

Relations among Career Identity, Nursing Professionalism and Violent Experiences of Nursing Students

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Abstract

This study conducted research on violence that nursing college students experience during clinical practicum and its impact on career identity and nursing professionalism on nursing students to prepare countermeasures which nursing college students more effectively respond against violence and abuse, and to provide fundamental data necessary to enhance career identity and professionalism. The research was conducted to 187 junior and senior nursing college students in M city who had been in clinical practicum. Research data was collected from 2014. September 1st to October 30th and SPSS Program 20.0 was used for real number and percentage, average and standard deviation, Pearson's correlation co-efficiency, and regression analysis. During the recent 12 months, 89.9% of nursing college students had experienced abuses by patients, their families, doctors, nurses and others; they were verbal abuses, physical abuses and sexual abuses in types and rank. Career identity on average was 2.36 out of 4 and professionalism was 3.81 out of 5. Impacts of abuses on career identity and nursing professionalism were examined and its results showed that there were significant statistical relations among violence experiences, career identity and nursing professionalism. Undergraduate nursing students were suffering serious level of violence during their clinical practicum; these kind of abusive experiences were revealed to have negative influence to nursing college students while career identity and nursing professionalism were being established. It is opinioned that before clinical practicum, nursing colleges needs to encourage college students to have confidence in themselves and to have expectations that they can perform successful clinical training. Furthermore a high quality of educational environment is required to raise nurses who can provide a good quality care and thus ensuring safety at workplace during clinical practicum is prerequisite to this end.

Keywords: Abusive Experience, Career Identity, Nursing Professionalism, Nursing Student

1. Introduction

1.1 The Need for Research

Career means the entirety of what a person does in their lifetime, and decision-making is a continuous developmental concept from the very early stages of childhood until retirement². In addition, career decision-making is a series of processes to choose an occupation appropriate to an individual's interests and abilities that reflect one's concept of self²⁷. According to Super's stages of career development²⁷, the college stage is a transition stage to learn and equip the knowledge and skills for a

professional career, to establish an individual concept of self, as well as to select and begin an appropriate job. However, given Korea's peculiar circumstance with the university entrance system, it is difficult for any high school student to have an opportunity to fathom his or her career. Moreover, choosing a major in college is most often decided with the consideration of academic performance, not considering an individual's aptitudes or interests, which might cause university students confusion. Although nursing students are usually deemed to have already decided on their career during the stage of college admission, nursing students are faced with

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far more stress compared to others due to their grave responsibility over patients, difficulties in role adaptation related to a lack of knowledge and experience, as well as a strict code of conduct, as they have to handle not only excessive studies but also a clinical practicum⁸. That great stress could lose nursing students' interests or lower their self-esteem, which is attributable to maladjustment or confusion with career identity¹⁸. A recent survey conducted among college students indicates that career is the biggest issue during college campus life¹⁰, and when asked how they would feel about their career, the greatest number of correspondents replied 'confused'. For a case of nursing students, we have recently witnessed that the number of early turnovers has increased as more college graduates fail to adjust to their work, and that the supply of clinical nurses is becoming insufficient. Hence, the research on career identity has begun to understand the cause of the current phenomenon and it is worth our attention. Nursing science has resulted in continuous internal and external growth by making efforts in raising its status as a professional occupation as well as achieving academic development. And so, in the present healthcare system, nurses are being recognized as a professional human resource that can perform a pivotal role in patient recovery⁶. In⁷ asserted that with such shifts in social recognition, professionalism, which determines firm principles and attitudes in carrying out tasks as a professional nurse, has been established more strongly, and nurses for themselves say their systemized professional perspective has been further fortified. Nursing professionalism is the cognitive perception of a nurse, and it can be a first conscious step toward becoming a professional nurse. Therefore, it is crucial for nursing students and newly licensed nurses who begin their first step as a nurse to establish more positive nursing professionalism. According to^{13,24}, individual nursing professionalism can be developed through professional training in colleges. And therefore, attitudes and values about nursing science should also be considered with not just professional knowledge and skills. In addition, college students can vary in their attitude on undertaking nursing training and a clinical practicum. Therefore, ultimately it can have an impact on the socialization process to perform in the role of a professional nurse on an actual hospital scene¹⁴. Nursing students perform practical clinical training at hospitals where interactions occur among numerous people, such as patients, their

families, doctors, nurses, and other staff members. In such interactions, health care workers encounter many types of violence, including verbal and physical abuse by patients, their families, or colleagues²⁰. As violence occurs inside hospitals, most victims are forced to keep silent due to the particularity of being in a hospital, and according to Hoff and Slatin, nurses are the majority of victims of violence at health care facilities²⁵. Most particularly, relatively less skilled and experienced nurses were more vulnerable to violence by patients. In a hospital, as nursing students are perceived to be immature, and as they have less experience and less capacity to deal with, they are easily exposed to violence²³. Additionally, during the period of clinical practicum, nursing students are frequently transferred to new hospitals, and forced to deal with new patients and unfamiliar environments, which in all can place them in a far more vulnerable position with respect to violence²². Therefore, we must pay attention to violence imposed on nursing students during their clinical practicum²². 34.0~50.3 % of nursing students experienced violence during their clinical practicum, and more than half of the students were faced with violence and reported the events. Violence was caused by the following reasons: projection on college students or insufficient confidence between patients and health care givers²¹, and this demonstrated that the causes of violence targeting nursing students were related to the perpetrators themselves, not to individual nursing students. It is considered that such abusive experience of violence during a clinical practicum can have a negative impact on not only the emotions of nursing students, the training course, and adjustments to the clinical practicum environment, but also career identity and nursing professionalism, which are components in career decision-making. However, in the case of Korea, the majority of research has been conducted on incumbent nurses; for instance, research on emergency room nurses by^{1,11}, research on psychiatry department nurses by¹⁷, and research on ICU nurses by⁹. Thus, there are very few studies on abusive experiences exposed to nursing students who are going to become licensed nurses working in clinical scenes. Hence, this study was conducted to understand the violent experiences that nursing students would face during their clinical practicum. The nursing students to more effectively respond against violence and abuse, and in order to provide fundamental data necessary to enhance career identity and professionalism.

1.2 Purposes of Research

Specific purposes of this research are as follows:

- To understand career identity, nursing professionalism and degrees of violent experiences of nursing students.
- To explore relations among career identity, nursing professionalism and violent experiences of nursing students.

2. Research Method

2.1 Research Design

The purpose of this research is to understand correlations through verifying career identity, nursing professionalism, and degrees of violent experiences on the subject of nursing students and through understanding the impact of such violent experiences of nursing students upon career identity and nursing professionalism.

2.2 Research Subjects

This research was conducted on 190 juniors and seniors of a nursing college located in M city. For the criteria on subject selection, the sample size of the research was chosen based on 132 of the least sample size in case of regression analysis, the significance level was 0.05 and power was 0.95. Three incomplete questionnaires were excluded out of 190 questionnaires given to research subjects, and 187 were used for the research analysis.

2.3 Research Tool

2.3.1 Career Identity

Holland, Daiger and Power developed 18 questions related to identity Scale of My Vocational Situation (MVS) which were translated appropriately to Korean circumstances by Professor Bong Hwan Kim and again modified and complemented into 14 questions relevant to nursing students in Korea by Professor⁵. It consists of 14 questions in total on the scale of four points, and higher points indicate higher career identity. On the research conducted by Professor⁵, Cronbach' α was .88 and Cronbach' α in this research was 0.92.

2.3.2 Nursing Professionalism

For the research, 26 questions were selected with the exclusion of 3 questions out of 29, which were developed

by Professor¹⁵ because those three questions were difficult to understand or possibly misunderstood by nursing students due to their lack of experience. Sub-themes consisted of 'professional self-concept', 'social perception', 'professionalism of nursing', 'role of nurses', and 'autonomy of nursing care'. On the full scale of five points, five points means 'very true' and one point is 'not at all' and higher points imply higher nursing professionalism. For research tools, reliability was Cronbach' α was .92 when Professor¹⁵ and others developed, while for this research, Cronbach' α is .94. Validity of the research tool was already verified from previous research.

2.3.3 Violent Experiences

For research tools to measure violent experiences, we used the following research tools. Regarding verbal abuse, physical threatening and physical violence, research tools developed by Professor Jong Sook Yoon were applied. Regarding sexual violence, research tools developed by⁹. and modified and complemented by⁷ were used. On the research by Jung Eun Park, Cronbach' α was .71 and on this research, Cronbach' α is .88.

2.4 Data Collection Method and Procedure

Data was collected from September 1st to October 30th in 2014. Researchers met interviewees and explained the purpose and methods of the research, as well as precautions and response methods to the research. The questionnaire was then distributed to those subjects who agreed to participate. In addition, according to research ethics, subjects were given explanations on the purpose of the research, and that personal privacy would be kept confidential and collected data would be used only for research purposes. Only those subjects who understood and agreed to the terms joined in the survey.

2.5 Data Analysis

Using SPSS Program 20.0 (IBM, America), the gathered data was analyzed in real numbers and percentages for general characteristics of the subjects, in average and standard deviation for career identity, in Pearson's correlation co-efficiency for nursing professionalism, degree of violent experience of nursing students, as well as in regression analysis for violent experience impact on career identity, nursing professionalism, and degree of violent experience.

3. Research Result

3.1 General Characteristic of Research Subjects

Table 1. General characteristics of research

		Frequency	Percentage
Age	22 and younger	93	49.7
	23 and older	94	50.3
Sex	Male	23	12.3
	Female	164	87.7
Personal Relations	Very Good	26	13.9
	Good	110	58.8
	Average	51	27.3
	Very Good	21	11.2
Major	Satisfied	86	46.0
	Good	71	38.0
	Dissatisfied	9	4.8
	Very Satisfied	17	9.1
Clinical Practicum	Satisfied	99	52.9
	Good	61	32.6
	Dissatisfied	10	5.3
	Internal medicine Ward	25	27.8
Place of Violence	Surgery Ward	15	16.7
	ICU	4	4.4
	Operation Room	4	4.4
	Emergency Room	16	17.8
	Psychiatry Ward	29	32.2
Training on Violence	Other	12	13.3
	Yes	62	33.2
	No	125	66.8
Need for Training	No need	8	4.3
	Average	49	26.2
	A little	79	42.2
	Very much	51	27.3

Regarding general characteristics of nursing students, in terms of age, research subjects consisted of 93 students (49.7%) were 22 years old or younger, 94 students (50.3%) were 23 years old or older, and in terms of sex, female students were 164 (87.7%) and male students were 23 (12.3%). On a question about personal relations, 110 respondents (58.8%) replied amicable. On a question about satisfaction in major, 86 (46%) respondents replied satisfied. On a question about satisfaction in their clinical practicum, 99 (52.9%) respondents answered positive, which showed the highest percentage. On a question to

ask where violence occurred, 29 respondents (32.2%) answered the psychiatry department and 25 (27.8%) the internal department. On a question about necessity for education on violent experience, 79 respondents (42.2%) answered necessary to some extent, and 51 respondents (27.3%) said definitely necessary.

3.2 Violent Experience, Career Identity and Nursing Professionalism of Nursing Students during their Clinical Practicum

For the most recent year, 89.9% of nursing students have been exposed to violence from patients and their families, doctors, nurses, and others. From the types of violence, verbal abuse (87.8%), physical abuse (64.9%), and sexual abuse (26.6%) come in order. Secondly, 165 nursing university students (87.8%) experienced verbal abuse, particularly, patients and their families 'yelling' (31.9%), and patients and their families speaking in 'contemptuous remarks' (27.1%). Those college students who suffered physical violence were 122 (64.9%), the other were presented in the following order: a guardian of a patient 'travelling around in anger' (25.5%), a guardian of a patient 'wearing threatening expressions' (15.4%), and nurses looking 'threatening' (11.7%). 50 college students (26.6%) experienced sexual violence, patients and their guardians said 'sexual jokes or made obscene remarks' (12.2%), and patients and their guardians made 'sexual comparisons or evaluated appearance' (6.4%). Career identity showed an average 2.36 out of 4, and nursing professionalism was present in an average 3.81 out of 5.

Table 2. Violent experience of nursing students during clinical practicum

	Frequency	Percentage
Verbal Abuse	165	87.8
Physical Abuse	122	64.9
Sexual Abuse	50	26.6
Violence	169	89.9

3.3 Violent Experiences by General Characteristics of Subjects

For verbal violence, there are significant statistical differences depending on the personal relations of individual subjects, satisfaction in one's major subject, and satisfaction with the clinical practicum, while there is no a significant difference in relation with age, sex, and education against violence. For physical and sexual violence, there are no statistically significant differences in

Table 3. Violent Experience, Career Identity and Nursing Professionalism of Nursing Students during their Clinical Practicum

		None		Few times a year		Few time a month		Few time a week		At least once a day	
		N (%)		N (%)		N (%)		N (%)		N (%)	
Yelling	Patient and family	71	(37.8)	60	(31.9)	37	(19.7)	18	(9.6)	2	(1.1)
	Doctor	146	(77.7)	24	(12.8)	14	(7.4)	3	(1.6)	1	(.5)
	Nurse	118	(62.8)	34	(18.1)	24	(12.8)	9	(4.8)	3	(1.6)
	Other	178	(94.7)	5	(2.7)	1	(.5)	2	(1.1)	2	(1.1)
Contemptuous remarks	Patient and family	90	(47.9)	51	(27.1)	23	(12.2)	14	(7.4)	10	(5.3)
	Doctor	141	(75.0)	26	(13.8)	13	(6.9)	6	(3.2)	2	(1.1)
	Nurse	100	(53.2)	47	(25.0)	26	(13.8)	11	(5.9)	4	(2.1)
	Other	174	(92.6)	8	(4.3)	3	(1.6)	2	(1.1)	1	(.5)
Dreadful expression	Patient and family	118	(62.8)	29	(15.4)	26	(13.8)	11	(5.9)	4	(2.1)
	Doctor	161	(85.6)	13	(6.9)	11	(5.9)	3	(1.6)	0	(.0)
	Nurse	140	(74.5)	22	(11.7)	17	(9.0)	7	(3.7)	2	(1.1)
	Other	179	(95.2)	3	(1.6)	3	(1.6)	3	(1.6)	0	(.0)
Travelling in anger	Patient and family	106	(56.4)	48	(25.5)	25	(13.3)	7	(3.7)	2	(1.1)
	Doctor	166	(88.3)	10	(5.3)	9	(4.8)	3	(1.6)	0	(.0)
	Nurse	157	(83.5)	15	(8.0)	11	(5.9)	4	(2.1)	1	(.5)
	Other	182	(96.8)	0	(.0)	4	(2.1)	1	(.5)	1	(.5)
Sexual jokes or obscene remarks	Patient and family	155	(82.4)	23	(12.2)	7	(3.7)	3	(1.6)	0	(.0)
	Doctor	182	(96.8)	3	(1.6)	2	(1.1)	1	(.5)	0	(.0)
	Nurse	182	(96.8)	2	(1.1)	2	(1.1)	2	(1.1)	0	(.0)
	Others	183	(97.3)	2	(1.1)	2	(1.1)	1	(.5)	0	(.0)
Making sexual comments or evaluating appearance	Patient and family	168	(89.4)	12	(6.4)	7	(3.7)	1	(.5)	0	(.0)
	Doctor	183	(97.3)	1	(.5)	4	(2.1)	0	(.0)	0	(.0)
	Nurse	177	(94.1)	7	(3.7)	4	(2.1)	0	(.0)	0	(.0)
	Others	182	(96.8)	3	(1.6)	3	(1.6)	0	(.0)	0	(.0)

	Minimum Value	Maximum Value	Average	Standard Deviation
Career Identity	1.00	3.57	2.36	0.56
Professionalism	2.04	5.00	3.81	0.49

age, sex, personal relations, satisfaction in major subject, satisfaction with the clinical practicum, and education against violence.

3.4 Relations among Violent Experiences, Career Identity and Nursing Professionalism of Nursing Students

Table 4 demonstrates the result of relations among violent experiences of nursing students, career identity and nursing professionalism. Violent experiences of nursing students have revealed that there are statistically significant differences with career identity and nursing professionalism.

4. Discussion

Violent experiences posed to nursing college students during their clinical practicum can cause negative influences on the emotions of nursing students, the education process, individual adjustment to clinical circumstances and furthermore shaping occupational perception as a nurse. Therefore, this research has been conducted so as to enable nursing students to prepare countermeasures with which they can more effectively respond against violence and abuse, and to provide fundamental data necessary to enhance career identity and professionalism. Major outcomes are discussed below. First, during the most recent year, 89.9% of nursing

Table 4. Violent experience by general characteristics of subjects

		Verbal abuse		χ^2	p	Physical abuse		χ^2	p	Sexual abuse		χ^2	p
		N (%)				N (%)				N (%)			
Age	22 and younger	80	(86.0)	0.484	.487	64	(68.8)	1.044	.307	24	(25.8)	0.015	.902
	23 and younger	84	(89.4)			58	(61.7)			25	(26.6)		
Sex	Male	18	(78.3)	2.166	.141	14	(60.9)	0.221	.638	5	(21.7)	0.270	.603
	Female	146	(89.0)			108	(65.9)			44	(26.8)		
Personal Relations	Very Satisfied	18	(69.2)	9.701	.008**	15	(57.5)	5.476	.065	6	(23.1)	1.847	.397
	Good	99	(90.0)			67	(60.9)			26	(23.6)		
	Average	47	(92.2)			40	(78.4)			17	(33.3)		
Satisfaction with Major	Very Satisfied	16	(76.2)	10.241	.017*	10	(47.6)	7.411	.060	4	(19.0)	6.067	.108
	Satisfied	71	(82.6)			52	(60.5)			17	(19.8)		
	Average	68	(95.8)			54	(76.1)			24	(33.8)		
Clinical Practicum Satisfaction	Dissatisfied	9	(100.0)	11.664	.009**	6	(66.7)	2.937	.402	4	(44.4)	4.895	.180
	Very Satisfied	11	(64.7)			8	(47.1)			2	(11.8)		
	Satisfied	86	(86.9)			6	(65.7)			25	(25.3)		
Violence Education	Average	57	(93.4)	0.591	.442	42	(68.9)	0.032	.857	17	(27.9)	0.914	.660
	Dissatisfied	10	(100.0)			7	(70.0)			5	(50.0)		
	Yes	56	(90.3)			41	(66.1)			15	(24.2)		
	No	108	(86.4)				(64.8)			34	(27.2)		

Table 5. Relations among violent experiences, career identity and nursing professionalism of nursing students

		Career Identity		t	p	Nursing Professionalism		t	p
		M $\pm$ SD				M $\pm$ SD			
Verbal abuse	Yes	2.38 $\pm$ 0.55	1.066	.288		3.80 $\pm$ 0.50	-0.759	.449	
	No	2.25 $\pm$ 0.60				3.88 $\pm$ 0.38			
Physical abuse	Yes	2.40 $\pm$ 0.55	1.213	.227		3.77 $\pm$ 0.53	-1.643	.102	
	No	2.30 $\pm$ 0.56				3.89 $\pm$ 0.40			
Sexual abuse	Yes	2.47 $\pm$ 0.60	1.632	.104		3.73 $\pm$ 0.48	-1.393	.165	
	No	2.32 $\pm$ 0.54				3.84 $\pm$ 0.49			
Violence	Yes	2.38 $\pm$ 0.56	1.022	.008**		3.81 $\pm$ 0.50	-9.026	.009**	
	No	2.24 $\pm$ 0.53				3.81 $\pm$ 0.35			

students have experienced violence from patients and their families, doctors, nurses, and others. By types of violence, verbal abuse (87.8%), physical abuse (64.9%), and sexual abuse (26.6%) appear in order. This result is similar to 90.7% of the results of research conducted on nursing students under the theme of violent experiences by⁷. On the other hand, 96.9% of respondents of the research by²⁰ and 100% of the research by¹² revealed as having experience in violence. Compared to licensed nurses, these percentages are relatively lower, and we see that because nursing students spend less time in patient care, they are entrusted with less responsibility for patient care activities, and they rarely carry out nursing interventions which could pose a threat to the life of a patient. However, we can understand that nursing students have been exposed to a high percentage of verbal abuse. It is our opinion that unlike physical or sexual violence, society treats

verbal abuse leniently through rules and laws⁹. Moreover, there is a factor of cultural influence insensitive to verbal abuse as it does not regard it as an aspect of violence. It is also possible that patients, their families, doctors, and/or nurses are likely to look down on college students, given factors of age and the status of being students. Most violent acts are committed by patients and their families, as they take out their anger or dissatisfaction with health care services or dissatisfaction caused by delays in tests or treatments on nursing students. Thus, it can be argued that such violence occurs due to postponed treatments or insufficient explanation for patients. Therefore, we think health care providers should offer detailed accounts, which can reduce dissatisfaction in a swift and responsive manner inside hospitals. The fact that not only patients and their families but also nurses commit violence against college students proves the following: that nurses

are who nursing students most frequently interact with, and that for licensed nurses, it is a double burden and stress to give college students training. Thus they can be a possible cause for the results. Career identity shows an average 2.36 out of 4. This is higher than 2.27 points, which came out of the research that³ conducted on sophomore and junior nursing students. We regard that this resulted from the factor that subjects of this research have better and clearer understandings of their personal goal, interests, and abilities, and are very confident as they are going to enter into a period in which their individual major is developed and facilitated for the sake of direct social participation. For nursing professionalism of nursing students, the average is 3.98 points of 5, which is higher than 3.63 points, which is the result of research by^{4,16}. Nursing professionalism, for being a systemized perspective as professional, nursing activities of a person taking responsibility in nursing and a vocational perception on the work itself, offers a framework of perception to provide criteria on conduct and to assess behaviors²⁸. In short, as it is a concept combining ideas of nursing with values in the occupation of nursing, it can be said that a desirable concept of nursing professionalism is important for individual satisfaction and for socially duly recognizing the value of nursing¹⁹. At the same time, nurses with positive nursing professionalism are more content with their jobs and show better work performance and higher devotion to their organization²⁶. Fundamental values of professional nurses are demonstrated through a person who implements the profession. This has a direct influence on social perception of nurses, and thus it is very crucial for nursing students to have the right establishment of nursing professionalism. For verbal abuse, depending on the general characteristics of nursing students, there are significant statistical differences with regard to personal relations, individual satisfaction with one's major, and the clinical practicum, while there are no significant differences with age, sex, or education against violence. Concerning physical and sexual violence, there are no significant statistical differences with age, sex, personal relations, individual satisfaction with one's major and the clinical practicum, and education against violence. For a person with amicable personal relations and a high satisfaction with their major and clinical practicum, the person perceives the clinical practicum as an inevitable course, and gathers enough information on the clinical practicum through orientation or interactions

with seniors who have already had experiences in their own clinical practicum. Consequently one tends to take verbal abuse lightly. Secondly, violent experiences of nursing students are statistically correlated with career identity and nursing professionalism. It was hard to make a direct comparison as there was no precedent research to investigate relations among violent experiences, career identity and nursing professionalism on the subject of nursing students. However, from research by⁷, it has been reported that nursing students have been exposed to quite a serious level of violence during their clinical practicum. So after such abusive situations, they have shown various psychological, emotional trauma and do not respond appropriately against violence. Such violent experience can yield negative impacts on the career identity of nurses. In addition, we regard that a concept of self related with the work area, that is, a career identity in which an individual has a clear and stable picture on individual targets, interests and abilities, can receive negative influences. To establish the right career identity and nursing professionalism of nursing students, a report system on violence and development of an education program for violence prevention are deemed to be required in order to respond more effectively against violence.

5. Conclusion and Suggestion

We would like to draw conclusions and make suggestions based on the outcomes which we have confirmed through this research. Nursing students suffer from serious levels of violence during their clinical practicum. These kind of abusive experiences demonstrably have a negative impact on nursing students when their career identity and nursing professionalism are built up. It is our opinion that before the clinical practicum, nursing colleges need to encourage college students to have confidence in them and to have expectations that they can perform successful clinical training. Furthermore, a high quality educational environment is required to raise nurses who can provide good quality care, and thus ensuring safety at health care facilities during clinical practicum is a prerequisite to this goal. Moreover, to eradicate violence and abuse, the perception that violence can be accepted as a part of a clinical practicum or can be endured or ignored must be changed. Awareness needs to be raised to prevent and

remove violence. Our suggestions for follow-up research are; first, the research has limitations in generalizing the result as it was conducted on certain subjects going to a certain nursing college located in M city. Thus, more repetitive research and a systematic comparative analysis need to be carried out on subjects with various backgrounds from different regions. Second, we would like to suggest follow-up research by developing and adopting a certain education program which contributes to preventing and dealing with violence with a purpose of exploring career identity and nursing professionalism of nursing students. Third, the percentage of males who participated in the survey was low, which failed to compare violent experiences between male and female respondents. Therefore we would like to suggest expanding the sample size in the future so as to implement comparison of arches between two groups.

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