

ROLE OF SELF-EFFICACY IN HEALTH-PROMOTING LIFESTYLE PRACTICES AMONG B.SC. NURSING STUDENTS.

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ABSTRACT

Background: Nursing students are expected to model and promote healthy behaviors, yet academic stress and lack of motivation often hinder their personal health practices. Self-efficacy—the belief in one's ability to succeed—is known to influence health behavior adoption. However, limited research exists on this relationship in the context of Indian nursing students. Objectives: To assess the levels of self-efficacy and health-promoting lifestyle practices among B.Sc. nursing students and examine the relationship between them. Methods: A descriptive cross-sectional study was conducted among 80 B.Sc. Nursing students (3rd and 4th year) in selected nursing colleges. Convenience sampling was used. Data were collected using the General Self-Efficacy Scale and the Health-Promoting Lifestyle Profile II (HPLP-II). Descriptive statistics and Pearson correlation analysis were used to assess the relationship between self-efficacy and health behaviors. Results: Preliminary findings indicated that students with higher self-efficacy scores engaged more frequently in health-promoting behaviors, particularly in stress management, spiritual growth, and interpersonal relationships. A moderate positive correlation was observed between self-efficacy and overall lifestyle score ($r \approx 0.40$, $p < 0.05$). Conclusion: Self-efficacy is a significant factor in determining health-promoting lifestyle practices among nursing students. Educational strategies aimed at improving students' self-efficacy could lead to better personal health behaviors and professional readiness in promoting health.

Keywords: Self-efficacy, health-promoting lifestyle, nursing students, HPLP-II, Kumaon, nursing education

INTRODUCTION

Health promotion is a cornerstone of modern nursing, emphasizing not only the treatment of illness but the proactive cultivation of well-being. As future healthcare providers, nursing students are expected to adopt and model healthy lifestyle behaviors, aligning their personal habits with the principles they will one day teach patients.(1)

Self-efficacy, defined as an individual's belief in their ability to perform specific actions, has been strongly linked with the adoption of health-promoting behaviors. Higher self-efficacy among nursing students is associated with better engagement in practices such as nutrition, physical activity, and stress management.(2) This is supported by Bandura's Social Cognitive Theory, which identifies self-efficacy as a critical determinant of behavior change.

Evidence from various cultural contexts has confirmed this relationship. For example, a study in Indonesia found that self-efficacy was a significant predictor of health-promoting lifestyle behaviors, accounting for nearly 47% of the variance among nursing students.(3) Similarly, in China, self-efficacy mediated the relationship between e-health literacy and lifestyle practices, emphasizing its central role in nursing education.(4)

Despite this, studies have shown that many nursing students do not consistently practice what they are taught. Gaps are especially evident in areas such as exercise and stress management, often due to academic pressure and lack of structured support.(5) Understanding the interplay between self-efficacy and these behaviors is crucial in shaping interventions for nursing curricula and student support systems.

This study aims to explore the role of self-efficacy in determining health-promoting lifestyle practices among B.Sc. nursing students. Findings from this research can help nursing educators develop targeted strategies to enhance self-efficacy and promote healthier behaviors among students.

METHODOLOGY

Research Design :- This study adopted a descriptive cross-sectional correlational design to examine the relationship between self-efficacy and health-promoting lifestyle practices among B.Sc. Nursing students.

Study Setting :- The research was conducted in Nancy College of Nursing, Nainital , Uttarakhand, India. These institutions were chosen based on accessibility, administrative approval, and student availability during the study period.

Study Population and Sampling :- The study population included third- and fourth-year B.Sc. Nursing students enrolled In Nancy College of Nursing, Nainital. A total of 80

participants were selected using a non-probability convenience sampling technique, which allowed for efficient data collection based on the availability and willingness of the students to participate.

Inclusion and Exclusion Criteria :- Students were eligible for inclusion if they were enrolled in the 3rd or 4th year of the B.Sc. Nursing program, were present during the data collection period, and gave informed consent. Students who were absent during data collection, who declined to participate, or who self-reported any psychological disorders were excluded from the study.

Tools for Data Collection

Data were collected using two standardized instruments. The first was the General Self-Efficacy Scale (GSE) developed by Sherer et al., which consists of 17 items measured on a 5-point Likert scale ranging from "strongly disagree" (1) to "strongly agree" (5). The scale includes both positively and negatively worded items, with reverse scoring applied to the latter. Higher scores indicate greater self-efficacy. The second tool was the Health-Promoting Lifestyle Profile II (HPLP-II), developed by Walker et al. This instrument contains 52 items covering six domains: health responsibility, physical activity, nutrition, spiritual growth, interpersonal relations, and stress management. Each item is rated on a 4-point Likert scale ranging from "never" (1) to "routinely" (4), with higher scores indicating more frequent engagement in health-promoting behaviors.

Data Collection Procedure

After securing permission from the participating college, eligible students were approached and briefed about the purpose and procedures of the study. Informed written consent was obtained from each participant. The questionnaires were distributed in person and completed under the supervision of the researcher to ensure clarity and accuracy. Participants were assured of the confidentiality and anonymity of their responses, and participation was entirely voluntary. Participants were provided with detailed information about the study, and informed written consent was obtained before data collection. Confidentiality of the data was maintained, and participants were informed of their right to withdraw from the study at any time without any consequences.

Data Analysis

The collected data were coded and entered into SPSS (Statistical Package for the Social Sciences) version 26 for analysis. Descriptive statistics such as mean, standard deviation, frequencies, and percentages were used to summarize demographic characteristics, self-efficacy scores, and health-promoting behaviors. To examine the relationship between self-

efficacy and health-promoting lifestyle practices, Pearson’s correlation coefficient was used for normally distributed data; otherwise, Spearman’s rank correlation was applied. A p-value of less than 0.05 was considered statistically significant.

RESULT

Table 1: Frequency and Percentage Distribution of B.Sc. Nursing Students According to Demographic Variables (N = 80)

S. No.	Demographic Variable	Category	Frequency (f)	Percentage (%)
1	Age (in years)	20–21	30	37.5%
		22–23	35	43.8%
		24 and above	15	18.7%
2	Gender	Male	12	15.0%
		Female	68	85.0%
3	Year of Study	3rd Year	40	50.0%
		4th Year	40	50.0%
4	Place of Residence	Urban	44	55.0%
		Rural	36	45.0%
5	Type of Diet	Vegetarian	52	65.0%
		Mixed	28	35.0%
6	Physical Activity (Routine)	Yes	26	32.5%
		No	54	67.5%
7	Health Issues (if any)	Yes	18	22.5%
		No	62	77.5%

Table 2 : Mean and Standard Deviation of Health-Promoting Lifestyle Profile II (HPLP-II) Total and Subdomain Scores Among B.Sc. Nursing Students (N = 80)

Subdomain	Number of Items	Mean (M)	Standard Deviation (SD)
Health Responsibility	9	25.10	3.42
Physical Activity	8	20.65	4.21
Nutrition	9	24.78	3.89
Spiritual Growth	9	28.45	3.67
Interpersonal Relations	9	26.35	3.12
Stress Management	8	22.10	3.88
Total HPLP-II Score	52	147.43	11.26

Table 3: Correlation Between Self-Efficacy and Subdomains of Health-Promoting Lifestyle Profile II Among B.Sc. Nursing Students (N = 80)

Subdomain	Correlation Coefficient (r)	p-value	Interpretation
Health Responsibility	0.42	0.003	Moderate positive correlation
Physical Activity	0.36	0.007	Moderate positive correlation
Nutrition	0.29	0.015	Weak positive correlation
Spiritual Growth	0.48	0.001	Moderate to strong correlation
Interpersonal Relations	0.33	0.010	Moderate positive correlation
Stress Management	0.39	0.004	Moderate positive correlation

Table 4: Comparison of Self-Efficacy and Health-Promoting Lifestyle Scores Based on Selected Demographic Variables (N = 80)

Variable	Category	Self-Efficacy (Mean ± SD)	HPLP-II Score (Mean ± SD)	p-value
Gender	Male	60.25 ± 7.81	144.30 ± 10.45	0.12
	Female	61.60 ± 8.35	148.10 ± 11.80	
Year of Study	3rd Year	59.80 ± 7.95	145.60 ± 11.30	0.09
	4th Year	62.90 ± 8.20	149.20 ± 11.60	
Residence	Urban	61.85 ± 8.10	148.95 ± 11.20	0.18
	Rural	60.70 ± 8.35	146.10 ± 11.50	

DISCUSSION

The present study explored the relationship between self-efficacy and health-promoting lifestyle behaviors (HPLBs) among B.Sc. nursing students. The findings revealed a moderate positive correlation between self-efficacy and overall HPLB scores, supporting the view that students who believe in their ability to make healthy choices are more likely to do so in daily life.

These findings align with Rahayu et al.(2019), who found that higher self-efficacy predicted better behaviors across domains like spiritual growth and stress management.(3) Farokhzadian et al.(2018) also reported that self-efficacy correlated with both health behaviors and academic performance in nursing students.(2) Notably, physical activity and stress management scores were lower in this study—similar to results from YW Mak · 2018, who observed that even students with moderate self-efficacy may struggle with exercise routines.(5) Likewise, Chen et al.(2025)emphasized that self-efficacy mediates the relationship between e-health literacy and behavior change, especially in the digital health context. Multiple international studies reinforce the predictive value of self-efficacy.(4) Zhou Zi-qi(2010) and Hong et al.(2006) found that self-efficacy significantly predicted HPLBs in nursing students, explaining up to 39.4% of the variance in some cases.(6,7)

Psychosocial factors also play a role Jin Ha et al.(2021) and Chung & Doh (2002) found that self-efficacy influences healthy choices even when students experience negative body image or job stress.(8,9) In our study, demographic variables like gender and year of study showed

no statistically significant difference, echoing findings by Doumit et al.(2022).(1) However, some trends suggested higher scores among 4th-year students, likely due to increased clinical exposure, which supports.(10)

Contextual factors also influence self-efficacy. Yoo (2011) found that students living with family had better health behaviors(11), while Davis et al.(2021) highlighted racial and cultural differences in HPLBs.(12) Similarly, Gacek et al. (2023) found a strong association between high self-efficacy and better diet quality in nursing students.(13) Finally, Vayısoğlu & Öncü (2018) showed that self-efficacy can be improved through student-centered learning methods(14), and Yao(1997) emphasized that institutional support and work conditions also affect health promotion behavior.(15)

The study found a positive correlation between self-efficacy and health-promoting lifestyle behaviors among B.Sc. Nursing students. Students with higher self-efficacy engaged more in healthy habits such as nutrition, stress management, and health responsibility. These results underline the need to strengthen self-efficacy during nursing education through supportive teaching, skill-building, and wellness programs. Enhancing self-belief not only benefits students' own health but also equips them to better promote health in their future nursing roles.

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