

Self Confidence and Resilience Among Emergency Nurses

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Abstract

Background: Emergency nurses in earthquake prone regions require psychological resources to maintain resilience, manage occupational stress, and deliver effective care during disasters. Self confidence may contribute to their ability to adapt to challenging clinical situations. **Objectives:** This study examined the association between self confidence and resilience among emergency department nurses at Sayang Regional General Hospital, Cianjur Regency, Indonesia. **Methods:** A quantitative cross sectional study involved 50 emergency department nurses recruited through total sampling. Self confidence and resilience were assessed using structured questionnaires. Associations were examined using the Chi square test, with odds ratios (OR) and 95% confidence intervals (CI) calculated to estimate association strength. **Results:** High self confidence was reported by 34 nurses (68.0%), while 35 nurses (70.0%) demonstrated high resilience. Statistical analysis revealed a significant association between self confidence and resilience ($p = 0.005$; OR = 6.00; 95% CI: 1.60–22.55), indicating greater odds of high resilience among nurses with high self confidence. **Conclusion:** Self confidence was significantly associated with resilience among emergency nurses. Integrating psychological capacity building into hospital disaster preparedness programs may strengthen nurses' adaptive capabilities and support emergency care readiness.

Keywords: Disaster nursing; Emergency nurses; Resilience; Self confidence.

Introduction

Indonesia is exposed to recurrent geologic hazards, including earthquakes, because of its tectonic setting. National disaster records from the Indonesian disaster management authority distinguish earthquake events from the broader category of all disasters, and this distinction is important when describing risk to health services¹. In earthquake prone settings, emergency department nurses may be required to make rapid clinical decisions while managing uncertainty, workload escalation, and psychological pressure.

Disaster readiness is not determined solely by technical knowledge. Research among

hospital nurses in Indonesia has linked perceived capability with disaster preparedness, while recent studies in emergency and intensive care settings show that confidence in disaster response is related to professional experience, training, and preparedness related competence^{2,3}. Psychological resilience is also relevant because it reflects the capacity to adapt and maintain functioning during demanding circumstances, including disaster response⁴.

Evidence published in Healthy Tadulako Journal provides additional context for these constructs. Arifuddin et al demonstrated the importance of valid measurement of attitudes

toward earthquake disaster preparedness, emphasizing that preparedness related psychological constructs require careful assessment⁵. Herman et al highlighted the value of integrating policy, mitigation, and institutional preparedness within resilient organizational environments⁶. Wahidah et al showed that adaptive psychological resources are meaningfully related to resilience in a clinical population, supporting the broader relevance of positive self appraisal to adaptive functioning⁷.

Among nurses, self confidence may support focused decision making, persistence, and emotional control when clinical conditions change rapidly. Studies of nurses have reported associations between self efficacy related constructs and resilience, work engagement, and disaster readiness^{8,9,10}. However, evidence specifically examining self confidence and resilience among emergency department nurses in an earthquake prone Indonesian setting remains limited.

Cianjur Regency has experienced major earthquake impacts and its emergency health services operate in a context where disaster readiness is practically important. The present study therefore asked whether self confidence was associated with resilience among emergency department nurses at Sayang Regional General Hospital. The objective was to quantify this association without treating disaster preparedness as a measured outcome.

Materials and Methods

Study Design

This study used a quantitative cross sectional design to examine the association between self confidence and resilience among emergency department nurses at Sayang Regional General Hospital in Cianjur Regency. Data collection was conducted in March 2026. The design was selected because exposure and outcome categories were assessed at the same observation period, and the analysis was

intended to estimate association rather than causation.

Sample

The target population consisted of nurses assigned to the Emergency Department of Sayang Regional General Hospital. Total sampling was used because the accessible population comprised 50 nurses. Eligibility required active assignment in the Emergency Department during the data collection period and willingness to participate through written informed consent. All 50 eligible nurses completed the study questionnaire and were included in the analysis.

Data Collection Technique

Data were collected using a self administered structured questionnaire after participants received an explanation of the study purpose and completion procedure. Resilience was assessed using the Indonesian disaster context adaptation of the Connor Davidson Resilience Scale. The validation study retained 20 items with a satisfactory multidimensional model, Cronbach alpha of 0.952, and McDonald omega of 0.955¹¹. Higher scores represent greater resilience. The present study retained the low and high categorical classification prespecified in the study scoring sheet used during data collection.

Self confidence was measured using a 33 item questionnaire specified in the study protocol. All items demonstrated statistically significant validity, with acceptable internal consistency (Cronbach alpha = 0.709). Responses were scored according to the established scoring guidelines and categorized into low and high self confidence based on predefined classification criteria. Participants completed the questionnaire independently, while research staff provided procedural clarification when requested, without influencing responses or interfering with

participants' understanding of the questionnaire items during data collection.

Data Analysis Technique

Data were checked for completeness and analyzed using IBM SPSS Statistics version 29. Categorical variables were summarized as frequencies and percentages. The association between self confidence and resilience was evaluated in a 2 by 2 table using the Pearson Chi square test after confirming adequate expected cell counts. The significance level was set at 0.05. The odds ratio and 95% confidence interval were calculated from the observed cell frequencies to quantify association strength. The resulting estimate was OR 6.00 with 95% CI 1.60 to 22.55.

Ethical Consideration

Ethical approval was obtained from the Ethics Committee of the Sukabumi College of Health Sciences under approval number 001465/KEP STIKES SUKABUMI/2026. All participants received study information and provided written informed consent before questionnaire completion. Questionnaires were handled without personal identifiers in the analytic dataset, access to study data was restricted to the research team, and results were reported in aggregate form.

Result

The respondent profile is presented in Table 1. Of the 50 emergency department nurses, 26 (52.0%) were men, 27 (54.0%) were aged 26 to 30 years, 26 (52.0%) had worked for five years or less, and 27 (54.0%) held a Diploma III in Nursing.

Table 2 shows that 34 respondents (68.0%) were classified as having high self confidence and 35 respondents (70.0%) were classified as having high resilience. The corresponding category distribution is also visualized in Figure 1.

The relationship between self confidence and resilience is shown in Table 3. Among nurses with high self confidence, 28 of 34 (82.4%) had high resilience, compared with 7 of 16 (43.8%) among nurses with low self confidence. The Pearson Chi square test showed a statistically significant association ($p = 0.005$). Nurses in the high self confidence category had higher odds of high resilience than those in the low self confidence category (OR 6.00; 95% CI 1.60 to 22.55).

Table 1. Characteristics of Respondents

Respondent characteristics	n	%
Gender: Men	26	52.0
Gender: Women	24	48.0
Age: 20 to 25 years	3	6.0
Age: 26 to 30 years	27	54.0
Age: 31 to 45 years	20	40.0
Length of service: 5 years or less	26	52.0
Length of service: More than 5 years	24	48.0
Education: Diploma III in Nursing	27	54.0
Education: Bachelor of Nursing	8	16.0
Education: Professional Nurse qualification	15	30.0

Source: Primary data, 2026

Table 2. Distribution of Self Confidence and Resilience

Variable and category	n	%
Self confidence: Low	16	32.0
Self confidence: High	34	68.0
Resilience: Low	15	30.0
Resilience: High	35	70.0

Source: Primary data, 2026

Table 3. Association Between Self Confidence and Resilience

Self confidence	Low resilience		High resilience		Total		p value
	n	%	n	%	n	%	
Low	9	56.3	7	43.8	16	100.0	0.005
High	6	17.6	28	82.4	34	100.0	

Note: Pearson Chi square test. OR for high resilience comparing high versus low self confidence = 6.00; 95% CI 1.60 to 22.55.

Figure 1 displays the category distribution for the two principal study variables. High categories predominated for both self confidence and resilience, consistent with the descriptive results in Table 2.

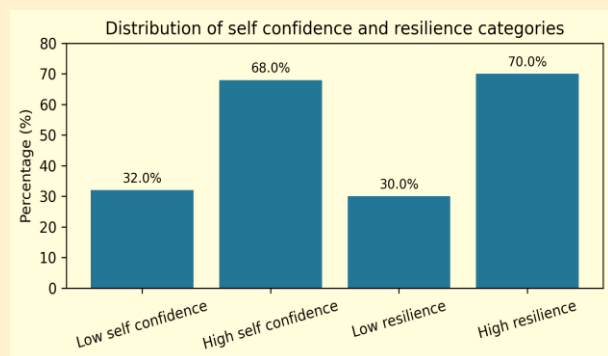


Figure 1. Distribution of self confidence and resilience categories

The study found that high self confidence and high resilience were common among emergency department nurses. The principal analytic finding was a significant association between the two constructs, with an odds ratio of 6.00 and a 95% confidence interval of 1.60 to 22.55. These results answer the study question while remaining within the limits of a cross sectional association.

Discussion

The study identified a statistically significant association between self confidence and resilience among emergency department nurses. The magnitude of association was substantial, with nurses in the high self confidence category showing six times the odds of high resilience compared with nurses in the low self confidence category. This finding is consistent with nursing research showing that positive capability beliefs are related to adaptive psychological functioning and work engagement^{12,13}.

In emergency nursing, self confidence may be particularly relevant because clinical decisions often must be made rapidly despite incomplete information and competing

demands. Confidence in one own capability can support persistence, task focus, and controlled responses under pressure, mechanisms that are conceptually compatible with resilience¹⁴. Research on hospital nurses has similarly linked self efficacy with disaster readiness, while evidence from emergency and intensive care units suggests that disaster response confidence is shaped by professional experience and training^{2,3}.

The relationship should also be interpreted in the context of disaster nursing rather than as evidence that preparedness itself improved. Preparedness was not an outcome in this study. Nevertheless, resilience has been associated with nurses perceptions of disaster preparedness in other settings¹⁵, and studies of disaster exposed populations suggest that resilience is supported by adaptive coping, experience, and social resources^{16,17,18}. These mechanisms provide a plausible explanation for why nurses who perceive themselves as more capable may also report greater resilience.

Training and simulation are practical organizational mechanisms that can strengthen capability beliefs through repeated mastery experiences, structured feedback, and team based problem solving. Randomized and intervention studies have shown that disaster training can improve nurses knowledge, skills, resilience, or personal readiness^{19,20}. A recent systematic review also reported that disaster education programs generally improve nursing readiness and competence, with simulation based approaches among the effective strategies²¹. These findings support the use of repeated drills and psychologically informed debriefing within hospital disaster programs.

Local HTJ evidence reinforces the need to integrate individual psychological capacity with institutional preparedness. Arifuddin et al showed that earthquake preparedness attitudes require valid and context sensitive measurement⁵, while Herman et al emphasized coordinated mitigation strategies within

resilient institutions⁶. In a different clinical population, Wahidah et al documented the relationship between a positive self related construct and resilience⁷. Additional HTJ studies on occupational stress, self efficacy related health behavior, and nursing performance highlight the relevance of psychological and organizational factors to health worker functioning^{22,23,24}.

Self confidence and resilience should therefore be viewed as related but distinct constructs. Bandura theory explains how perceived capability can influence effort, persistence, and responses to difficult tasks²⁵. Contemporary studies likewise show that self efficacy can mediate relationships between psychosocial resources and resilience related outcomes^{26,27}. The present findings extend this line of evidence to emergency department nurses working in an earthquake prone Indonesian setting.

From a hospital management perspective, the results support incorporating psychological capacity building into existing disaster readiness activities. Simulation, structured case rehearsal, team communication exercises, peer support, and reflective debriefing may provide opportunities for nurses to strengthen confidence while practicing adaptive coping. Such programs should complement, rather than replace, technical disaster competencies and institutional response systems^{19,20,21}.

The study used total sampling of the accessible emergency department nursing population and reported an effect estimate in addition to significance testing. Interpretation remains focused on association because exposure and outcome were measured at the same time. Future multicenter studies can examine whether the observed relationship remains after adjustment for age, length of service, professional education, disaster experience, training exposure, and organizational support, variables identified as relevant in disaster nursing literature^{3,28,29,30}.

Conclusion

Self confidence was significantly associated with resilience among emergency department nurses at Sayang Regional General Hospital, Cianjur Regency. Nurses with high self confidence had greater odds of high resilience than nurses with low self confidence. These findings support integrating psychological capacity building, simulation, and team based learning into hospital disaster programs while maintaining technical preparedness as a separate competency. Further multicenter research with multivariable analysis is warranted to evaluate the consistency of this association across nursing settings.

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Conflict of Interest Statement

The author(s) declare no commercial, financial, or personal conflicts of interest related to this research. All authors approved the final manuscript and consented to its publication in *Healthy Tadulako Journal*.

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