

ARAŞTIRMA

NURSING STUDENTS' OF AUTONOMY AND SUBMISSIVE BEHAVIOURS: FOUR-YEAR FOLLOW UP*

Leman ŞENTURAN** Selmin KÖSE*** Necmiye SABUNCU****
Fatma ÖZHAN**** Sonay GÖKTAŞ*****

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ABSTRACT

Objective: This longitudinal study aims to examine nursing students' level of autonomy and submissive behaviors, development and changes, and the relationships between them.

Methods: The sample comprised 53 students. Data were collected at the end of each academic year, through "Student Information Form, Submissive Behavior Scale and Sociotropy-Autonomy Sub-Scale". Analysis was performed using rating descriptive statistical methods (percentage, arithmetic mean), Wilcoxon test, Bonferroni, and analysis of variance.

Findings: The participants' mean score in the autonomy scale was 71.58 ± 15.42 in the 1st year and 74.86 ± 17.47 in the 4th year. Mean score for the Submissive Behaviors Scale was $32,27 \pm 7,92$ in the 1st year and $32,07 \pm 8$ in the 4th year. Difference between the 1st year and 4th year mean scores was not significant in both scales ($p > 0.05$).

Conclusion: The results of this study showed that nursing students' submissive behaviors decreased with the increase in their professional knowledge and experience; and their autonomy was found to be positively affected; however, this change was not at the desired level.

Key Words: autonomy; submissive behavior; nursing, student

ÖZET

Hemşirelik Öğrencilerinin Boyun Eğici Davranışları ve Otonomi: Dört Yıllık İzlem

Amaç: Longitudinal olarak yapılan araştırma hemşirelik öğrencilerin otonomi ve boyun eğici davranışlarının düzeylerini, gelişimi ve değişimini ve aralarındaki ilişkiyi incelemek amacıyla yapıldı.

Yöntem: Araştırmanın örneklemini 53 öğrenci oluşturdu. Veriler öğrenci bilgi formu, "Boyun Eğici Davranışlar Ölçeği" ve Sosyotropi-Otonomi Ölçeği'nin "Otonomi" alt ölçeği ile, her öğretim yılının sonunda toplandı. Değerlendirmede dağılım ölçütleri, Wilcoxon Testi, Bonferroni ile Varyans Analizi kullanıldı

Bulgular: Öğrencilerin otonomi ölçeği puan ortalamaları birinci sınıfta $71,58 \pm 15,42$ son sınıfta $74,86 \pm 17,47$; boyun eğici davranışlar ölçeği puan ortalamalarının birinci sınıfta $32,27 \pm 7,92$ son sınıfta $32,07 \pm 8$ olduğu belirlendi. Birinci ve dördüncü sınıf puan ortalamaları arasındaki fark her iki ölçekte de anlamlı değildi ($p > 0.05$).

Sonuçlar: Araştırma sonucunda hemşirelik öğrencilerinin, mesleki bilgi ve deneyimleri geliştikçe boyun eğici davranışlarında bir gerileme oluşmuş ve otonomilerini pozitif olarak etkilendiği ancak bu değişimin istenen düzeyde olmadığı sonucuna varıldı.

Key Words: Otonomi; boyun eğici davranış; hemşirelik; öğrenci

INTRODUCTION

Autonomy is defined as the ability to increase functionality by emphasizing an individual reaching independence and the needs of desired goals together with the ability to protect personal rights and independence. It is one of the primary criteria of most professions (Lewis and Sterling, 2006). Autonomy in nursing has a positive influence for nursing profession, too. In nursing practice, autonomy, being able to give nursing decisions freely, requires authority

and the taking on responsibility (Potter and Perry, 2003; Craven and Hirnle 2008, Karagozoglu and Kangallı 2009). In a sense, it is a concept which also affects the quality of care and job satisfaction. Submissive behavior is defined as denying one's own feelings, needs, and thoughts, and not giving importance to his/her personal rights or allowing others to violate those rights (Metz and Çetinkaya 2005).

Submissive behavior is a set of personality characteristics of observable

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**Assoc. Prof. Biruni University School of Health Sciences, Istanbul. e-posta: lemansenturan@gmail.com

*** Msc. Research Assistant Istanbul Bilim University, School of Health Sciences, Istanbul

**** Prof. Dr. Halic University School of Nursing, Istanbul

**** Msc. Research Assistant Halic University School of Nursing, Istanbul

**** Msc. Assistant Prof. Medipol University School of Health Sciences, Istanbul

behaviors where the individual tries not to disappoint or hurt the feelings of others, tries to please everyone, has difficulty in expressing dissatisfaction with situations or showing anger, needs continuous endorsement, and is unable to express thoughts freely or defend his/her thoughts and rights, etc. (Yıldırım and Ergene 2003; Tekin and Filiz 2008). Submissive behavior in interpersonal relationships means obeying others, which is quite common in Turkish society. This behavior should be respect rather than submissive behavior; however, the two terms have become confused in Turkish social culture. Therefore, as the older members of society want to have respect from the young, children are ruled by parents, and students by teachers; and this is reflected as submissive behavior. Respect is independent from interpersonal relations as individuals are free, independent, creative, and productive. They can think freely, oppose views, change, make changes, and offer alternatives; thus, they act in an autonomous way.

However, individuals who are dominated by submissive behaviors in their interpersonal relationships do as they are told and obey orders. Seeing the self as less valuable and important, the individual is not free, his/her right to speak is limited, and there is no need to be creative or productive (Yıldırım and Ergene 2003). Environmental factors are more dominant in the formation of submissive behaviors and there are various views suggested as to what these environmental factors are. Some have argued that the family environment during childhood determines the individual, others claim that the current social environment has a greater effect (Tekin and Filiz 2008). In addition to parents' being primarily responsible for the acquired submissive behaviors, educators are also responsible for the approach towards students and the form of communication. Teachers' approaches affect whether these behaviors will continue or not.

Nursing is a professional career which requires the application and evaluation of modern scientific research, questioning, decision-making, and primarily effective communication with others. Therefore, a nurse with an undergraduate degree is expected to be just as qualified in leadership and effective communication as in scientific research. According to these expectations, after four years of undergraduate education, graduate students should have developed research skills, critical

thinking, knowing how to access information, having good interpersonal relationships, and being competitive in line with the developments (Küçük, Buzlu and Can 2008; Özkan and Özen 2008). A non-submissive nurse will express her feelings more easily, be able to establish good communication with the patient, provide holistic nursing care, be able to involve both the patient and family in the care plan, and undertake patient advocacy and leadership roles. In other words, a graduate nurse is expected to have autonomy and not to display submissive behaviors.

Therefore, this study aims to explore levels of autonomy and submissive behaviors in nursing students, development and change, and the relationship between them.

METHOD

Design and Population: This longitudinal and correlational study was conducted in the academic years from 2008 to 2012. Initially, all 67 students who were enrolled in the course in 2008 were involved in the study. After exclusion of those who had incomplete or incorrect data forms and those who left the course for any reason, the final sample for evaluation comprised 53 students.

Data Collection: Data were collected through the "Student Information Form", the "Autonomy Sub-scale", and the "Submissive Behavior Scale".

Student Information Form: This form consists of 19 items aiming to obtain information on demographic characteristics, family features and reason for career choice.

Autonomy Sub-Scale: The Sociotropy-Autonomy scale developed by Beck et al. (1983) was adapted to Turkish by Sahin et al (1993) as "The Autonomy Sub-scale" by Savaşır and Şahin (1997). The scale has three sub-dimensions. The autonomy sub-scale is a precondition for personal success, which is defined as the freedom to make decisions independently, independent personality, and the ability to express self-containment and liking solitude. It is composed of 30 items with 5-point likert-type responses. The responses to "How well does this describe you?" questions range from 'not at all' to 'very well'. The highest total score that can be obtained from the scale is 120; with 48 points for personal accomplishment, 48 points for freedom, and 24 points for liking solitude. High scores indicate a high level of autonomy characteristics. In the reliability study conducted by Sahin et al.,

the Cronbach's alpha coefficient was found 0.81. In the current study, the alpha coefficients ranged from 0.85 to 0.89 over the years.

Submissive Behavior Scale : This scale was developed by Gilbert & Allen (1984) with the original name of the Submissive Acts Scale. It was adapted to Turkish by Şahin and Şahin (1992) (Savaşır and Şahin, 1997). The self-administered scale consists of 16 items; each item questions how well it defines the behavior of the individual. The 5-point Likert-type responses of "does not describe," "somewhat describes ", "pretty well describes ", "describes well" and "describes very well" are scored from 1 to 5. The scale scores range from minimum 16 to maximum 80 with no cutoff points. A higher score indicates more submissive behavior. In the study conducted by Savaşır and Sahin (1997) the Cronbach's alpha coefficient was found 0.74. In the present study, the alpha coefficients ranged from 0.74 to 0.82 over the four years.

Forms and scales were administered to the participants at the end of the first academic year and gathered after 20 minutes on the average. The participants were informed how to complete the forms correctly, using symbols or nicknames, and were told that the scale would be applied again at the end of the spring semester of the 2nd, 3rd and 4th years of the course.

Analysis of the Data: Analysis of the data was performed using SPSS 11.0 software. Rating descriptive statistical methods (percentage, arithmetic mean), Wilcoxon symbol test, repeated measures analysis of variance, and Bonferroni Correction were utilized. Statistical significance was taken $p < 0.05$.

Ethical Approach: For ethical considerations, permission was obtained from the relevant institutions prior to the study. Informed verbal consent was received from all the participants. As the study was longitudinal, students' nicknames and symbols were asked, but all precautions were taken so that these would be known only to the researchers.

FINDINGS AND DISCUSSION

Nursing is distinguished from other disciplines by the basic features of a philosophy, a conceptual structure and the advancement of knowledge that allows consideration to a methodological approach (Kahraman, 2008). Improving communication and strengthening the autonomy of the scientific basis of the nursing concept is very important (Bassett, 2004). Science is an entity achieved through methods

and verified with practical information; and questioning is one of the most important steps in the scientific process skills (Warms and Schroeder, 1999). Therefore, nurses who have the ability to question, whose autonomy is high, and who have a low level of submissive behavior play an important role for the development of nursing. The adoption of the concept of autonomy in nursing is not just about taking the right decisions as it is in business; it is also important for science to advance at the same time. Nurses' high autonomy questioning capacity will contribute not only to the learning of new information but also to the questioning of longstanding practices and developments. Therefore, longitudinal studies are of greater importance to achieve this goal.

Of all the participants, 71.7% had attended a regular high school, most of the mothers (45%) had primary school education and fathers (34%) were educated to elementary or high school level. Most of the participants (58.5%) referred to the family income as sufficient (Table 1). The majority reportedly had democratic family (79.2%). In their approach to decision-making, majority of the participants (66%) indicated that they "always consider the ideas of others"

The total mean score in the autonomy scale was 71.58 ± 15.42 in the 1st year, 73.50 ± 16.70 in the 2nd year, 67.18 ± 18.72 in the 3rd year and 74.86 ± 17.47 in the 4th year (Table 2). The participants' autonomy score was found to be low at the initial stage of the nursing education (Table 2). The related literature indicates that autonomy structure can be affected by factors such as gender, age, economic status, family characteristics, and problem-solving situations (Kabakçi, 2001; Kelleci and Gölbaşı, 2004). When analyzed in terms of the factors that have effects on autonomy, most of the students seem to have positive effects on their autonomy as they were from involved and democratic families with features such as considering the ideas of others (Table 1). When evaluated according to submissive behaviors, the mean scores were found to be at a low level (Table 2). The related literature emphasizes that a submissive authoritarian structure flourishes in a family which is dominated by a strictly disciplined repressive attitudes of parents (Cüceloğlu, 2006). In this study, the participants' feeling that they have the right to speak can be explained by their having nuclear and involved families (Table 1).

Table 1: Distribution of Demographic Characteristics of the Participants (n=53)

Demographic Properties		n	%
Schools they Graduated from	Regular Highschool	38	71.7
	Highschool	15	28.3
Mothers' Education Level	Primary School	22	41.5
	Secondary School	10	18.9
	Highschool	15	28.3
Fathers' Education Level	University	6	11.3
	Primary School	18	34.0
	Secondary School	8	15.1
	Highschool	18	34.0
Number of siblings	University	9	17.0
	None	5	9.4
	1 Sibling	14	26.4
	2 siblings	15	28.3
	3 siblings	7	13.2
	4 siblings	7	13.2
Family Type	5 and more	5	9.4
	Nuclear family	46	86.8
Family's income	Extended Family	7	13.2
	Good	22	41.5
Family's Stance	Sufficient	31	58.5
	Excessively involved	16	30.2
Family Structure	Involved	37	69.8
	Authoritarian	11	20.8
Thoughts about Decision-making	Democratic	42	79.2
	Does not consider the ideas of others	14	26.4
	Considers the ideas of others	35	66
	Gives priority to the ideas of others	4	7.5

Table 2. Mean Scores of the Participants on the Autonomy and Submissive Behavior Scale in each year of study

Scale and Sub Dimensions	Min - Max	Year I	Year II	Year III	Year IV	F and P	**	
Autonomy	Personal Success	0-48	30.35±7.63 (6-46)	32.69±8.63 (12-48)	28.96±9.09 (9-47)	32.33±8.35 (14-46)	F=5.050 p=0.004	III<II
	Freedom	0-48	28.11±6.44 (16-41)	28.94±6.81 (15-45)	26.16±7.63 (10-43)	29.43±7.29 (15-46)	F=0.175 p=0.025	IV>III
	Liking Solitude	0-24	13.11±4.84 (2-23)	12.39±4.12 (3-20)	12.05±4.22 (3-21)	13.09±3.84 (3-21)	F=1.775 p=0.164	
	Total	0-120	71.58±15.42 (34-104)	73.50±16.70 (37-112)	67.18±18.72 (25-107)	74.86±17.47 (34-112)	F=3.765 p=0.016	III<II IV>III
Submissive Behavior	16-80	33.22±7.92 (22-56)	39.20±8.29 (23-62)	32.35±7.69 (20-57)	32.07±8 (21-64)	F=0.461 p=0.711		

* Variance Analysis in repetitive measurements, **Edited by Bonferroni

Table 3. Mean Scores of the Participants on the Autonomy and Submissive Behavior Scale in the 1st and 4th years of the course.

Scale and Sub Dimensions		Min-Max	Year I	Year IV	Z and p
Autonomy	Personal Success	0-48	30.35±7.63 (6-46)	32.33±8.35 (14-46)	z= -1.911 p=0.056
	Freedom	0-48	28.11±6.44 (16-41)	29.43±7.29 (15-46)	z= -1.262 p=0.207
	Liking solitude	0-24	13.11±4.84 (2-23)	13.09±3.84 (3-21)	z= 0.093 p=0.926
	Total	0-120	71.58±15.42 (34-104)	74.86±17.47 (34-112)	z= -1.576 p=0.115
Submissive Behavior		16-80	33.22±7.92 (22-56)	32.07±8 (21-64)	z= 1.005 p=0.320

Wilcoxon

Mean scores for the personal success sub-scale of autonomy was 30.35 ± 7.63 in the 1st year and 32.33 ± 8.35 in the 4th year (see Table 3). The freedom sub-scale mean score in the 1st year was 28.11 ± 6.44 and it was 29.43 ± 7.29 in the 4th year. Mean score for liking solitude was 13.11 ± 4.84 in the 1st year, and 13.09 ± 3.84 in the 4th year. The change in the mean submissive behavior scale indicates that the scores decreased from 33.22 ± 7.92 to 32.07 ± 8 . No statistically significant difference was identified in the score changes from 1st to 4th year in either scale ($p > 0.05$). A significant change was seen in the autonomy scale except for the liking sub-scale solitude. In further analysis, the total autonomy mean scores of the 4th year were significantly higher than the 3rd year; and the scores of the 3rd year were found to be significantly lower than those of the 2nd year (see Tables 2 and 3). In relationships without submissive behavior, individuals consider themselves important, and feel free with the right to speak (Yıldırım and Ergene 2003). In the current study, the total autonomy scores of the participants in the 4th year were at a moderate level (74.86 ± 17.47 , Table 2). In comparison to the autonomy scores in other studies conducted with graduate nurses, the results are moderate (Kaya, Aştı, Acaroğlu, Kaya, and Şendir, 2006; Karagözoğlu, 2008). In the professionalization process, there is clearly a need for high autonomy in nurses' complex educational process that provide them with professional status. Critical thinking and judgment are very important in nursing education, and one of the educational goals is to develop students' autonomy (Potter and Perry, 2003; Karagözoğlu, 2009). Students will be expected to act

autonomously from planned maintenance to presentation, and in all nursing practices. In a sense, the attainment in students' education should be reflected in the level of autonomy.

In a longitudinal study, it is expected that the level of autonomy and submissive behaviors of nursing students will develop and change from the initial stages of the education to graduation. However, in the current study, although a change in the total scores of the concepts was determined in both directions, no statistically significant difference was identified in the mean scores between the first and last year of education ($p > 0.05$) (see Table 3). It was found that the autonomy scores increased and the submissive scale mean scores decreased. When the autonomy total and sub-scale changes were examined in detail, means of personal success and freedom sub-scale scores significantly increased from the first year towards the last year ($p < 0.05$). This can be explained as a reflection of self-confidence generated by the increase in professional knowledge. This result indicates that there are effective changes in nursing students but not of a sufficient level.

The related literature indicates that submissive behaviors stemming from environmental factors in the development of processes can be traced to past causes, distant from the current environment. Factors that cannot be changed in the current environment, such as family structure and concepts such as socioeconomic status and gender, can sometimes be dominant and reduce the influence of the learning environment. Concepts that can be changed, such as professional perception, working conditions and factors such as regulating the job description will be effective in reducing submissive behaviors (Tekin ve Filiz

2008). For instance, a study on nursing students has shown that gender is an effective factor in submissive behaviors and that females have a higher level of submissive behaviors than males.

In addition, factors such as majority of nursing students' being female, the probability of educational institution's being in a non-preferred location, low socioeconomic status, low self-esteem and a low level of family education place these individuals in a group at high risk of demonstrating submissive behaviors (Rhodes and McCreary, 2001). Although some modifications in behaviors may be acquired through education, changing social prejudice with education is not easy. (Dönmez and Demirtaş, 2009; Mete and Çetinkaya, 2005). A study conducted by Karagözoğlu, Kahve, Koç, Adamişoğlu (2008), reported that university education alone was insufficient to provide this change and various teaching methods and approaches could be more effective. For instance, in a study conducted by Mete and Çetinkaya (2005) problem-based teaching methods were found to lead to a decrease in submissive behavior in nursing students. Problem-based teaching could also

improve students' questioning ability on the basis of scientific thoughts.

CONCLUSION

Autonomy and submissive behaviors are important concepts in the professional acquisition process. Nursing education is expected to improve students' capability of behaving autonomously and to decrease submissive behaviors. Results of the current study indicate that, mid-level autonomy increased from the start of the nursing education. Again, in the first year, submissive behaviors were below average, and the level remained almost the same in the final year, with a slight decrease in the scores. It can be said that, with the effect of increased professional knowledge and experience, there was a decrease in submissive behaviors and a positive effect on autonomy. The curriculum should include programs that empower autonomic behavior, which would strengthen courses and decrease submissive behavior, and thus enable students to start their professional life from a strong position.

REFERENCES

- Bassett, C.** Nursing care: from theory to practice. London: Whurr Publishers Ltd.; 2004; 57-65.
- Craven RF, Hirnle CJ.** Fundamentals of nursing; human health and function. 6 th.ed. Philadelphia: Wolters Cluwer Health/Lippincott Williams&Wilkins; 2008;p.98-107.
- Cüceloğlu, D.** İnsan ve davranışı, psikolojinin temel kavramları, 15.Baskı, İstanbul: Remzi Kitabevi; 2006.
- Dönmez B, Demirtaş H.** Lise öğretmenlerinin boyun eğici davranışa yönelik algıları. Kastamonu Eğitim Dergisi. 2009; 17(2): 445-56.
- Kabakçı, E.** Üniversite öğrencilerinde sosyotropik/otonomik kişilik özellikleri, yaşam olayları ve depresif belirtiler. Türk Psikiyatri Dergisi. 2001; 12(4):273-82
- Kahraman, S.** Modern ve postmodern düşünceler hemşirelik felefesini etkiledi mi? Cumhuriyet Üniversitesi Hemşirelik Yüksekokulu Dergisi. 2008; 12(2): 56-61.
- Karagözoğlu, Ş.** Level of autonomy of Turkish students in the final year of university baccalaureate degree in health related fields. Nursing Outlook. 2008; 56(2),70-7.
- Karagözoğlu Ş, Kahve E, Koç Ö, Adamişoğlu D.** Self esteem and assertiveness of final year Turkish university students. Nurse Education Today. 2008; 2: 641-9.
- Karagözoğlu Ş, Kangallı P.** Autonomy Levels Among Nurses:Professional-institutional factors that affect autonomy. Türkiye Klinikleri J Med Sci. 2009; 29(5):1085-97.
- Karagözoğlu Ş.** Nursing Students' Level of Autonomy: A study from Turkey. Nurse Education Today. 2009; 2: 176-87.
- Kaya N, Aştı T, Acaroğlu R, Kaya H, Şendir M.** Hemşire öğrencilerin sosyotropik-otonomik kişilik özellikleri ve ilişkili faktörlerin incelenmesi. Cumhuriyet Üniversitesi HemşirelikYüksekokulu Dergisi 2006;10(3):1-11.
- Kelleci M, Gölbaşı Z.** Bir üniversite hastanesinde çalışan hemşirelerin problem çözme becerilerinin bazı değişkenler açısından incelenmesi. Cumhuriyet Üniversitesi Hemşirelik Yüksekokulu Dergisi 2004;8(2):1-8
- Küçük L, Buzlu S, Can G.** Hemşirelik öğrencilerinde bir davranış biçimi olarak atılganlık düzeyi. Ü.F.N. Hem. Derg. 2008; 16(62): 90-6
- Lewis FM, Sterling E.** Autonomy in nursing. Ishikawa Journal of Nursing. 2006; 3:1-5.
- Mete S, Çetinkaya, E.** Probleme dayalı öğrenim modeli'nin hemşire öğrencilerin boyun eğici davranışlarına etkisi. Zonguldak Sağlık Yüksekokulu Sağlık Eğitim Araştırma Dergisi. 2005; 1(3): 49-55.
- Özkan İA, Özen A.** Öğrenci hemşirelerde boyun eğici davranışlar ve benlik saygısı arasındaki ilişki. TSK Koruyucu Hekimlik Bülteni. 2008; 7(1):53-8.
- Potter PA, Perry GA.** Fundamentals of nursing : concepts, process, and practice. 4th ed. Missouri: Mosby; 2003. p.313-24.
- Rhodes N, McCreary D.** On the gender-typed of dominant and submissive acts. Sex Roles. 2001; 44(5/6): 339-50.

Savaşır I, Şahin NH. Bilişsel-Davranışçı Terapilerde Değerlendirme: Sık Kullanılan Ölçekler, Ankara, Türk Psikologlar Derneği Yayınları No:9, Özyurt Matb. 1997: p.32-8.

Tekin M, Filiz M. Beden eğitimi ve spor yüksekokullarının antrenörlük eğitimi ve spor yöneticiliği bölümlerinde öğrenim gören öğrencilerin umutsuzluk ve boyun eğici davranış düzeylerinin çeşitli değişkenlere göre incelenmesi. Spormetre Beden Eğitimi ve Spor Bilimleri Dergisi. 2008; 6(1): 27-37.

Warms CA, Schroeder CA. Bridging the gulf between science and action, the “new fuzzies” of neopragmatism. Advanced Nursing Science. 1999;22(2): 1-10.

Yıldırım İ, Ergene T. Lise Son Sınıf Öğrencilerinin Akademik Başarılarının Yordayıcısı Olarak Sınav Kaygısı, Boyun Eğici Davranışlar ve Sosyal Destek. Hacettepe Üniversitesi Eğitim Fakültesi Dergisi. 2003; 25: 224-34.