MIN Self-Efficacy Towards Ability to Perform Nursing Care

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ABSTRACT

Background: The ability to perform nursing care is a determining factor in the success of patient care in hospitals. Many nurses are less aware of the importance of improving their ability to provide nursing care, even lack of self-confidence has an impact on the nursing process while patients are undergoing treatment. **Objective:** This study aims to determine the relationship between nurses' self-efficacy and the ability to perform nursing care. Methods: This study is a correlation study using a cross-sectional approach. This study conducted from February to May 2023. The focus of this study was on nurses who works in hospital on West Jakarta, Indonesia. The sampling technique used random sampling with a sample size of 218 nurses in hospital. Data collection in this study used a Likert scale questionnaire to measure self-efficacy and the ability to apply nursing care where the questionnaire was developed by the researcher and has been tested for validity and reliability. This study used univariate and bivariate statistical analysis. The statistical analysis used was Chi Square. Results: Nurses with high self-efficacy have the capability to provide good nursing care was 67.4% or 147 participants. The results showed a pvalue of 0.001 < 0.05, It's mean there was significant relationship between self-efficacy and the ability of nurses to provide nursing care. Conclusion: Self-efficacy plays an important role in determining the ability to provide nursing care so that each nurse needs to increase self-efficacy in the nursing process carried out on patients. Further research is needed regarding factors that are more effective in increasing a person's self-efficacy.

Keywords: Nurse; Nursing Care; Self Efficacy

INTRODUCTION

The quality of nursing care in hospitals has been a focal point of research in recent years, particularly regarding the negative experiences patients encounter. A significant body of literature indicates that inadequate nursing care directly correlates with poor patient experiences. For instance, highlight that when nurses lack sufficient time to provide essential health education and emotional support, it leads to missed care opportunities, ultimately resulting in negative patient experiences and diminished patient loyalty (Chen *et al.*, 2021). This finding is echoed by Mhlanga *et al.* (2016) who assert that patients' perceptions of nursing quality are critical indicators of overall healthcare quality. Deficiencies in nursing care can significantly impact patient satisfaction (Akbas *et al.*, 2023). Moreover, the development of measurement tools such as the Inpatient Experience with Nursing Care Scale (IPENCS) has been instrumental in identifying the specific elements of nursing care that patients value most (Chen *et al.*, 2021). This tool underscores the importance of understanding patient experiences as a precursor to improving nursing care quality. By focusing on these experiences, healthcare institutions can address the factors that contribute to negative perceptions, thereby enhancing the overall quality of care provided. The emphasis on patient experience rather than mere satisfaction is crucial, as it provides a more nuanced understanding of the quality of nursing care (Yalew *et al.*, 2020).

The barriers to effective nursing care are multifaceted. Discuss how a lack of time, inadequate staffing, and insufficient training contribute to the challenges nurses face in delivering high-quality care (Kaur *et al.*, 2021). These operational barriers not only hinder nurses' ability to perform their duties effectively but also negatively affect patient outcomes. The implications of these barriers are significant, as they can lead to a cycle

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of dissatisfaction among both patients and nursing staff, further exacerbating the quality of care issues within hospitals (Balasopoulou *et al.*, 2017). Furthermore, the relationship between nursing patient interactions and patient satisfaction is critical. Found that a strong nurse-patient relationship significantly enhances patient satisfaction with nursing (Balasopoulou *et al.*, 2017). This relationship is built on trust and effective communication, which is often compromised in high-stress environments where nurses are overburdened. The emotional and psychological well-being of nurses also plays a role in this dynamic; when nurses experience burnout or job dissatisfaction, their ability to connect with patients diminishes, leading to poorer patient experiences (Aiken *et al.*, 2021).

In addition to interpersonal dynamics, the structural aspects of nursing care, such as staffing levels and organisational support, are essential for delivering quality care. emphasise that adequate staffing is a critical factor influencing patient satisfaction with nursing care (Alsaqri *et al.*, 2018). When hospitals are understaffed, the quality of care inevitably declines, leading to increased reports of negative patient experiences. This structural inadequacy not only affects patient outcomes but also contributes to higher turnover rates among nursing staff, creating a vicious cycle that is difficult to break (Kheder & Mohammed, 2019). Moreover, the training and education of nursing staff are pivotal in shaping their ability to provide quality care. Zed and Mohammed (2019) report that nurses' knowledge and skills directly impact their performance in patient care. Continuous professional development and training programs are essential to equip nurses with the necessary competencies to meet the complex needs of patients. Without such initiatives, the quality of care is likely to suffer, leading to increased instances of negative patient experiences (Zed & Mohammed, 2019).

The theoretical framework for this research is based on Albert Bandura's Social Cognitive Theory, particularly the concept of self-efficacy, which refers to an individual's belief in their ability to perform specific tasks or behaviors effectively. In the context of nursing care, self-efficacy influences nurses' confidence in delivering quality patient care, handling clinical challenges, and responding to complex health situations (Bandura, 2012). Evaluating the link between an individual's self-efficacy and their ability to deliver comprehensive nursing care is crucial for identifying strategies to enhance the overall quality of patient care. This focus underscores the significance of the present study in comparison to earlier research.

METHODOLOGY

Study Design and Settings

This study is a quantitative study with a cross-sectional approach. A cross-sectional approach was chosen for the present study because it provides simple and clear explanations. In addition, cross-sectional studies capture information at one point in time, which helps identify possible relationships or associations between variables, guiding future research (LoBiondo-Wood & Haber, 2014). Nursing care performance is a complex outcome influenced by many variables beyond just self-efficacy, including knowledge, experience, motivation, emotional intelligence, and time management (Song *et al.*, 2020). In this study, the research focused solely on self-efficacy as the independent variable and the ability to perform nursing care as the dependent variable. The study was conducted from February to May 2023. The focus of this study was on nurses in hospitals in West Jakarta, Indonesia.

Study Participants and Selection

This study was conducted on 218 nurses in a tertiary hospital in West Jakarta. Sampling was carried out using a probability sampling technique, namely simple random sampling (Novosel, 2023). The inclusion criteria in this study were registered as active nurses with minimal 1 year experienced based on data from the head of the hospital.

Research Instruments

Data collection in this study used a Likert scale questionnaire to measure self-efficacy and the ability to apply nursing care where the questionnaire was developed by the researcher and has been tested for validity and reliability. The self-efficacy instrument consists of 19 questions divided into two categories including low if the total score is 1-38 and high if the total score is 39-76 (Galiana-Camacho *et al.*, 2021). The Cronbach's alpha value of the self-efficacy instrument is 0.999 While the instrument to measure the ability to apply nursing

care consists of nine questions divided into two categories including applying if the total score is 0-9 and applying if the total score is 10-18. The Cronbach's alpha value of the instrument is 0.930. The results of statistical tests on the research instrument indicate that the instrument used is reliable to measure the variables studied (Rojas-Rivera *et al.*, 2023).

Statistical Analysis

This study used univariate and bivariate statistical analysis. Univariate analysis was conducted to determine the frequency distribution consisting of age, gender, ethnicity and self-efficacy and the ability to apply nursing care. Bivariate analysis was conducted using the Chi-Square test (Qin *et al.*, 2021).

Ethical Consideration

This researcher obtained approval from Health Research Ethics Committee of Committee of Bani Saleh University, Indonesia with reference number EC.095/KEPK/FKF-UBS/III/2025 on 31st March 2025.

RESULTS

Characteristic	Total	Percentage		
Age				
22- 25 years	188	86.2		
26 – 30 years	30	13.8		
Gender				
Male	35	16.1		
Female	183	83.9		
Ethnicity				
Sunda	132	60.6		
Jawa	53	24.3		
Betawi	33	15.1		
Amount	218	100%		

Based on Table 1 most of the participants were women (83.9%), with an age range of 22-25 years (86.2%), with Cultural Ethnicity background of mostly Sunda ethnic.

Table 2: Frequency Distribution Based on Self Efficacy and Ability to Implement Nursing Care (n=218)

Variables	Amount	Percentage		
Self-Efficacy				
Low	71	32.6		
High	147	67.4		
Ability to Apply Nursing Care		·		
Incapable	71	32.6		
Capable	147	67.4		

Based on Table 2 the results of research on univariate variables of Self efficacy were found mostly in high category, namely 67,4% or 147 participants. While minimal Self-efficacy was found in low category by 32.6% or 71 participants. Capability to Apply Nursing Care found that most of the capable category was 67.4% or 147 participants while in the Incapable category was 32.6% or 71 participants.

Table 3: The Relationship between Self Efficacy in Therapeutic Communication and the Ability to Implement Nursing Care for Patients (n=218)

Self-Efficacy	Ability to Apply Nursing Care			e Total		al	P Value
	Incapable	%	Capable	%	Amount	%	1 value
Low	71	32.6	0	0.00	71	32.6	
High	0	0	147	67.4	147	67.4	0.001
Total	71	32.6	147	67.4	218	100	

Table 3 explains that the results of the study retrieved nurses with high self-efficacy have the capability to provide good nursing care was 67.4% or 147 participants.

DISCUSSION

This study explains that the dominant age range of nurses hospitals is 22-25 years. Kim et al. (2021) explains that age affects a person's self-efficacy. The self-efficacy of the respondents in this study was predominantly high, namely 67.4%. This is in line with research El-Etreby et al. (2024) found that more than half of the nurses had high self-efficacy. The concept of self-efficacy plays a crucial role in nursing practice, particularly in determining the quality of care provided by nurses. A recent study revealed that a significant percentage of nurses reported high self-efficacy, indicating their capability to deliver effective nursing care. This high level of self-efficacy is associated with various positive outcomes, including improved patient care, enhanced job satisfaction, and better resilience in challenging situations. The relationship between selfefficacy and nursing performance is well-documented, suggesting that nurses who believe in their abilities are more likely to engage in proactive behaviours that benefit patient outcomes. Self-efficacy influences how nurses approach their responsibilities and challenges in clinical settings. According to Mohammad, nurses with high self-efficacy are more resilient and better equipped to handle the stresses of their roles. This resilience is essential in healthcare environments, where nurses often face high-pressure situations that require quick decision-making and effective problem-solving. The ability to maintain composure and confidence in their skills allows nurses to provide high-quality care, ultimately leading to improved patient safety and satisfaction (Mohammad *et al.*, 2023).

A person's belief in their natural abilities and talents can increase motivation and productivity in the work they do (Zarrin *et al.*, 2023). Motivation and self-efficacy are interrelated and contribute to achieving health goals. Work motivation is essential for nurses in providing health services. Good self-efficacy can increase motivation, thus affecting individual performance (Núñez Cabrera *et al.*, 2023). An increase in self-efficacy is able foster independence and confidence, while a strong sense of self-efficacy has been proven to enhance job satisfaction and the intention to remain in one's profession (Martina *et al.*, 2022). Self-efficacy refers to the belief in one's own abilities that can strengthen motivation in doing work. Self-efficacy will also increase self-confidence in carrying out tasks and responsibilities so that the person can do their job well (Tomita, 2024). Self-efficacy has a positive relationship with decision making in nurses (Kaya & Kubat Bakir, 2024). Nurses who have low self-efficacy are negatively associated with health service and self-development compared to nurses who have high self-efficacy (Girma *et al.*, 2025).

Moreover, the impact of self-efficacy extends beyond individual performance; it also affects team dynamics and collaboration within healthcare settings. Nurses with high self-efficacy are more likely to communicate effectively with their colleagues and participate actively in team-based care (Wurjatmiko et al., 2018). This collaborative approach is vital in ensuring that patient needs are met comprehensively and efficiently. When nurses feel confident in their abilities, they are more inclined to share information, seek assistance when needed, and contribute to a positive work environment that prioritises patient safety. In disaster preparedness scenarios, self-efficacy becomes even more critical. Research by Yunanto et al. (2023) indicates that nurses with high self-efficacy are better prepared to respond to emergencies, such as natural disasters. This preparedness is essential in minimizing the impact of such events on patient care. When nurses believe in their capabilities, they are more likely to take proactive measures to ensure the safety and well-being of their patients during crises. This highlights the importance of fostering self-efficacy among nurses as part of disaster preparedness training (Yunanto et al., 2023). Furthermore, the relationship between self-efficacy and job satisfaction cannot be overlooked. A study found that nurses who are satisfied with their work environment tend to have higher levels of self-efficacy. This satisfaction is often linked to supportive leadership, adequate resources, and a positive organisational culture. When nurses feel valued and supported, their confidence in their abilities grows, leading to better performance and higher quality care for patients. Thus, healthcare organisations should prioritise creating environments that enhance nurse satisfaction to improve self-efficacy (Elkoca et al., 2023).

The influence of self-efficacy on patient-centred care is also significant. This engagement is crucial for

building trust and rapport, which are essential components of quality nursing care. When nurses feel confident in their abilities to communicate and advocate for their patients, they can provide more personalised and effective care, ultimately leading to better health outcomes (Park & Kim, 2022). Moreover, self-efficacy is linked to the ability to adapt to new challenges and changes in the healthcare landscape. As the field of nursing continues to evolve, nurses must be equipped to handle new technologies, treatment protocols, and patient care strategies. Studies have shown that nurses with high self-efficacy are more open to learning and adapting to these changes (Tong *et al.*, 2021). This adaptability is essential in maintaining high standards of care and ensuring that patients receive the most current and effective treatments available. Yang *et al.* (2024) also shows that self-efficacy is related to comfort in carrying out the act of killing patients.

Two possible modifiable factors affecting self-efficacy are knowledge and attitudes (Kim *et al.*, 2023). This allows for differences in self-efficacy scores for each nurse in the hospital. This also includes the nurse's ability to communicate interpersonally with other people. Effective communication and support for nurses are crucial in providing quality care. It is also important to address concerns about nurse-led care and provide evidence regarding patient safety, clinical outcomes, costs, and patient satisfaction to reflect on the ability of nurses to provide high-quality care within the primary care setting (Ghahremani *et al.*, 2024). High self-efficacy in nurses can improve performance in ensuring patient safety (Zhou *et al.*, 2025). This can be an opportunity to make plans and policies in hospital, especially in managing nursing resources.

In addition to enhancing individual and team performance, self-efficacy also contributes to the overall culture of safety within healthcare organisations. High self-efficacy among nurses fosters an environment where safety concerns can be openly discussed and addressed. When nurses feel empowered to speak up about potential issues, it leads to a proactive approach to patient safety. This culture of safety is vital in preventing adverse events and ensuring that patients receive the highest quality of care (Wang *et al.*, 2021). It is important for nurses to build self-confidence and increase experience to improve self-efficacy (Xu *et al.*, 2025).

Limitation

Assessment through direct observation provides a more objective measure of the ability to implement conservation practices. Other limitations include the timing of the study, outdated hospital data collection policies, and the high mobility of nurses, which made it challenging to consistently follow their activities. These challenges highlight the need for effective time management strategies by researchers. Overall, these experiences offer valuable insights for improving data collection methods in dynamic healthcare environments.

CONCLUSION

Self-efficacy has a significant relationship with the ability of nurses to provide nursing care, this is proven by the results that nurses who have high self-efficacy are able to provide good nursing service to patients in hospitals. It is important to increase self-efficacy in nurses because having high self-efficacy will result in better performance because nurses are confident in their own abilities, never give up, and are persistent in doing certain tasks even though they are considered difficult and like to look for new situations so they can achieve results. which are expected.

Future research can be conducted by identifying various factors related to nurses' self-efficacy in implementing nursing care for patients with various conditions and situations. In addition, further research is needed regarding factors that are more effective in increasing a person's self-efficacy. It is also necessary to conduct research on nurses in primary health care that have a wide range of health service including health service inside and outside the building that prioritise health promotion and disease prevention measures.

Conflict of Interest

The authors declare that they have no competing interests.

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