ORIGINAL ARTICLE / ORİJİNAL MAKALE

Investigation of The Relation Between Moral Sensitivity of Nursing Students and Occupational Self- Esteem

Hemşirelik Öğrencilerinin Ahlaki Duyarlılıkları ile Mesleki Benlik Saygıları Arasındaki İlişkinin İncelenmesi

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Abstract

Background: Professional self-esteem is a fundamental principle in achieving professional identity in the nursing profession, which inherently centers around human beings. It is believed that professional self-esteem, which begins to develop from the early years of nursing education, plays a significant role in the development of moral sensitivity.

Objective: This study aimed to investigate the association between occupational self-esteem and moral sensitivity among nursing students.

Methods: In this descriptive, correlational study, an introductory qualification data form, the Modified Moral Sensitivity Questionnaire for Student Nurses, and the Occupational Self-Esteem Scale were used. The sample comprised second-, third-, and fourth-year nursing students (n=171) from a foundation university in Istanbul, Turkey. The study included 161 nursing students who agreed to participate. Descriptive statistics, Mann-Whitney U test, One-way ANOVA, Student's t-test, Kruskal-Wallis test, and Pearson and Spearman correlation analyses were used in the data analysis.

Results: The students' average total moral sensitivity score was 5.03±0.58. Significant variation (p=.001) between the genders was observed in the mean scores from the Expertise Knowledge Enrollment subscale, as well as among nurses in their communication of distress with friends (p=.034), in the Interpersonal Orientation subscale among those who voluntarily chose nursing as their field of study (p=.033). The mean total occupational self-esteem score was 116.27±17.72. Significant variation was observed among the scores related to class level (p=.004), taking ethics courses (p=.002), choosing the nursing department voluntarily (p=.001), satisfaction with being a nursing student (p=.001), encountering ethical dilemmas (p=.013), and having knowledge about occupational self-concept (p=.002). A statistically significant and weakly positive correlation (r=.18; p=.021) was found between occupational self-esteem and moral sensitivity.

Conclusion: The study found that nursing students exhibited high levels of moral sensitivity and professional self-esteem. Additionally, a weak positive correlation was identified between moral sensitivity and professional self-esteem. To strengthen this weak relationship, it is recommended to integrate the concepts of professional self-esteem and ethical values into nursing education.

Keywords: Nursing Students, Moral Sensitivity, Occupational Self-Esteem

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Öz

Giriş: Mesleki benlik saygısı, özünde insanın yer aldığı hemşirelik mesleğinde profesyonel kimliğe ulaşmanın temel bir ilkesidir. Hemşirelik eğitiminin ilk yıllarından itibaren şekillenmeye başlayan mesleki benlik saygısının ahlaki duyarlılığın gelişiminde etkili olduğu düşünülmektedir.

Amaç: Bu çalışmanın amacı hemşirelik öğrencilerinde mesleki benlik saygısı ile ahlaki duyarlılık arasındaki ilişkinin incelenmesidir.

Yöntem: Tanımlayıcı ve ilişki arayıcı olan bu çalışmada tanımlayıcı özelliklerin yer aldığı bir veri toplama formu, Öğrenci Hemşireler için Değiştirilmiş Ahlaki Duyarlılık Anketi ve Mesleki Benlik Saygısı Ölçeği kullanılmıştır. Örneklemi İstanbul'daki bir vakıf üniversitesinin ikinci, üçüncü ve dördüncü sınıf hemşirelik öğrencileri (n=171) oluşturmuştur. Araştırmaya, çalışmaya katılmayı kabul eden 161 hemşirelik öğrencisi dahil edilmiştir. Verilerin analizinde tanımlayıcı istatistikler, Mann-Whitney U testi, Tek Yönlü Anova, Student's t-testi, Kruskal-Wallis testi, Pearson ve Spearman korelasyon analizi kullanıldı.

Bulgular: Öğrencilerin ortalama toplam ahlaki duyarlılık puanı 5.03±0.58 olarak saptanmıştır. Uzmanlık Bilgisine Başvurma alt boyutundan alınan puanlar ile cinsiyet (p=.001), hemşire ve arkadaşları ile iletişim kurmakta zorlanma (p=.034) arasında anlamlı farklılık saptanmıştır. Kişilerarası Arası Oryantasyon alt boyutundan alınan puanlar ile hemşirelik bölümünü gönüllü olarak seçenler arasında anlamlı fark gözlemlenmiştir (p=.033). Ortalama toplam mesleki benlik saygısı puanı 116.27±17.72 olarak saptanmış olup ölçek puanı ile sınıf düzeyi (p=.004), etik dersi alma (p=.002), hemşirelik bölümünü isteyerek seçme (p=.001), hemşirelik öğrencisi olmaktan memnun olma (p=.001), etik ikilemlerle karşılaşma (p=.013) ve mesleki benlik kavramı bilgisine sahip olma (p=.002) puanları arasında anlamlı farklılık görülmüştür. Mesleki benlik saygısı ile ahlaki duyarlılık arasında istatistiksel olarak anlamlı ve pozitif yönde zayıf bir ilişki (r=.18; p=.021) bulunmuştur.

Sonuç: Araştırma sonucunda hemşirelik öğrencilerinin ahlaki duyarlılıkları ve mesleki benlik saygıları yüksek düzeyde bulundu. Ayrıca ahlaki duyarlılık ile mesleki benlik saygısı arasında pozitif yönlü zayıf bir ilişki olduğu saptandı. Bu zayıf ilişkiyi güçlendirmek adına hemşirelik eğitiminde mesleki benlik saygısı ve etik değerler kavramlarının bütünleştirilmesi önerilmektedir.

Anahtar Kelimeler: Hemşirelik Öğrencileri, Ahlaki Duyarlılık, Mesleki Benlik Saygısı

INTRODUCTION

The nursing profession assumes the responsibility of nursing and caring for infirm individuals (Arkan, Ordin & Haney, 2019; Gürdogan, Aksoy & Kınıc, 2018). While fulfilling their roles, nurses make decisions and take actions aimed at protecting, rehabilitating, and enhancing the health of individuals. Additionally, they encounter numerous ethical issues and potential dilemmas (Gürdogan et al., 2018), such as disclosing diagnoses to patients and their families, withholding information about treatments, fulfilling doctors' orders, conducting unauthorized research on patients, and dealing with staff and equipment shortages (Gül, Duru, Kahraman, Devrez & Örnek, 2013).

Scientific and technological advancements, coupled with global changes, have led to the formation of complex healthcare systems (Borhani, Abbaszadeh, Mohamadi, Ghasemi & Hoseinabad-Farahani, 2017). Consequently, strong ethical and moral sensitivity is essential for healthcare professionals (Yeom, Ahn & Kim, 2017). Morality involves conscious judgment and decision-making concerning issues of good or bad, right or wrong, justice or injustice, and acting in accordance with these judgments. Moral sensitivity is the ability to recognize one's role and responsibilities when faced with ethical dilemmas, paying attention to moral values. Nurses should make decisions based on ethical principles and be sensitive to ethical problems (Kim & Park, 2019). Moral sensitivity and ethical decision-making are not inherent traits and must be acquired and reinforced through continuous education and training (Baykara, Gündüz & Eyüboğlu, 2019; Kim & Park, 2019;

Özgönül, Kırca, Karaçar & Bademli, 2021). Nursing students need educational programs that equip them with the skills to handle ethical dilemmas and raise their awareness of their beliefs and ethical values so that they can develop professional moral sensitivity (Arkan et al., 2019; Baykara et al., 2019; Özgönül et al., 2021).

The congruence of a job with one's personality enhances success, personal development, and productivity (Kılıc, 2018; Varol, Bakan & Arlı, 2020). Self-esteem reflects an individual's sense of self-worth (Kılıc, 2018). Occupational self-esteem, on the other hand, is the value judgment that individuals form about their chosen professions. The concept of self-esteem in nursing is shaped by nurses' thoughts and feelings about themselves as nurses, as well as by nursing education, including in graduate school, and experiences gained from interactions with colleagues (Cöplü & Tekinsoy Kartın, 2019). In healthcare systems that are both developed and complex, nurses need ethical decision-making skills (Iacobucci, Daly, Lindell & Griffin, 2013). Nursing education is crucial for developing moral sensitivity and occupational self-concept. Therefore, nurse educators must be aware of nursing students' moral sensitivity (Özgönül et al., 2021).

This study aimed to investigate the factors affecting the moral sensitivity of nursing students and to determine the association between moral sensitivity and occupational self-esteem. The study sought answers to the following questions:

• What is the level of moral sensitivity among nursing students?

• What is the level of professional self-esteem among nursing students?

• What variables affect the moral sensitivity

and professional self-esteem levels of nursing students?

• Is there a relationship between the moral sensitivity and professional self-esteem levels of nursing students?

METHOD

The Type of the Research

This study aimed to investigate the association between occupational self-esteem and moral sensitivity among nursing students.

The Place of the Research

This study was conducted between October 1, 2021, and January 31, 2022, at the nursing department of a foundation university in Istanbul province, Turkey. The study was a descriptive, correlational investigation aimed at examining the relationship between occupational self-esteem and moral sensitivity among nursing students.

The Universe/Sample of the Research

No sampling was conducted in the study; it aimed to reach all 171 nursing students who had completed the History and Philosophy of Nursing course, in which the fundamental concepts of nursing are taught. During the period of the study, first-year nursing students who had not yet completed the History and Philosophy of Nursing course were excluded from the sample, and the study was conducted with 2nd, 3rd, and 4th-year nursing students. Data were collected through online surveys from 161 nursing students who voluntarily agreed to participate and met the inclusion criteria. Written and verbal informed consent was obtained from all students included in the sample.

Inclusion criteria

Having previously completed the History and Philosophy of Nursing course and being willing

to participate in the research.

Data Collection Instrument-Validity and reliability information

Data collection was conducted online under the researcher's supervision. Participants were asked to complete a questionnaire after providing written informed consent.

Data collection was facilitated by a student-specific form for general characteristics, the Modified Moral Sensitivity Questionnaire for Student Nurses (MMSQSN), and the Occupational Self-Esteem Scale (OSES). The student-specific general characteristics form consisted of eight items designed by the researchers based on the existing literature (Akca, Simsek, Arslan, Senturk, & Akca, 2017; Aykan, Fidancı, & Yıldız, 2019; Bekar, Şener, Yılmaz, Cangür, 2017; Comrie, 2012; Ergin, Koçak Uyaroğlu & Altınel, 2022; Tuvesson & Lützén, 2017). The study examined various factors, including age, gender, class level, enrollment in an ethics course for nursing, voluntary selection of the nursing department, satisfaction with being a nursing student, direct experience with ethical dilemmas in clinical settings and patient care, as well as awareness of occupational self-esteem.

The MMSQSN, adapted from Lützen's Moral Sensitivity Questionnaire (2010), was developed by Comrie in 2012 to assess the ethical sensitivity of student nurses (Comrie, 2012; Lützén, Blom, Ewalds-Kvist & Winch, 2010). The validity and reliability of the instrument were confirmed by Yılmaz et al. (2015). (Yılmaz, İyigun, & Acikel, 2015). The questionnaire uses a 30-item, 7-point Likert scale, with scores ranging from 1 point for "totally disagree" to 7 points for "totally agree." Higher scores indicate higher ethical sensitivity, whereas lower scores suggest lower sensitivity. The total score can range from 30 to 210. Mean

scores are classified as 7-5.9 (very important), 5.8-5 (important), 4.9-3.1 (neutral), and below 3.1 (unimportant). The scale includes subscales such as interpersonal orientation, modified autonomy, humanitarianism, moral sensitivity formation, experience with ethical dilemmas, and expertise knowledge enrollment. While the original scale developed by Comrie has a Cronbach's alpha value of .64, the version validated by Yılmaz et al. (2015) has a value of .73. In this study, the Cronbach's alpha value of the scale was found to be .83.

Arıcak's OSES scale, developed in 1999, is used to evaluate the occupational self-esteem of individuals over 17 years old who have chosen a profession and are receiving vocational education in a field. The scale consists of 16 negative and 14 positive statements, making a total of 30 statements. It employs a 5-point Likert-type scale, where positive statements are scored from 1 point ("strongly disagree") to 5 points ("strongly agree"); the scoring for negative statements is done in a reverse manner. The lowest possible score on the scale is 30, while the highest is 150. The Cronbach's alpha reliability coefficient for the scale was calculated as .93, and the test-retest reliability coefficient was .90 (Arıcak, 1999). In this study, the Cronbach's alpha value of the scale was found to be .94.

Evaluation of the Data

Statistical analyses were conducted using NCSS (Number Cruncher Statistical System) 2007 software (Kaysville, Utah, USA). The study data were assessed using descriptive statistical constructs, including mean, standard deviation, median, interquartile range, frequency, percentage, minimum, and maximum. The Shapiro-Wilk test and graphical methods were used to examine the normality of the distribution of quantitative data. For comparing

two groups with quantitative variables that followed a normal distribution, the independent t-test was employed; the Mann-Whitney U test was used for comparisons between two groups where the quantitative variables did not exhibit a normal distribution. One-way analysis of variance and pairwise comparisons with Bonferroni correction were used for multi-group comparisons of quantitative variables showing normal distribution. The Kruskal-Wallis test and Dunn-Bonferroni tests were used for multi-group comparisons where quantitative variables did not exhibit a normal distribution. Pearson and Spearman correlation analysis was employed to evaluate relationships among quantitative variables. Statistical significance was accepted at $p < .05$.

Variables of the Research

Dependent variables: Moral Sensitivity Questionnaire score and Occupational Self-Esteem Scale score.

Independent variables: Sociodemographic and descriptive characteristics.

Ethical Aspect of the Research

Ethics committee approval and institutional approval were obtained for the research (E-54022451, dated 29.09.2021). Participants were informed that their identity and participation details would be kept confidential and that they could withdraw from the study at any time. Participant information was kept anonymous. Permission was obtained from the authors for the scales used in the research.

RESULTS

The sociodemographic and descriptive characteristics of the nursing students who participated in the study are summarized in Table 1.

Table 1. Sociodemographic and General Characteristics of Participating Nursing Students (n=161)		
Variables	**n**	**%**
Sex		
Women	149	92.5
Man	12	7.5
Educational level		
2nd year	59	36.6
3nd year	52	32.3
4nd year	50	31.1
Enrolled in nursing ethics course		
Yes	102	63.4
No	59	36.6
Self-perception of voluntary entry into nursing profession		
Yes	134	83.2
No	27	16.8
Satisfied as a nursing student		
Yes	145	90.1
No	16	9.9
First-hand experience with ethical dilemma in clinical practice or patient care		
Yes	89	55.3
No	72	44.7
Knowledge about occupational self-esteem		
Yes	110	68.3
No	1	0.6
Partial	50	31.1
Difficulty communicating with nurses and friends		
No	130	80.7
Partially	31	19.3

The participants' scores on the MMSQSN scale ranged from 1.8 to 6.4, with a mean of 5.03 ± 0.58, total OSES scores ranged between 72 and 150, with a mean of 116.27 ± 17.72 (Table 2).

Table 2. MMSQSN and OSES Scores (n=161)

		Mean ±SD	Median	Min	Max
MMSQSN	**Interpersonal Orientation**	5.83±0.85	6	1	7
	Experience with Ethical Dilemmas	3.33±1.14	3.3	1	7
	Humanitarianism	4.64±0.73	4.6	1.5	7
	Moral Sensitivity Formation	5.25±0.71	5.3	2.3	7
	Modified Autonomy	4.93±0.76	5	2.4	7
	Expertise Knowledge Enrollment	5.54±0.97	5.7	1	7
	MMSQSN Total	5.03±0.58	5.1	1.8	6.4
	OSES Total	116.27±17.72	117	72	150

MMSQSN: Modified Moral Sensitivity Questionnaire for Student Nurses, OSES: Occupational Self-Esteem Scale,
SD: Standard deviation, Min: Minimum, Max: Maximum

In terms of sex, the MMSQSN scores for women on the Expert Knowledge Enrollment subscale were significantly higher ($p=.001$; $p<.01$). For those who voluntarily chose the nursing profession, scores on the Interpersonal Orientation subscale of the MMSQSN scale were also higher ($p=.033$; $p<.05$). Additionally, individuals who reported no difficulty in interacting with nurses and peers had higher scores on the Expert Knowledge Enrollment subscale of the MMSQSN scale ($p=.034$; $p<.05$). While scores from the MMSQSN subscale and overall scale did not show statistically significant variation based on class levels ($p>.05$), significant variation was observed among the total OSES scores ($p=.003$; $p<.01$). Pairwise comparisons to determine the source of this variation revealed that the scores of second-year students were significantly lower than those of third-year students ($p=.007$; $p<.01$) (Table 3).

According to whether participants had taken an ethics course in nursing, while MMSQSN subscale scores and overall scale scores did not vary significantly ($p>.05$), the mean OSES score of those who had taken an ethics course was significantly higher than that of those who had not taken an ethics course ($p=.002$; $p<.01$). For those who voluntarily chose the nursing profession, their scores on the Interpersonal Orientation subscale and total OSES scores were statistically significantly higher than those who perceived their paths to the nursing field as involuntary ($p=.033$; $p<.05$, $p=.001$; $p<.01$). Regarding satisfaction with being a nursing student, while the scores obtained on the overall scale and subscales of the MMSQSN did vary significantly ($p>.05$), the total OSES scores were significantly higher for those who were satisfied with being nursing students compared with those who were dissatisfied ($p=.001$; $p<.01$) (Table 3).

In clinical practice lessons, no significant variation was observed among the scores obtained on the MMSQSN subscales or overall scale when participants encountered ethical dilemmas ($p>.05$). However, the total OSES scores for those who faced ethical dilemmas in clinical practice were statistically higher than those of students who did not encounter such dilemmas ($p=.013$; $p<.05$). In terms of having knowledge about occupational self-concept, the scores obtained on the MMSQSN subscales and overall scale were not statistically significant ($p>.05$). Yet, the total OSES scores of those with knowledge about occupational self-concept were significantly higher than those with partial knowledge ($p=.002$; $p<.01$). The Expert Knowledge Enrollment subscale scores on the MMSQSN were statistically higher for those who had no difficulty interacting with nurses and friends compared with those who did have such

difficulties (p=.034; p<.05). Among the scores on the other MMSQSN subscales, the overall scale, and total OSES scores, no significant difference was detected (p>.05) (Table 3).

Table 3. Analysis of the relationship between students' sociodemographic and descriptive characteristics and their MMSQSN and OSES Scores (n=161)

Variables	n	%	MMSQSN Total Mean±SD	Interpersonal Orientation Mean±SD	Ethical dilemma experiencing Mean±SD	Humanitarianism Mean±SD	Forming moral sensitivity Mean±SD	Modified autonomy Mean±SD	Expert Knowledge Enrollment Mean±SD	OSES Total Mean±SD
Sex										
Women	149	92.5	5.04±0.58	5.86±0.83	3.29±1.14	4.65±0.74	5.27±0.71	4.92±0.77	5.61±0.95	117.07±17.34
Men	12	7.5	4.86±0.57	5.48±0.97	3.86±1.15	4.5±0.57	4.97±0.73	5.03±0.53	4.67±0.83	106.42±20.19
p-value			ᵃ.314	ᵃ.123	ᵃ.113	ᵃ.433	ᵃ.222	ᵃ.642	**ᵃ.001****	ᵃ.068
Educational level										
2ⁿᵈ year	59	36.6	5.04±0.52	5.82±0.83	3.28±1.12	4.60±0.73	5.25±0.73	5.01±0.68	5.55±0.95	110.59±18.2
3ⁿᵈ year	52	32.3	5.13±0.45	6.06±0.62	3.26±1.14	4.74±0.66	5.41±0.65	4.92±0.65	5.75±0.88	121.48±18.61
4ⁿᵈ year	50	31.1	4.91±0.73	5.61±1.01	3.45±1.18	4.58±0.80	5.07±0.73	4.85±0.93	5.30±1.05	116.27±17.72
p-value			ᶜ.187	ᶜ.064	ᵇ.652	ᵇ.491	ᵇ.058	ᵇ.566	ᶜ.116	**ᵇ.004****
Enrolled in nursing ethics course										
Yes	102	63.4	5.02±0.61	5.84±0.86	3.36±1.16	4.66±0.73	5.25±0.71	4.89±0.8	5.53±0.99	119.56±16.61
No	59	36.6	5.04±0.52	5.82±0.83	3.28±1.12	4.60±0.73	5.25±0.73	5.01±0.68	5.55±0.95	110.59±18.28
p-value			ᵃ.899	ᵃ.896	ᵈ.695	ᵈ.595	ᵈ.976	ᵈ.332	ᵃ.952	**ᵃ.002****
Self-perception of voluntary entry into nursing profession										
Yes	134	83.2	5.00±0.56	5.79±0.82	3.29±1.13	4.60±0.71	5.24±0.72	4.89±0.75	5.53±0.97	119.52±16.17
No	27	16.8	5.16±0.65	6.03±0.95	3.51±1.20	4.79±0.85	5.27±0.72	5.12±0.80	5.54±1.00	100.15±16.44
p-value			ᵃ.056	**ᵃ.033***	ᵈ.380	ᵈ.227	ᵈ.841	ᵈ.158	ᵃ.993	**ᵈ.001****
Satisfied as a nursing student										
Yes	145	90.1	5.02±0.58	5.84±0.85	3.32±1.15	4.62±0.73	5.24±0.7	4.92±0.78	5.53±0.96	118.97±16.25
No	16	9.9	5.07±0.56	5.77±0.82	3.44±1.06	4.77±0.72	5.3±0.89	5.03±0.51	5.6±1.09	91.81±10.28
p-value			ᵃ.682	ᵃ.711	ᵈ.691	.457	.744	ᵈ.470	ᵃ.651	**ᵈ.001****
First-hand experience with ethical dilemma in clinical practice or patient care										
Yes	89	55.3	5.06±0.61	5.85±0.87	3.46±1.18	4.65±0.77	5.29±0.72	4.97±0.75	5.57±0.97	119.39±16.10
No	72	44.7	4.98±0.54	5.82±0.83	3.16±1.09	4.62±0.69	5.19±0.71	4.88±0.76	5.5±0.97	112.42±18.95
p-value			ᵃ.299	ᵃ.713	ᵈ.095	ᵈ.824	ᵈ.368	ᵈ.454	ᵃ.632	**ᵈ.013***
Knowledge about occupational self-esteem										
Yes	110	68.3	5.02±0.59	5.83±0.87	3.27±1.19	4.62±0.74	5.25±0.71	4.95±0.75	5.51±1.00	119.22±17.23
Partial	51	31.7	5.03±0.57	5.84±0.82	3.43±1.03	4.66±0.74	5.23±0.73	4.90±0.79	5.58±0.91	110.16±17.34
p-value			ᵃ.768	ᵃ.953	ᵈ.431	ᵈ.738	ᵈ.849	ᵈ.694	ᵃ.797	**ᵈ.002****
Difficulty communicating with nurses and friends										
No	130	80.7	5.03±0.60	5.82±0.86	3.28±1.17	4.58±0.73	5.27±0.73	4.96±0.76	5.60±0.99	116.78±17.62
Partial	31	19.3	5.03±0.51	5.89±0.80	3.52±1.00	4.86±0.70	5.15±0.66	4.81±0.72	5.28±0.83	114.13±18.26
p-value			ᵃ.973	ᵃ.817	ᵈ.312	ᵈ.054	ᵈ.382	ᵈ.312	**ᵃ.034***	ᵈ.455

A statistically significant negative correlation was observed between scores on the *Experience with Ethical Dilemmas* subscale and total OSES scores (r=-.21; p=.007; p<.01). MMSQSN scale total scores (r=.18; p=.021; p<.05) and *Interpersonal Orientation* (r=.20; p=.008; p<.01), *Moral Sensitivity Formation* (r=.15; p=.049; p<.05), *Expertise Knowledge Enrollment* (r=.23; p=.003; p<.01) and OSES, a weak but statistically significant positive correlation was found (Table 4).

Table 4. MMSQSN of Scores with OSES of scores of the relationship between (n=161)

		OSES Total	
		r	p
MMSQSN	Interpersonal Orientation	.20†	.008**
	Experience with Ethical Dilemmas	-.21‡	.007**
	Humanitarianism	-.02‡	.749
	Moral Sensitivity Formation	.15‡	.049*
	Modified Autonomy	.10‡	.189
	Expertise Knowledge Enrollment	.23†	.003**
	MMSQSN Total	.18†	.021*

MMSQSN: Modified Moral Sensitivity Questionnaire for Student Nurses, OSES: Occupational Self-Esteem Scale;

‡ Pearson coefficient of correlation, †Spearman coefficient of correlation, *p<.05 **p<.01

DISCUSSION

Since no existing study has explored the relationship between moral sensitivity and occupational self-esteem, this study aimed to examine the correlation between the moral sensitivities and occupational self-esteem of nursing students, as well as the factors that influence them.

In this study, the MMSQSN scores ranged from 1.8 to 6.4, with a mean score of 5.03±0.58. According to the MMSQSN scale, which is categorized from very important to unimportant in a Likert-like fashion, the moral sensitivities of nursing students were considerable. In a study conducted by Ergin et al. (2022), the mean scale score was calculated as 5.18±0.48, indicating that the moral sensitivity level of nursing students was significant. In studies by Dalcalı and Şendir (2016) and Gürdogan et al. (2018), the moral sensitivities of nursing students were found to be high. In contrast, in studies by Basar and Çilingir (2019), Borhani et al. (2017) and Tazegün and Çelebi (2016), the moral sensitivity levels were determined to be mediocre. Yet, in studies conducted by Aykan et al. (2019) and Kızılırmak and Calpbinici (2018), the scores of nursing students were neutral. This difference may be related to the students' participation in ethics courses and their education on values.

In the present study, no significant association was found among the scores, and 55.3% of nursing students had experienced ethical dilemmas; however, their ethical sensitivity levels were not affected. In the study by Gürdogan et al. (2018), there was also no statistically significant relationship between nursing students' moral sensitivities and their experiences with ethical dilemmas. Moral sensitivity levels were found to be high among female nursing students, among those who voluntarily chose the nursing

profession, and among those who had no difficulty communicating with peers. According to Gilligan's moral development theory, women and men tend to think differently about moral judgments. Society attributes certain values to women, which lead them to prioritize protecting their families and environments, caring for them, and taking ownership and responsibility as the basis of their moral sensibilities (Baykara et al., 2019). In the present study, the MMSQSN and Expert Knowledge Enrollment subscale scores for female students were significantly higher than for male students. In Ergin et al.'s (2022) study, male students' mean scores on the moral sensitivity questionnaire and the Expert Knowledge Enrollment subscale were lower than those of female students. Moreover, in studies by Aykan et al. (2019), the mean scores for the Interpersonal Orientation subscale of the moral sensitivity scale were higher among female participants. Similarly, in studies by Baykara et al. (2019), Tuvesson and Lutzen (2017) the moral sensitivity level of female nursing students was higher. However, in Aydogan and Ceyhan's (2019) study, this level was high among female healthcare providers. These findings are consistent with findings reported in the literature.

In the present study, 83.2% of students voluntarily chose the nursing profession. These students' MMSQSN Interpersonal Orientation subscale scores were higher than those of students who had a self-reported involuntary route to the field of nursing. The Interpersonal Orientation subscale addresses the concept of helpfulness. Students who chose the nursing profession voluntarily may have a stronger desire to help others, which could have influenced the significance of the results. Similarly, Ergin et al. (2022) observed higher total MMSQSN scores among students who voluntarily chose the nursing profession

and were satisfied with studying nursing. In the study by Akca et al. (2017), students who voluntarily chose the nursing field had higher moral sensitivity, and in the study by Baykara et al. (2019), students who voluntarily chose the nursing profession and ranked it first had higher moral sensitivity. Other studies have found high moral sensitivity scores among students who voluntarily chose the nursing profession (Caner et al., 2019; Dogan, Tarhan & Kürklü, 2019) as well as those who enjoy their occupations (Akca et al., 2017; Kahriman & Calık, 2017).

In the study, it was observed that those who did not have difficulty in communicating had higher scores in the sub-dimension of resorting to expert knowledge enrollment. Bilgic (2022) observed the moral sensitivity and mercifulness of nursing students, calling to attention the high moral sensitivity of students who easily communicate with people. It is believed that this is due to the nature of nursing as a profession involving close human interactions; as the level of communication established with the community increases, so do individual values.

Occupational self-esteem reflects the importance an individual attributes to the occupational values required for success throughout his or her working life. It involves an individual's recognition of the knowledge, skills, and behaviors needed for satisfactory job performance (Tabassum, Asghar-Ali & Bibi, 2011). The nursing profession, deeply rooted in humanistic values, places great emphasis on occupational self-esteem, which in turn plays a significant role in shaping these values (Uslusoy, Gürdogan & Kurt, 2016). The mean score of nursing students on the OSES in this study was 116.27±17.72, which suggests a high level of occupational self-esteem. This mean score is consistent with findings from studies by Bekar et al. (2017) with 114.72±17.32, Kılıc

(2018) with 113.14±20.41, Uslusoy et al. (2016) with 103.97±17.1, and Varol et al. (2020) with 110±18.5.

Occupational self-esteem scores in this study did not vary by gender. In contrast, there are also study findings in the literature indicating that female nursing students have higher professional self-esteem (Karatepe, Kuşcu, Karaman & Yüce, 2019; Kılıç, 2018). It is also stated in the literature that female pre-service teachers have higher professional self-esteem scores (Demir, Gürsoy & Ada, 2011; Harmankaya, 2018; Uslu, 2015), found higher occupational self-esteem scores among female teacher candidates. In another study involving teachers, male teachers had higher professional self-esteem scores than female teachers (Yıldırım, Kırımoğlu & Cokluk, 2012). In addition, studies reporting that male nursing students have higher professional self-esteem were also found in the literature. Also, in studies by Kahraman and Kılıc (2021) and Özdelikara et al. (2018), male students had higher occupational self-esteem. The fact that there was no difference between the occupational self-esteem scores between the genders in the study may be related to the fact that male students feel professional respect similar to the opposite sex as a result of the increase in the number of male nurses entering the profession, the acceptance of male nurses by the society and the increase in respect for the profession among men.

Occupational self-esteem is related to the value that an individual assigns to their profession and the satisfaction derived from the job he or she performs. This condition influences occupational attitudes. Consequently, voluntarily choosing a profession is associated with performing the job with enthusiasm and having higher occupational self-esteem. In this study, the mean occupational self-esteem scores of those who voluntarily

chose the occupation and were satisfied with being a nursing student were higher than the scores of those without these characteristics. Similarly, Uslusoy et al. (2016) revealed high occupational self-esteem among nurses who voluntarily chose the nursing profession. Studies conducted among different occupational groups have also found that occupational self-esteem is higher among those who voluntarily choose their professions (Ciftci, 2020; Demir et al., 2011). Additionally, those satisfied with being nursing students had higher occupational self-esteem. Kahraman and Kılıç's (2021) study indicated that nursing students who were satisfied with their school life had higher occupational self-esteem. The findings of the study are similar to the literature. In line with this result, it can be thought that choosing the profession willingly is a factor in increasing professional self-esteem by increasing commitment to the profession.

Total OSES scores were lower among second-year students. It has been suggested that occupational self-esteem decreases as the class (year) level increases (Acharya Pandey & Chalise, 2015; Demir et al., 2011). In contrast, Özdelikara et al. (2018) observed relatively high occupational self-esteem among fourth-year nursing students. Cakır and Buldukoğlu (2020), as well as Sarıkoç and Kaplan (2017), have shown relatively low occupational self-esteem levels in academic year levels other than the first year. These results suggest that acquired occupational experience may influence students' occupational self-esteem over time. However, the present study's findings, which diverge from the existing literature, could be attributed to the unique circumstances faced by second-year students during the COVID-19 pandemic, such as online theoretical classes and challenges in nursing education.

OSES means were higher for students with

knowledge about occupational self-concept, those who have experienced ethical dilemmas, and those who have taken ethics courses. The study sample comprised second-, third-, and fourth-year nursing students. At the institution where the research was conducted, 63.4% of the third-year nursing students had taken ethics courses. Accordingly, it is believed that students who have taken ethics courses are better equipped to discuss topics covered in the nursing ethics curriculum, such as ethical dilemmas, ethical decision-making, nursing values, nursing ethical principles, and ethical codes. As a result, their perceptions of occupational self-esteem are likely higher.

A weak but statistically significant positive relationship was found between the nursing students' total MMSQSN scores and total OSES scores. It is stated that moral sensitivity affects professionalism attitudes (Baykara et al., 2019) In addition, a weak and non-significant correlation was found in the literature between confidence level and self-esteem in ethical decision making (Iacobucci et al., 2013). Occupational self-esteem reflects the importance attributed to occupational values. In this study investigating the relationship between moral sensitivity and occupational values among nursing students, it was found that placing greater emphasis on occupational values resulted in heightened moral sensitivity.

Limitations

The limitations of the study are that the research was conducted in a single center and first-year nursing students were not included in the sample group.

IMPLICATIONS FOR PRACTICE

This study revealed a subtle positive correlation between the moral sensitivities of nursing students and their occupational self-esteem.

As such, it is recommended that, beginning in the first year, the teaching of occupational self-esteem and occupational values should be incorporated alongside topics like nursing philosophy, occupational autonomy, and occupational and ethical value concepts. Positive occupational self-esteem is thought to influence the development of a favorable occupational attitude and image, as well as ethical decision-making and moral sensitivity. This educational approach is anticipated to foster moral sensitivity among nursing students.

Information

The authors declare no potential conflicts of interest with respect to the contributing research, authorship, and publication of this article. Conception: BD, YK, Design: BD, YK, Data Collection and/or Processing: BD, YK, Analysis and/or Interpretation: BD, YK, Literature Review: BD, YK, TA, Writer: BD, YK, Critical Review: BD, YK, TA

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