

A Study on the Convergent Factors Related to Self-leadership of Female Freshmen in Health Majors Studying TOEIC

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토익을 학습하는 보건계열 신입여대생의 셀프리더십과 관련된 융복합적 요인 분석

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Abstract This study analyzed convergent factors related to self-leadership of female freshmen in health majors studying TOEIC. The survey was conducted from April 29, 2019 to May 10, 2019 using unregistered self-administered questionnaire for 201 female freshmen in health majors and they were randomly selected from TOEIC class in college located in J city. The results of hierarchical multiple regression analysis show the following. The self-leadership of respondents turned out to be significantly higher in following groups: a group in which self-competence is higher, a group in which subdivision task self-efficacy and coping self-efficacy is higher, and a group in which subdivision chance of locus control from locus of control is lower. Their explanatory power was 49.7%. The results of the study indicate that the efforts to manage self-competence, self-efficacy, and locus of control are required to improve the self-leadership of female freshmen in health majors studying TOEIC. These results can be used for academic counseling guidance to enhance self-leadership of female freshmen in health majors studying TOEIC. In the future research, it is necessary to establish and analyze a structural equation model that affects self-leadership of male and female college students in health majors studying TOEIC.

Key Words : Convergence, Female freshmen in health majors, TOEIC Studying, Self-leadership, Self-competence, Self-efficacy, Locus of control

요 약 본 연구는 토익을 학습 하는 보건계열 신입여대생의 셀프리더십에 대한 융복합적인 관련 요인들을 분석하였다. 2019년 4월 29일부터 2019년 5월 10일까지 J시에 위치한 대학의 토익학습반에서 무작위로 추출된 보건계열 신입여대생 201명에 대하여 무기명 자기기입식 질문지를 사용하여 설문조사를 수행하였다. 위계적 다중회귀분석 결과, 자기유능감이 높을수록, 자기효능감이 하위영역인 과업효능감 및 대처효능감이 높을수록, 통제위치의 하위영역인 우연통제위치가 낮을수록, 셀프리더십이 높았으며 이들의 설명력은 49.7%이었다. 연구결과를 볼 때, 토익을 학습하는 보건계열 신입여대생의 셀프리더십을 높이기 위해서는 자기유능감, 자기효능감 및 통제위치를 관리하는 학습상담지도가 필요하다. 이러한 결과는 토익학습을 하는 보건계열 신입여대생의 셀프리더십을 높이는 학습상담지도에 활용될 수 있다. 향후 연구에서는 토익을 학습하는 보건계열 남녀 대학생과 셀프리더십의 관련요인 탐색과 셀프리더십에 영향을 미치는 구조방정식 모형의 수립 및 분석이 필요하다.

주제어 : 융복합, 보건계열 신입 여대생, 토익학습, 셀프리더십, 자기유능감, 자기효능감, 통제위치

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1. Introduction

The college years help students to create independent ego, and leadership plays an important role in the process to become a member of society[1]. The leadership theory has went through process of development from the trait theory of successful leader, the action theory of successful leader, the situation theory applied to efficient to leadership, and the revolution theory to induce to devotion to the self-leadership which is required universally to accept and overcome constant change[1].

Self-leadership means to maximize suitable abilities for situations by giving constructive thinking and positive intrinsic reward through self motivation and effective actions[2]. It is a concept of autonomy to arouse self motivation by prompting self control, and it emphasizes cognitive strategic actions used to influence oneself[3]. Self-leadership is a general process to overcome internal and external environment surrounding oneself and motivate by self control to achieve its goal[4]. The self-leadership represented in the features such as integrated application with knowledge of culture and majoring and job performance in hospital filed, independence and autonomy, cooperative and communicative ability, critical thinking and immediate coping ability[5] could be an essential virtue of leader what requires to new university students majoring health as future hospital workers.

Self-leadership is an essential ability which requires female freshmen majoring health who stand on the start to study health related subjects to work for medical and administrative work to help patients and their carers after graduating university. It is an essential capability to conduct various and complex tasks with maximum ability and handle unexpected situations creatively[5]. Self-leadership is an essential skill and knowledge that preparatory hospital workers should learn by curriculum of knowledge of culture and majoring

subjects because they have to take care of psychological unstable and tired patients and their carers.

Hospital workers are required strategic self-leadership by leading necessary thinking and actions themselves to trust specialists in diverse fields and communicate with them quickly[6,7] as well as effective response for hospital customers who are hard and urgent physically and mentally. The self-leadership of hospital workers have effect on mental and emotional stability of hospital visitors and treatment effect, and it is an essential factor to blend effective cooperation with performers of hospital services.

Recently, the internationalization of Korean medical service has been activated[8]. It is needed to increase the manpower to conduct international hospital service but the knowledge of foreign languages representing English remains the obstacle to the internationalization of medical service[9]. The internationalized medical service demands that female freshmen in health major who start to learn to becoming preparatory hospital workers should improve their ability that decides by themselves and handle effectively while responding foreigners in hospital[10]. The capability of self-leadership that motivate spontaneously and achieve the goal under the English communication service in the environment of international hospital service is judged as a basic studying goal that female freshmen in health major should learn, and it is an essential education to become a core hospital worker in the future[11].

The improvement of English communication self-leadership through TOEIC(Test Of English for International Communication) as business English should be needed to enhance the international hospital service capability of female freshmen in health majors[12]. TOEIC is a test to evaluate business English ability and it is used to measure certified point of business English ability for private, public, and educational sector[8]. Domestic universities open TOEIC studying class

in regular and special curriculum to give credit or be used as graduation requirement[12]. The female freshmen in health majors could enhance self-leadership of English communication through TOEIC studying and improve job performance capability of international hospital service[8]. To accept the demand of international hospital service actively, the university curriculum should have an enhancing program of English communication self-leadership through TOEIC studying.

The existing study analyzed that the self-competence which is confidence of its ability to achieve goals related with TOEIC studying to improve business English communication of college students in health majors[8,9]. The self-efficacy to show the trust that it could act in the situation suitably and the actualization level of cognitive ability for the strength suggested that it has positive correlativity with self-leadership[3,13,14]. And the necessary for an analysis on the relevance of self-competence and self-efficacy to self-leadership was suggested. Locus of control was analyzed to intertwine with psychological and emotional problems of female freshmen[15]. The program of self-leadership enhancement for hospital workers has been analyzed that it has an effect to improve business skill, communication skill, and self-leadership[5]. English communication skill was reported to improve self-leadership of female students[4,16]. It was suggested that there is needed for both quantitative research and qualitative research on self-leadership of university students[1]. In the existing studies reported the analysis of relation by individual factors related with self-leadership and since it is inadequate to analyze the influence and relative importance of English communication self-leadership of female freshmen in health majors, the investigation is necessary. Therefore, this study aims to investigate general features of female freshmen in health majors and having TOEIC studying as well as the English communication self-leadership of self-competence, self-efficacy and locus of control, and offer base

data for academic counseling guidance to improve self-leadership of female freshmen in health majors and having TOEIC studying by analyzing convergent relation between these factors and self-leadership.

2. Study Method

2.1 Target of Survey

Suitable number of sample for analysis was calculated by G*Power 3.1 program[17]. When power was analyzed by .15 of effect size, .05 of significance level, and .95 of power in multiple regression analysis, ANOVA, and t-test, 1.75 of F rejection region and minimum necessary number of samples were 194. The targets were 250 considering poor answers. The subjects were 250 female freshmen in health majors and participate in TOEIC learning class in the university located in J city and they were selected randomly. 221 questionnaires have been returned(88.4%) and 201 answers excluding 20 trustless answers were analyzed. The research period was from April 29 to May 10, 2019 that was after mid-term exam. To follow research ethics and accuracy, the survey researcher visited the TOEIC class for health majors in the college and explained the purpose and contents of the study, fill-in method of survey, the Personal Information Protection, and the right to refuse to answer, and the targets who agreed to participate in the study and survey directly have received anonymous self-administered questionnaire and recommended to fill it by self enumeration method. The questionnaire were collected by the researcher directly.

2.2 Study Tool

The survey consisted of 11 questions of general features, 6 questions of self-competence, 18 questions of self-efficacy, 7 questions of locus of control, and 18 questions of self-leadership.

2.2.1 General characteristic

The general features, which was chosen to control the clarification of causality on the subject of this study, investigated College English score, major score, simulated TOEIC score, relationship with professor, relationship with friends, school life satisfaction, regular meal, regular exercise, average daily sleep time, hobbies and leisure life, and subjective health status.

2.2.2 Self-competence

The 6 questions of self-competence[19] were made by study tool of Hernandez et al[18] which was adapted to Korea. Its score range is between 6 and 24. The score means that the higher score is, the higher self-competence is. The value of Cronbach's α for used scale was .828, and internal consistency is reliable level.

2.2.3 Self-efficacy

The 18 questions of self-efficacy were made by Tipton and Worthington's tool[20], and they were reconstituted by Yang Sukmi and tested their validity[21]. The subdivisions of self-efficacy consisted of task efficacy, coping efficacy, and emotion control efficacy. Its score range is between 18 and 126. The score means that the higher score is, the higher self-efficacy is. The value of Cronbach's α for used scale was .849, and internal consistency is good level.

2.2.4 Locus of control

The 7 questions of locus of control[23] as a Korean version which is verified the validity and adapted to Korean state from short forms of locus of control scale[22] made by Levenson. The subdivisions of locus of control consisted of internal locus of control, chance of locus of control, and external locus of control. Its score range is between 7 and 28. The score means that the lower score is, the higher locus of control is.

The value of Cronbach's α for used scale was .658, and internal consistency is acceptable level.

2.2.5 Self-leadership

The 18 questions of self-leadership as a Korean version which is verified the validity by modifying and complementing a measurement tool developed by Manz[24]. Its score range is between 18 and 90. The score means that the higher score is, the higher self-leadership is. The value of Cronbach's α for used scale was .871, and internal consistency is acceptable level.

2.3 Data Processing

IBM SPSS Statistics(ver 23.0) was used for statistical analysis. The self-leadership comparison by self-competence, self-efficacy, and locus of control of study target was tested by t-test and ANOVA. Self-competence, self-efficacy, and locus of control was divided into 「lower group」 and 「high group」 by its median value due to absence of cut-off point, and compared its self-leadership by t-test. To understand the influence of each independent variables to influence on self-leadership, variables to show a significant difference in t-test and ANOVA were set as an independent variable, and self-leadership was set as a dependent variable for hierarchical multiple regression analysis. The significant categorical variables of self-leadership was converted to dummy and the dummy was grade of majors. Every significance level of statistics was $p < .05$.

3. Study Result

3.1 Self-leadership by general features

In the Table 1, the self-leadership score of 201 targets was 59.65 ± 8.92 . In the self-leadership by general features, a group with good College English score, a group with good major score, and a group with good simulated TOEIC score was

significant high. Relationship with professor, relationship with friends, school life satisfaction, regular meal, regular exercise, average daily sleep time, hobbies and leisure life, and subjective health status was not significant difference with self-leadership.

Table 1. Self-leadership according to general characteristics

| Variables | N(%) | Self-leadership |
|-------------------------------|------------|-----------------|
| | | Mean±SD |
| College English score | | |
| 80≤ | 165(82.1) | 60.49±8.46 |
| <80 | 36(17.9) | 55.78±10.01 |
| t(p-value) | | 2.927(.004) |
| Major score | | |
| Good | 26(12.9) | 63.96±8.19 |
| Fair | 143(71.1) | 59.41±8.60 |
| Poor | 32(15.9) | 57.19±8.92 |
| F(p-value) | | 4.458(.013) |
| Simulated TOEIC score | | |
| <400 | 109(54.2) | 58.05±8.28 |
| 400≤ | 92(45.8) | 61.54±9.31 |
| t(p-value) | | -2.818(.005) |
| Relationship with professor | | |
| Good | 191(95.0) | 59.95±8.86 |
| Poor | 10(5.0) | 54.80±9.11 |
| t(p-value) | | 1.772(.078) |
| Relationship with friends | | |
| Good | 199(99.0) | 59.67±8.96 |
| Poor | 2(1.0) | 57.00±0.00 |
| t(p-value) | | .421(.674) |
| School life satisfaction | | |
| Satisfied | 176(87.6) | 60.08±8.90 |
| Dissatisfied | 25(12.4) | 56.60±8.60 |
| t(p-value) | | 1.836(.068) |
| Regular meal | | |
| Yes | 52(25.9) | 60.63±8.50 |
| No | 149(74.1) | 59.30±9.06 |
| t(p-value) | | .927(.355) |
| Regular exercise [†] | | |
| Yes | 40(19.9) | 59.23±8.51 |
| No | 161(80.1) | 59.75±9.04 |
| t(p-value) | | -.333(.739) |
| Average daily sleep time | | |
| <7 | 105(52.2) | 60.33±9.07 |
| 7≤ | 96(47.8) | 58.90±8.73 |
| t(p-value) | | 1.142(.255) |
| Hobbies and leisure life | | |
| Good | 103(51.2) | 59.62±8.68 |
| Poor | 98(48.8) | 59.67±9.21 |
| t(p-value) | | -.041(.967) |
| Subjective health status | | |
| Good | 157(78.1) | 60.10±8.97 |
| Poor | 44(21.9) | 58.05±8.64 |
| t(p-value) | | 1.350(.178) |
| Total | 201(100.0) | 59.65±8.92 |

†: At least three times a week, more than 30 minutes at a time.

3.2 Self-leadership by Self-competence

In the Table 2, self-leadership by self-competence was compared. It showed that self-leadership was significant high in total score of self-competence.

Table 2. Self-leadership according to self-competence

| Variables | N(%) | Self-leadership |
|------------------------|------------|-----------------|
| | | Mean±SD |
| Self-competence | | |
| Low group [§] | 99(49.3) | 56.14±8.28 |
| High group | 102(50.7) | 63.05±8.20 |
| t(p-value) | | -5.949(<.001) |
| Total | 201(100.0) | 59.65±8.92 |

§ : Low and high group classified by the median score of each variable.

3.3 Self-leadership by Self-efficacy

In the Table 3, self-leadership by self-efficacy was compared. It showed that self-leadership was significant high in total score of self-efficacy, task efficacy, coping efficacy, and emotion control efficacy as subdivisions of self-efficacy.

Table 3. Self-leadership according to self-efficacy

| Variables | N(%) | Self-leadership |
|-------------------------------|------------|-----------------|
| | | Mean±SD |
| Total Self-efficacy | | |
| Low group | 105(52.2) | 55.92±8.02 |
| High group | 96(47.8) | 63.72±8.05 |
| t(p-value) | | -6.867(<.001) |
| Task self-efficacy | | |
| Low group | 102(50.7) | 55.42±7.67 |
| High group | 99(49.3) | 64.00±8.00 |
| t(p-value) | | -7.763(<.001) |
| Coping self-efficacy | | |
| Low group | 100(49.8) | 55.38±7.79 |
| High group | 101(50.2) | 63.87±7.92 |
| t(p-value) | | -7.661(<.001) |
| Emotion Control self-efficacy | | |
| Low group | 92(45.8) | 57.63±9.00 |
| High group | 109(54.2) | 61.35±8.53 |
| t(p-value) | | -3.003(.003) |
| Total | 201(100.0) | 59.65±8.92 |

3.4 Self-leadership by Locus of control

In the Table 4, self-leadership by locus of control was compared. It showed that self-leadership was significant high in total score of internal locus of control as a subarea of locus of control. It was

significant high in total of locus of control, chance locus of control and a group of lower locus of control as subdivisions of locus of control.

Table 4. Self-leadership according to locus of control

| Variables | N(%) | Self-leadership |
|---------------------------|------------|-----------------|
| | | Mean±SD |
| Total Locus of control | | |
| Low group | 96(47.8) | 57.32±8.58 |
| High group | 105(52.2) | 61.77±8.73 |
| t(p-value) | | -3.639(<.001) |
| Internal locus of control | | |
| Low group | 85(42.3) | 63.01±8.51 |
| High group | 116(57.7) | 57.18±8.42 |
| t(p-value) | | 4.828(<.001) |
| Chance locus of control | | |
| Low group | 109(54.2) | 56.19±7.92 |
| High group | 92(45.8) | 63.74±8.32 |
| t(p-value) | | -6.579(<.001) |
| External locus of control | | |
| Low group | 86(42.8) | 55.58±8.62 |
| High group | 115(57.2) | 62.69±7.90 |
| t(p-value) | | -6.068(<.001) |
| Total | 201(100.0) | 59.65±8.92 |

3.5 Factor to Influence Self-leadership

In the Table 5, hierarchical multiple regression analysis was conducted four models to understand explanation power of independent variables which influence self-leadership of study targets. Model I showed that when general features were applied to regression model, there was not significant relation with self-leadership.

However the explanation power was 4.3%. In the model II, the variables in model I and self-competence was applied. The result showed that the higher self-competence was, the higher self-leadership was, and variables in model II showed 24.2% of explanation power. In the model III, variables in model II and task efficacy, coping efficacy, and emotion control efficacy as subdivisions of self-efficacy were applied. The result showed that the higher task efficacy, coping efficacy, and emotion control efficacy as subdivisions of self-efficacy was, the higher self-leadership was. The variables in model III could explain 41.1% of self-leadership. In the model IV, variables in model III and internal locus of control, chance locus of control, and external locus of control as subdivisions of locus of control were applied. The result showed that the lower chance locus of control as subarea of locus of control, the higher self-leadership was, and variables in model IV could explain 49.7% of self-leadership. According to the above model, 19.8%, 16.9%, and 8.6% of explanation power was increased by applying self-competence, self-efficacy, and locus of control respectively. It means that the self-leadership is highly related with in order of self-competence, self-efficacy, and locus of control.

Table 5. Hierarchical multiple regression of selected variables on Self-leadership

| Variables | Model I | | Model II | | Model III | | Model IV | |
|-------------------------------|---------|-------|----------|---------|-----------|---------|----------|---------|
| | B | t | B | t | B | t | B | t |
| College English score | .131 | 1.418 | .076 | .912 | .122 | 1.649 | .096 | 1.381 |
| Major score [§] | -1.684 | -.947 | -.504 | -.316 | .407 | .285 | 1.732 | 1.282 |
| Simulated TOEIC score | .006 | 1.314 | .001 | .274 | -.003 | -.804 | -.004 | -1.090 |
| Self-competence | | | 1.283 | 7.154** | .537 | 2.557* | .399 | 2.021* |
| Self-efficacy | | | | | .726 | 3.492** | .555 | 2.763** |
| Task self-efficacy | | | | | .384 | 3.415** | .298 | 2.694** |
| Coping self-efficacy | | | | | -.501 | -2.104* | -.405 | -1.777 |
| Emotion Control self-efficacy | | | | | | | | |
| Locus of control | | | | | | | -.444 | -1.435 |
| Internal locus of control | | | | | | | 1.464 | 3.207** |
| Chance locus of control | | | | | | | .449 | 1.022 |
| External locus of control | | | | | | | | |
| Constant | 46.397 | | 31.404 | | 14.517 | | 14.638 | |
| F | 2.985 | | 15.603 | | 19.220 | | 18.776 | |
| R ² | .043 | | .242 | | .411 | | .497 | |
| R ² change | .042 | | .198 | | .169 | | .086 | |
| Adjusted R ² | .029 | | .226 | | .389 | | .471 | |

§ : Dummy Variable, * : p<.05, ** : p<.01.

4. Consideration

The self-leadership score of female freshmen in health majors studying TOEIC was between 18 points and 90 points and its average was 59.65 ± 8.92 . In the general features, relationship with professor, relationship with friends, school life satisfaction, regular meal, regular exercise, average daily sleep time, hobbies and leisure life, and subjective health status was not significant difference with self-leadership. However, College English score, Major score, and simulated TOEIC score was significant difference with self-leadership. This study verified the report of existing study that English communication influences female students self-leadership[4,16], and the English communication self-leadership in this study also analogized similar result that it is related with communication capability of university students in health majors studying TOEIC[26]. The relation with test anxiety[6], studying exhaustion[5,9], studying immersion[7,8], and various psychological factors of university students studying TOEIC showed the similar result from self-leadership of female freshmen in health majors studying TOEIC. In this study, the relation between academic achievement of university student and self-leadership[27] was significant difference of self-leadership by its major score. The result that College English score, major score, and simulated TOEIC score was significant relation with self-leadership assumed that the group which female freshmen in health majors have higher scholastic achievement motive to College English and majors has higher self-leadership, and the study thought constant TOEIC studying enhances self-leadership. In other words, desire and academic achievement toward major subjects and TOEIC studying could increase self-leadership. It is forecasted that the group which shows good achievement of College English, major subjects, and TOEIC studying has

higher self-leadership which give self academic motivation and overcome the situation with positive thinking and intrinsic reward through suitable actions. In the general features of female freshmen in health majors studying TOEIC, the control variable to be significant relation with self-leadership was few. It means the relation between self-leadership and self-competence, self-efficacy, and locus of control is bigger significant statistically. To improve the self-leadership of female freshmen in health majors studying TOEIC, a regular guide of academic counseling to raise achievement support of College English, major subjects, and TOEIC studying should be needed.

The result as the higher self-competence of female freshmen in health majors studying TOEIC is, the higher self-leadership is, was verified that there was significant relation between self-competence and business English communication skill as exiting study reported[4]. It also assumed that it has an effect on self-leadership which is a cognitive strategic activity influencing oneself by arousing self-control and motivation autonomically from having confidence on one's capability or achievement. The relation between self-efficacy and self-leadership showed similar result in this study[3,13,14]. The self-efficacy as a belief to act the most suitable response to the situation influenced the self-leadership which leads positive intrinsic reward through suitable response with self motivation and suitable action. The existing report that locus of control is related with psychological and emotional problem of female university students[15] was similar with the result of this study that there was significant relation between locus of control and self-leadership, and it was confirmed that internal locus of control, chance locus of control, and external locus of control as subdivisions of locus of control was significant relation with self-leadership individually. The result showed

that the higher group of internal locus of control which considers by its behavior was higher self-leadership, and chance locus of control as a tendency to have luck for goal achievement was lower self-leadership. In addition, external locus of control to consider external circumstance beyond its will or belief as occurrence cause was thought to degrade self-leadership. The result suggested that personality education is needed to improve self-leadership of female freshmen in health majors so that they could decide and conduct action without dependence on external circumstance that could not control causes and results by oneself.

To understand the explanation power of independent variables to influence self-leadership of female freshmen in health majors studying TOEIC, hierarchical multiple regression analysis was conducted to 4 models. General features of model I was not significant relation with self-leadership. In the feature of self-competence in model II, self-leadership is significant high when self-competence is higher. In the feature of self-efficacy in model III, self-leadership is significant high when task efficacy, coping efficacy, and emotion control efficacy as subdivisions of self-efficacy is higher. In the feature of locus of control in model IV, self-leadership was significant high when chance locus of control as a subarea of locus of control was lower. The explanation power of whole variables was 49.7%. In the above model, the relation between self-competence, self-efficacy and self-leadership was slightly high because of 19.8%, 16.9%, 8.6% explanation power increase by adding self-competence, self-efficacy, and locus of control respectively. The self-leadership of female freshmen in health majors showed that their self-leadership highly related with self-competence, self-efficacy, and locus of control in order. This study showed similar result to the result of existing study that self-competence[8,9], self-efficacy[3,13,14], and

locus of control[15] was similar relation with self-leadership. It considered that independence, autonomy, cooperativity, communication capability, ability of critical thinking, and immediate response of self-leadership could be improved by having confidence on ability of goal achievement and accomplishment, increasing belief that the target could sympathize others and do suitable action, and considering that the cause of result was created by its decision and control instead of coincidence. This results suggested that self-competence, self-efficacy, and locus of control should be managed in advance to improve self-leadership level of female freshmen in health majors and having TOEIC studying. It was verified that self-competence, self-efficacy, and locus of control influencing female freshmen in health majors studying TOEIC could be an adjustment factor of self-leadership problem. It also suggested that confidence on achievement power, ability to understand circumstance and do suitable action, support education to improve autonomous, creative, and optimum performance ability not to consider cause of result as coincidence should be needed. In order to do so, the operation and development of academic counseling guidance and the relative academic resource for self-leadership of female freshmen in health majors studying TOEIC should be provided.

This study has a limitation because it was a cross-sectional research targeting the female freshmen, no male students, in health majors studying TOEIC and it was difficult that the result could not represent the whole female freshmen in health majors. In the future study, the large samples including male students in health majors are needed to explore the factors related to self-leadership.

The future study should suggest and analyze a structural model which understands a mutual relation and relative importance among factors influencing self-leadership of female freshmen in health majors. It has significance to relation

between self-leadership and self-competence, self-efficacy, and locus of control by fusing individual factors being related with self-leadership of female freshmen in health majors as a pre-hospital worker working for international hospital service.

5. Conclusion

This study reviewed a relation between self-leadership and self-competence, self-efficacy, and locus of control of female freshmen in health majors studying TOEIC studying. The targets were 201 female freshmen in health majors who were participating in TOEIC class in the university located in J city and the survey was conducted from April 29 to May 10, 2019. Targets were selected randomly.

T-test and ANOVA showed that the self-leadership of female freshmen in health majors studying TOEIC was significant high in a group with good College English score, a group with good score of major subjects, a group with good TOEIC score, self-competence, task efficacy, coping efficacy, and emotion control efficacy as subdivisions of self-efficacy, high internal locus of control as a subarea of locus of control. In addition, lower group with chance locus of control and external locus of control as subdivisions of locus of control was significant high. In the hierarchical multiple regression analysis, female freshmen in health majors studying TOEIC showed that the higher self-competence, the higher self-leadership is. The higher task efficacy and coping efficacy as subdivisions of self-efficacy is the higher self-leadership is. Whereas, the lower locus of control as a subarea of locus of control, the higher self-leadership is. The explanation power of total variables was 49.7%. Therefore, a guide of academic counseling should be needed to manage these convergent factors as self-competence,

self-efficacy, and locus of control influencing self-leadership. This study result could support education to increase self-leadership of female freshmen in health majors studying TOEIC, and use for academic counseling guidance. Also, a follow-up investigation is needed to study the structural equation model that mutually influences self-leadership and the relevant factors of self-leadership with male and female students in health majors studying TOEIC.

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