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### A Study on the Correlation Between Anxiety Status and Self-Competence Denial Tendency Among Undergraduate Nursing Interns

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#### ABSTRACT

**Objective** The exploration focuses on the current state of anxiety and self-doubt among undergraduate nursing interns and their interrelation, aiming to enhance the physical and mental well-being of these, as well as to foster their professional development. The findings aim to provide a reference for medical schools and healthcare institutions to promote psychological health initiatives for nursing interns in the future.

**Methods** Using convenience sampling, a study was conducted from December 2023 to January 2024, selecting 135 undergraduate nursing interns who were interning at top-tier hospitals in Beijing, Zhengzhou, and Guangzhou as research subjects from a medical college in Pingdingshan City. A questionnaire survey was carried out using a general information questionnaire, an anxiety self-assessment scale, and a self-perceived ability negation tendency scale.

**Results** The total scores for anxiety and self-perceived ability negation among undergraduate nursing interns were  $(50.55 \pm 9.08)$  and  $(61.07 \pm 14.36)$ , respectively. There was a statistically significant difference in anxiety scores among nursing interns with different attitudes towards clinical nursing work ( $P=0.001$ ,  $<0.05$ ), and there was a statistically significant difference in self-perceived negation scores among nursing interns of different ages ( $P=0.042$ ,  $<0.05$ ). Correlation analysis showed a positive correlation between the total score for anxiety and the scores for each dimension of self-perceived ability negation ( $r=0.338, 0.097, 0.111$ ,  $P<0.05$ ).

**Conclusions** The anxiety and self ability negation tendencies of undergraduate nursing interns are at a moderate level, and there is a certain correlation between anxiety and self ability negation tendencies. Colleges and clinical nursing instructors should cultivate the professional interest of undergraduate nursing interns to reduce anxiety levels. Regular psychological and emotional tracking should be conducted on younger undergraduate nursing interns to strengthen mental health construction. By improving their cognition, reducing their IP level, and promoting their physical and mental health and career development.

**KEY WORDS:** Undergraduate; Intern nursing students; Anxiety; Self-denial tendency

## Foreword

Self-Competence Denial Tendency (Imposter Phenomenon, IP) refers to a negative psychological state characterized by doubts about one's true abilities, perceived deficiencies in self-competence or intellectual inadequacy, and a tendency to attribute any achieved success entirely to external factors such as luck. Currently, undergraduate nursing students are gradually becoming the main workforce in clinical nursing practice [1]. Due to the specialized nature of their field, undergraduate nursing interns are required to devote significant time and effort to learning and practice. Moreover, since clinical nursing work directly impacts human lives and health, these interns must maintain a high level of responsibility and professional competence during their training [2]. However, when entering clinical internships, undergraduate nursing interns often face multiple stressors, including internship demands, time constraints, career pressures, and academic pursuits, which may lead to negative psychological states such as irritability, anxiety, and even depression [3]. Studies [4] have shown that IP can result in psychological distress, such as anxiety and depression, indicating that IP is one of the contributing factors to anxiety among nursing interns. Therefore, targeted interventions addressing self-competence denial tendencies in undergraduate nursing interns may help alleviate their anxiety levels.

Imposter Phenomenon (IP) often occurs during periods of role transition. For instance, nursing interns frequently perceive themselves as lacking knowledge or competence during clinical practice. This may lead to excessive sensitivity or negativity toward subjective evaluations from others in their clinical work. Additionally, it can result in heightened anxiety and procrastination when facing medical tasks, all of which negatively impact their work efficiency, physical and mental health, and adaptation to clinical environments [5]. Wang Huadong's study [6] revealed that female nursing interns exhibit more pronounced IP. Yu Xiao [7] demonstrated that fostering positive attribution styles in undergraduate nursing interns during clinical management can alleviate IP levels, enhancing their sense of personal achievement and thereby reducing anxiety. Li Kuinan [8] proposed that future clinical internship education and guidance should prioritize creating supportive learning and working environments, cultivating interns' interest in clinical nursing, and providing psychological support from family and friends. These proactive measures could mitigate psychological stress, improve mental well-being, and offer actionable strategies for addressing IP. In 2020, scholars such as GOTTLIEB et al. [9] conducted a multinational study on the prevalence of Imposter Phenomenon (IP) among nursing personnel in countries including the United States, Canada, and India. The findings revealed that the incidence of IP among nursing interns ranged from 22% to 60%, indicating that nursing interns are particularly vulnerable to experiencing IP.

Therefore, this study investigated the current situation of anxiety and self ability negation tendency among undergraduate nursing interns, and analyzed their correlation with self ability negation tendency, in order to improve their cognition, reduce their level of self ability negation tendency, alleviate anxiety, promote their physical and mental health and career development.

## 1. 1Object and Method

### 1.1 Research object

Using convenience sampling method, 135 undergraduate nursing students who interned in tertiary hospitals in Beijing, Zhengzhou, Guangzhou and other places from a medical college in Pingdingshan

City were selected as the research subjects from December 2023 to January 2024. Inclusion criteria: ① Full time undergraduate nursing interns in higher education institutions. ② Internship duration  $\geq 3$  months. ③ The research subjects provided informed consent and voluntarily participated. Exclusion criteria: ① Undergraduate nursing interns interrupt their internship for at least one month due to sick or personal leave. ② Incomplete data collection ③ Due to various reasons, the investigator was unable to complete the investigation.

### 1.2 Research tool

The opening serves as a guiding statement, explaining the purpose and significance of this survey. The first part is a general information survey questionnaire, and the second part consists of the Self Rating Anxiety Scale and the Self Negativity Scale.

#### 1.2.1 General Information Survey Questionnaire

A self-designed demographic questionnaire\*\* was administered to collect general information from undergraduate nursing interns, covering 10 items such as place of origin, whether they were the only child in the family, monthly household income per capita, perceived employment stress, and parental occupation.

#### 1.2.2 Self-Rating Anxiety Scale

The Self Rating Anxiety Scale (SAS) has become one of the most widely used psychological measurement research tools in psychology, with an internal consistency coefficient of 0.767 and a test-retest reliability coefficient  $r=0.810$  ( $P<0.01$ ) [10]. The SAS scale consists of 20 items, including 4 dimensions. Dimension 1 includes questions 1, 2, 3, and 4, dimension 2 includes questions 7, 8, 10, 11, 12, 14, 15, and 18, dimension 3 includes questions 6, 9, 13, 17, 19, and 20, and dimension 4 includes questions 5 and 16. According to subjective feelings, the frequency of occurrence within a week is divided into 4 levels. The scoring results range from "just a few rare times" to "the entire period", with scores ranging from 1 to 4 points. The total score is obtained by adding the scores of 20 items, and the final score is equal to the total score multiplied by 1.25, taking the integer. A score less than 50 is considered normal; 51-60 indicates mild anxiety, 61-70 indicates moderate anxiety, and  $>70$  indicates severe anxiety. The first, second, third, fourth, sixth, seventh, eighth, tenth, eleventh, twelfth, fourteenth, fifteenth, sixteenth, eighteenth, and twentieth scores positively, meaning that the fewer occurrences, the lower the score. The 5th, 9th, 13th, 17th, and 19th scores are scored in reverse, meaning that the fewer occurrences, the higher the score.

#### 1.2.3 Self Ability Negation Scale

The Clance Impostor Phenomenon Scale (CIPS) is a self-assessment tool used to assess negative self abilities. This scale has good reliability, with a total Cronbach's alpha coefficient of 0.920 [11], and is an evaluation scale used to measure IP. The Chinese version of the CIPS scale consists of 18 items and includes 3 dimensions. Dimension 1 is named Self Doubt with questions 12, 13, 14, 15, 17, 18, 19, and 20. Dimension 2 is named External Attribution with questions 7, 8, 9, 10, 11, and 16. Dimension 3 is named Passive Disguise with questions 3, 4, 5, and 6. Using a five point rating system, the score ranges from 1 to 5 points from "completely disagree" to "completely agree". The total score range is 20-100 points, with higher scores indicating more severe IP. Scores below 40 indicate no or mild self doubt, scores between 41-60 indicate moderate self doubt, scores between 61-80 indicate severe self doubt, and scores above 80 indicate extremely severe self doubt.

### 1.3 Data collection methods

We conducted an online survey using the Wenjuanxing software and

informed the survey subjects of the research purpose and precautions. The questionnaire was filled out using a unified guide language, and all content must be filled out before submission. The questionnaire was set to be filled out once per user's mobile phone, with a filling time of 5-10 minutes. Finally, preliminary data was exported through Wenjuanxing.

#### 1.4 Statistics

SPSS 25.0 statistical software was used for data analysis. Count data is represented by frequency and composition ratio (%); Measurement data is described in ( $\bar{x} \pm s$ ); Inter group comparison was conducted using t/F test; The influencing factors were analyzed using multiple linear regression; Using Spearman correlation analysis to investigate the correlation between anxiety and self ability negation tendency among undergraduate nursing interns. Using  $P < 0.05$  as the standard, it indicates that the difference is statistically significant.

## 2. Result

### Data Collection and Validation

A total of 135 questionnaires were collected in this study. To ensure data quality, invalid responses underwent dual verification by two independent reviewers. After removing 5 invalid questionnaires containing errors or incomplete entries, 130 valid responses were retained, yielding a valid response rate of 96.30%.

#### 2.1 General information of undergraduate nursing interns

The research subjects are mainly female nursing interns at the undergraduate level, accounting for 89.23%; Most undergraduate nursing interns come from rural areas; The majority of personality traits are intermediate type, accounting for 73.08%; In terms of filling out nursing professional intentions, the main ones are personal preferences, accounting for 44.62% of the total; The per capita monthly income of households is mostly between 2000 and 2999, accounting for 33.08%; The proportion of high employment pressure is 69.23%; The majority of people have an average attitude towards nursing, accounting for 79.23%; The majority of mothers are farmers, accounting for 53.08%, as shown in Table 1.

**Table 1 General Information of Undergraduate Internship Nursing Students (n=130)**

variable	grouping	frequent and continuous	constituent ratio (%)
gender	male	14	10.77
	female	116	89.23
age	20~22	98	75.39
	23~24	32	24.62
Is he/she an only child	correct	11	8.46
	deny	119	91.54
Students	City County	48	36.93
	rural area	82	63.08
Personality traits	introverted	26	20
	neutral	95	73.08
	extroversion	9	6.92
Fill in nursing professional intention	voluntary	58	44.62
	Others' wishes	53	40.77
	make up a prescription	19	14.62
Per capital monthly household income	< 1000	17	13.08
	1000~1999	40	30.77
	2000~2999	43	33.08
	3000~4999	30	23.08
employment pressure	not very	6	4.62
	general	34	26.15
	very	90	69.23
Attitude towards nursing	like	14	10.77
	general	103	79.23
	dislike	9	6.92
	strongly dislike	4	3.08

Father's Occupation	worker	57	43.85
	officer	51	39.23
	farmer	22	16.92
Mother's Occupation	worker	20	15.38
	officer	41	31.54
	farmer	69	53.08

## 2.2 Anxiety level and influencing factors of undergraduate nursing interns

In this study, the total anxiety score of 130 undergraduate nursing interns was  $(50.55 \pm 9.08)$  points, which was at a moderate level of anxiety. 3.08% were at a severe level of anxiety, 8.46% were at a moderate level of anxiety, and 33.08% were at a mild level of anxiety; The highest overall score among the four dimensions is the dimension of autonomic nervous system dysfunction, with a score of  $(14.95 \pm 3.9$

7) points, while the lowest score is the dimension of mixed symptoms, with a score of  $(3.90 \pm 1.09)$  points; From the perspective of the average scores of each item, the item of sports tension has the highest average score, with a score of  $(2.33 \pm 0.81)$  points. The score data for each dimension are detailed in Table 2. Through single factor analysis, it was found that there was a significant statistical difference in anxiety scores among undergraduate nursing interns with different clinical nursing attitudes ( $P=0.001, <0.05$ ), as shown in Table 3.

Table 2 Self evaluation scores of anxiety among undergraduate nursing interns( $n=130$ , divide,  $\bar{x} \pm s$ )

variable	Mixed symptoms	minimum value	score( $\bar{x} \pm s$ )	Equal distribution of each item( $\bar{x} \pm s$ )
Total score of anxiety self-assessment	<b>64</b>	<b>29</b>	$50.55 \pm 9.08$	—
Total score of anxiety self-assessment	<b>13</b>	<b>4</b>	$6.87 \pm 2.06$	$1.72 \pm 0.59$
Total score of anxiety self-assessment	<b>38</b>	<b>11</b>	$14.95 \pm 3.97$	$1.85 \pm 0.71$
Exercise-induced tension	<b>19</b>	<b>10</b>	$13.98 \pm 1.82$	$2.33 \pm 0.81$
Mixed symptoms	<b>6</b>	<b>2</b>	$3.90 \pm 1.09$	$1.95 \pm 0.65$

Table 3 Anxiety status of undergraduate nursing interns with different demographic characteristics ( $n=130$ , divide,  $\bar{x} \pm s$ )

variable	grouping	score	$t/F$	$P$
gender	male	$49.55 \pm 10.48$	.585	.934
	female	$49.62 \pm 8.12$		
age	20~22	$49.77 \pm 8.86$	.712	.829
	23~24	$48.98 \pm 6.79$		
Is he/she an only child	correct	$50.23 \pm 10.30$	1.214	.248
	deny	$49.53 \pm 8.10$		
Students	City County	$50.72 \pm 9.58$	.751	.788
	rural area	$48.99 \pm 7.57$		
Personality traits	introverted	$51.81 \pm 7.92$	1.100	.357
	neutral	$49.14 \pm 8.69$		
	Extroverted	$48.06 \pm 4.89$		
Fill in the nursing professional intention	voluntary	$49.76 \pm 8.36$	1.050	.413
	Others' willingness	$49.34 \pm 8.39$		
	Transfers	$49.93 \pm 8.69$		
Per capital monthly household income	<1000	$45.72 \pm 5.45$	.857	.658
	1000~1999	$49.63 \pm 7.63$		
	2000~2999	$50.71 \pm 8.55$		
	3000~4999	$50.55 \pm 10.31$		
employment pressure	not very	$42.92 \pm 5.63$	1.196	.264
	general	$48.44 \pm 8.40$		

	very	50.59±8.28		
Attitude towards nursing	like	51.44±10.93		
	general	48.98±8.10		
	dislike	49.31±5.63		
	Very nasty	58.15±6.81		
Father's Occupation	worker	49.82±8.65	1.399	.126
	cadre	49.38±8.24		
	farmer	52.50±9.41		
Mother's Occupation	worker	49.80±8.56	1.226	.120
	cadre	49.40±8.76		
	farmer	51.87±8.36		

### 2.3 The level of self doubt tendency among undergraduate nursing interns and its influencing factors

In this study, the total IP score of 130 undergraduate nursing interns was (61.07 ± 14.36) points, indicating a moderate level of IP; The highest overall score among the three dimensions is the self doubt dimension, with a score of (26.24 ± 6.51) points, while the lowest score is the passive disguise dimension, with a score of (16.72 ±

4.08) points; From the average scores of each item, self doubt has the highest average score of (3.37 ± 1.04), and the score data for each dimension are detailed in Table 4. Through univariate analysis, it was found that there was a statistically significant difference in IP scores among undergraduate nursing interns of different ages (P=0.042,<0.05). Please refer to Table 5 for details.

Table 4 IP scores of undergraduate nursing interns (n=130, points,  $\bar{x} \pm s$ )

variable	Maximum value	minimum value	score( $\bar{x} \pm s$ )	Equal distribution of each item( $\bar{x} \pm s$ )
Self-ability denial to the total score	95	19	61.07±14.36	—
Self-doubt	40	8	26.24±6.51	3.37±1.04
External attribution	30	6	18.12±4.83	3.27±1.03
Passive camouflage	25	5	16.72±4.08	3.02±1.04

Table 5 IP scores of undergraduate nursing students with different demographic characteristics (n=130, points,  $\bar{x} \pm s$ )

variable	grouping	score	t/F	P
gender	male	66.43±8.92	1.133	.306
	female	64.22±15.64		
age	20~22	62.84±15.45	1.546	.042
	23~24	69.21±12.88		
Is he/she an only child	correct	60.94±18.67	1.019	.461
	deny	64.95±14.50		
Students	City County	64.34±16.42	.767	.836
	rural area	64.52±14.32		
Personality traits	introverted	63.63±19.39	.918	.618
	neutral	64.27±13.60		
	Extroverted	68.89±15.72		
Fill in the nursing professional intention	voluntary	65.09±13.50	1.085	.368
	Others' willingness	63.51±15.89		
	Transfers	65.16±17.66		
Monthly income per capital	<1000	64.32±12.95	1.369	.107
	1000~1999	65.03±14.34		
	2000~2999	66.48±13.20		



	3000~4999	59.92±20.01		
Employment pressure	deny	57.33±22.70	.685	.919
	general	66.21±12.84		
	big	64.32±15.33		
Attitude towards nursing	like	67.23±16.78	.727	.880
	general	63.76±15.06		
	dislike	63.80±14.80		
	Very nasty	75.00±6.27		
Father's Occupation	worker	66.21±15.10	.871	.691
	cadre	63.38±15.29		
	farmer	68.50±7.59		
Mother's Occupation	worker	64.41±13.10	.775	.590
	cadre	62.18±12.29		
	farmer	67.30±6.59		

#### 2.4 Correlation analysis between anxiety and self doubt tendency of undergraduate nursing interns

A Spearman correlation analysis was conducted to examine the relationships between the total anxiety score (and its subdimensions) and the subdimensions of Imposter Phenomenon (IP) among undergraduate nursing interns. As shown in the statistical results, positive correlations were observed between anxiety scores and IP subdimension scores across the three dimensions of IP in the 130 surveyed undergraduate nursing interns ( $r = 0.338, 0.097, 0.111$ ;  $P < 0.05$ ). Details are provided in Table 6

Table 6 Correlation analysis between anxiety and IP of undergraduate nursing students (n=130, r value)

variable	Anxiety	Autonomic dysfunction	Athletic nervousness	Mixed symptoms	Total self-assessment score for anxiety
Self-doubt	.013	.041	.034	.176*	.338
External attribution	.015	.106	.138	.227**	.097
Passive camouflage	-.013	.084	.095	.127	.111

Note: \*\*.Represents correlation on 0.01 (double-tailed)

\*.Represents correlation on 0.05 (two-tailed)

### 3. discuss

#### 3.1 Undergraduate intern nursing student anxiety is at a moderate level

In this study, the average score of 130 nursing intern nurses was (50.55±9.08), which is consistent with the results of Zheng Feifei et al. [12], which showed that the anxiety of undergraduate nursing interns was at a moderate level. Among the four dimensions, the autonomic dysfunction dimension had the highest score of (14.95±3.97) points, and the lowest score was the mixed symptom dimension, with an average score of (3.90±1.09). Regression analysis showed that the attitude towards clinical nursing work was the influencing factor of the anxiety of undergraduate nursing students, that is, the more they liked the nursing major, the lower their anxiety level. As the saying goes, "interest is the best teacher". Li Kui Nan [8] has shown that the more interested he is in a certain profession, the better his psychological state will be. \*Analysis of Causes:\*\*

For students who lack interest in nursing, passive behaviors such as \*\*procrastination, disengagement, and a "just getting by" mentality often manifest during their academic training. These patterns hinder their ability to adopt effective learning strategies and achieve comprehensive mastery of knowledge. Consequently, as they approach graduation and enter clinical internships, these students face heightened pressure due to inadequate preparedness, leading to exacerbated anxiety

and distress [13]. Conversely, students with a genuine interest in nursing tend to exhibit proactive engagement in class and consistently complete assigned learning tasks. This fosters a deeper and more systematic understanding of professional knowledge, enabling them to approach clinical internships with greater confidence and anticipation to apply their skills. As a result, they experience relatively lower stress levels and fewer negative emotions like anxiety or fear. Clinical internships serve as a transitional phase into professional society, during which undergraduate nursing interns are particularly vulnerable to emotional instability. Those who dislike the nursing profession often perceive clinical work as physically demanding, socially undervalued, and emotionally draining. Such perceptions may trigger physiological symptoms of autonomic nervous dysfunction, including chest tightness, palpitations, dizziness, and insomnia [14]. Yao Qian [15] pointed out that due to the lack of knowledge and skills in the early stage of hospital internship, nursing students will inevitably make mistakes in their work, and they also need to prepare for the nurse licensing examination and even the postgraduate examination, which makes them prone to anxiety when facing multiple challenges in internship, study and life. Li Minghui [16] pointed out that internship is a transition stage for nursing students to leave campus and enter the society, which is often accompanied by interpersonal and other pressures, and as undergraduate intern nursing students who have just started

pped into the society, most of them lack good communication skills and appropriate ways to relieve stress, which may lead to anxiety, fear and other negative emotions.

Therefore, to solve the problem of nursing students' anxiety, medical schools and medical institutions should understand the attitude of undergraduate nursing students towards nursing work, and can introduce the society's sense of professional recognition of nurses, the employment prospects of the nursing profession, salary and benefits, and share the heroic deeds of nurses in clinical practice, so as to make the classroom and clinical internship full of fun, and to a certain extent, change their cognition of nurses. A good clinical learning and working environment can be established to shorten the role transition period for nursing students who have just entered the clinical stage of nursing. Psychological counseling can also be provided regularly to help undergraduate intern nursing students who have difficulties and nowhere to talk to alleviate anxiety and psychological pressure, and gradually correct their attitude towards clinical nursing work, so that undergraduate intern nursing students can be relatively independent before they officially enter the workplace, and finally successfully complete the clinical internship task. During the school and internship periods, nursing students should also be encouraged to form a friendly, united, and mutually helpful relationship with their college roommates and internship colleagues through group activities, so as to effectively alleviate negative emotions. In the future of nursing education, medical schools can focus on cultivating good career interests of nursing students, guide and stimulate undergraduate nursing students' love for the nursing profession, and encourage them to actively participate in clinical nursing, which can reduce their anxiety level.

### 3.2 Undergraduate intern nursing students tend to have a moderate level of self-ability denial

In this study, 130 undergraduate nursing interns scored ( $64.45 \pm 15.048$ ) points in self doubt tendency, which is at a moderate level of self doubt and consistent with Yu Xiao's research [7]. The average score for the self doubt dimension among the three dimensions is ( $26.24 \pm 6.51$ ) points; The average score for the external attribution dimension is ( $18.12 \pm 4.83$ ) points; The average score for passive camouflage dimension is ( $16.72 \pm 4.08$ ) points. The highest average score for each item in the self doubt dimension is ( $3.37 \pm 1.04$ ) points; The passive camouflage dimension has the lowest average score among all items, with a score of ( $3.02 \pm 1.04$ ). Therefore, the self doubt dimension scores higher than the other two dimensions. Regression analysis shows that age is a factor influencing the generation of IP among undergraduate nursing interns, meaning that the older they are, the lower their IP value. Analysis of the reasons: During their initial entry into the workforce, undergraduate nursing interns lacked strong ability to transition into different roles and had weak psychological resilience, leading to doubts about their own abilities. However, the older undergraduate nursing interns are, the more diverse their experiences are, and the stronger their psychological resilience and resilience. When faced with setbacks, their psychological endurance and ability to adapt to new environments will be stronger[17]. However, for younger undergraduate nursing students, when they encounter setbacks and failures in clinical practice, they are depressed and will doubt their own ability, and then deny their own ability, and get tired of clinical nursing work and other negative phenomena. Due to the complex and diverse clinical nursing work environment, the lack of clinical nursing experience in undergraduate nursing experience, and the weak communication with superiors and patients, they are more likely to develop self-doubt [18].

Xia Yu [19] pointed out that college teachers and clinical

supervisors should pay more attention to the psychological changes of younger undergraduate nursing interns during the transition stage, enrich their professional experience towards socialization, and reduce their IP value. Jiang Jianfa [5] pointed out that it is necessary to realize that IP is a ubiquitous phenomenon. He proposed that medical students can make mistakes, but at the same time, college teachers, hospital clinical instructors, etc. can also propose positive psychological intervention measures for them, informing them that they may experience negative emotions during their internship and making them believe that these emotions are universal. In addition, school teachers and clinical instructors can develop relevant learning modules, including the value of humility, the value of certain discomfort in avoiding complacency and promoting lifelong learning, etc. This provides a reference for undergraduate nursing interns to adjust their psychological state.

Therefore, in the subsequent nursing teaching, it is recommended that career guidance teachers in colleges and clinical teaching teachers in hospitals strengthen the healthy psychological construction of younger undergraduate nursing interns, attach importance to the psychological fluctuations of undergraduate nursing interns and analyze them, regularly communicate with students, promote their confidence building, enhance psychological resilience and dullness, reduce self doubt, thereby reducing their IP level and improving the quality of nursing training talents.

### 3.3 There is a positive correlation between anxiety and self doubt tendency among undergraduate nursing interns

Spearman's correlation analysis in this study found that the anxiety scores of 130 undergraduate nursing interns were positively correlated with three dimensions of self ability negation tendency ( $P < 0.05$ ). The higher the degree of external attribution, self doubt, and passive disguise, the higher the anxiety score. Analyzing the reasons: Undergraduate nursing interns often feel ignorant and incompetent when they first enter clinical practice.[5] When undergraduate nursing students achieve a certain success, such as successfully and relatively independently completing nursing operations such as intravenous infusion, intramuscular injection, subcutaneous injection, etc., they often think that the nursing operation can be successfully completed because of external factors such as the patient's good blood vessels and good skin, and they often attribute the success to external reasons. When undergraduate nursing interns achieve a certain success, such as successfully and relatively independently completing nursing operations such as intravenous infusion, intramuscular injection, subcutaneous injection, etc., they often believe that it is due to external factors such as the patient's good blood vessels and skin that the nursing operation can be completed smoothly. They often attribute the success to external reasons; When nursing operations fail, undergraduate nursing interns may have doubts about themselves, such as trying to puncture the patient twice without success, even though the patient has small and curved blood vessels that have undergone decades of chemotherapy. For inexperienced patients, they may think that the failure is due to their insufficient abilities, leading to negative emotions such as self blame, regret, and anxiety. When they try to puncture the patient again, they often choose to give up because they are afraid to try and observe that the patient's blood vessel conditions are not good. Related studies [7] indicate that there are two types of ways to attribute success: one is to attribute success to one's own efforts; One way is to attribute success to external assistance, and IP users tend to lean towards the latter, often lacking confidence, which leads to higher levels of anxiety. As the main body of undergraduate nursing interns, they usually fear failure when they have self doubt, which leads to their unwillingness

to take their own steps to try and break through, resulting in passive disguise. This will continuously reduce the opportunities for undergraduate nursing interns to practice nursing operations in clinical practice, limit their nursing operation training, and make it difficult for them to overcome one challenge after another to improve their abilities.

Therefore, in the management process of undergraduate nursing interns, targeted methods can be adopted to correct their unhealthy attribution styles. By cultivating positive attribution styles among undergraduate nursing interns, their IP levels can be alleviated to a certain extent. It is suggested that clinical instructors can use flexible times such as discussions, morning meetings, and class handovers to allow undergraduate nursing interns to objectively analyze the reasons for nursing operation failures and provide correct guidance on the attribution methods of nursing students. Under the Healthy China strategy, the demand for healthcare professionals is continuously increasing significantly. This places higher demands on school education, requiring it to cultivate students into high-quality applied skilled talents with comprehensive development in morality, intelligence, physical fitness, aesthetics, and labor skills. [21] This requires schools to strengthen ideological and political guidance on students' professional qualities in the process of educating them comprehensively, throughout the entire process, which is helpful for realizing their personal value.

#### 4. Conclusion

The level of anxiety and self doubt tendency among undergraduate nursing interns is at a moderate level, and there is a correlation between the two. Attitude towards nursing work is a factor affecting anxiety among undergraduate nursing interns, and age is a factor affecting their IP. It is recommended to reduce anxiety levels in future nursing education by cultivating the professional interests of undergraduate nursing interns, regularly tracking the psychological and emotional status of younger undergraduate nursing interns, strengthening mental health construction, and reducing their IP level.

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