents might stop worrying that their children will have numerous problems in their daily life. Further, nursing students' parents understand the care of their children, so nursing students are equipped with physical, psychological, spiritual, and social health promotion to have a productive life. If nursing students have problems involving love, their parents do not worry that they will commit suicide. Therefore, nursing students should be supported and encouraged to practice spiritual health promotion when they must address many problems in their daily life.

In this study, self-efficacy was the major force increasing spiritual health promotion for nursing students. Nursing students were able to decide to choose the practice of spiritual health promotion when they were frustrated, helpless, had negative thoughts and negative emotions, and suffered from pain. Self-efficacy was a self-control

mechanism for nursing students to enhance the achievement of their goals and mission. Nursing students should be trained on the ability of self-efficacy to challenge the many difficulties in their lives. Because of the type of work in medical health systems, nursing students need to be prepared physically, psychologically, spiritually, and socially to take care of many patients who are sick with health problems and suffering from pain. Therefore, nursing students should be equipped through nursing education with spiritual health promotion to influence their physical, psychological, and social health for the future.

Limitations

The limitations of this study included the use of a purposive sample. The sample was small and limited to 191 nursing students. All participants were in their 5th-year of a program that used a curriculum on professional care, which may have led to limited data collection. In addition, participants were limited to the department of nursing at a university in Kaohsiung City, Taiwan.

Conclusions and Relevance to Nursing Practice

Following the results of this study, the aim is to build a structured questionnaire including items on behavioral beliefs, evaluations of behavioral outcomes, normative beliefs, motivation to comply, attitudes, subjective norms, self-efficacy, and behavioral intention to survey nursing students on the practice of spiritual health promotion in the future. In further studies, nursing students will be surveyed on their behavioral attitudes, subjective norms, and self-efficacy to predict the effect of their behavioral intention on the practice of spiritual health promotion. Furthermore, nursing students may increase their self-reported levels of physical, psychological, spiritual, and social health promotion to help clinical patients.

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