

Comparison Between Cross Cultures Regarding Academic Resilience and Procrastination Tendency among Nursing Students

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Abstract: Background: Nursing students encounter enormous of stresses and challenges to meet the educational process demands than other study programs, because of a unique set of circumstances encompassing their degree. One of these challenges is the academic procrastination. Significantly, resilience is a crucial quality that equips them to meet these stresses and challenges. **Aim:** To compare between cross cultures regarding academic resilience and procrastination tendency among nursing students. **Design:** Descriptive, comparative, correlational research design was utilized in conducting this study. **Setting:** This study was conducted in an accredited nursing science department in a Faculty of Medicine, which affiliated to a Nigerian University and accredited Faculty of nursing which affiliated to an Egyptian University. **Sample.** A convenience sample consisted of (No.520) Egyptian and Nigerian nursing students. **Tools:** A structured questionnaire which consists of three sections was used to collect data pertinent to the current study as follows; 1) Demographic and Academic Data Sheet, 2) The resilience scale (RS), 3) Academic procrastination scale. **Results:** A highly significant cross-cultural difference was found between Nigerian and Egyptian students regarding academic resilience and Procrastination tendency levels. **Conclusion:** The findings demonstrated that academically resilient nursing students have fewer tendencies towards procrastination and more academic performance. **Recommendation:** Nursing colleges might use a resilience measuring tool earlier to students' enrollment to identify their resilient potentials.

Keywords: Academic Resilience, Procrastination Tendency, Nursing Students, Cross-Cultural Study

I. Introduction

Nursing students encounter enormous stresses to meet the academic demands (Jimenez, Navia-Osorio, Diaz, 2010) than other study program, because of a unique set of circumstances encompassing their academic degree. They are confronting an extraordinary different experience in clinical nursing education, overwhelming course loads, standardized testing, and balancing personal, social, and scholarly demands (Boardman, 2016). In addition, students may enter the higher education unprepared, or find the study' programs might not suites their educational pursuit (Sandborne, 2012). Therefore, adapting to these demands requires the capacity to react positively to challenging encounters (Howe, Smajdor & Stöckl, 2012). Significantly, resilience is a crucial quality that equips students to meet these stressors (McAllister & McKinnon, 2009).

Resilience has been known as an essential and well known matter within the nursing profession, including nursing education (Stephens, 2013). A core of resilience purpose is to diminish the influence of hazard influences of the stressful situations and to improve the protective factors such as active coping. The term "resilience" is gotten from the Latin "salire," and accordingly widely defined as the tendency to "bounce back" in adapting to difficulty (Wagnild, 2012). Additionally, Webster, (2016), defined resilience as the capacity to become strong, healthy, or successful again after something bad happens, and the capacity of something to come back to its unique shape after it has been hard-pressed. In other words, resilience is the capability of a human being to react positively and always to adversity, utilizing efficient coping strategies (Seery et al., 2010).

As a concept, resilience incorporates knowledge, individual qualities such as optimism, self-efficacy, and hardiness, and skills which help an individual to adapt to adversity as well as essential for a sustained and successful career in nursing (Ungar, 2012; McDonald et al, 2012). What's more, resilience incorporates a set of attributes exhibited by an individual over a period of time as the capability to be successful, and to develop in a positive way in spite of the stress or adversity that would normally involve the real possibility of a negative outcome (Howe, Smajdor & Stöckl, 2012). It has been contended that resilience is a learned process that utilizes adaptable cognitive, behavioral and emotional responses to adversities and for that reason, resilience is a resource that is accessible to all (Neenan, 2009).The growing body of literature recognizes the significance of upgrading academic resilience skills in the nursing profession (Reyes, et, al, 2015) which considered as one way of helping students to develop their scholarly success (Mwangi, Okatcha, Kinai, & Ireri, 2015).

Additionally, when the student nurses have the resilience skill, they become reflective, optimistic, socially competent, critical thinker and have a feeling of purpose. Consequently, they can manage some difficulty such as being alone, immigration status and financial concerns (Reynoso, 2008; Chen, 2010).

Additionally, resilience assumes a vital role in a students' retention in the scholarship program (Williamson, et al, 2013) and has a positive association with their academic success (Beauvais, Stewart, DeNisco, Beauvais, 2014). Thus, building resilience skills in nursing students is one of the approaches that can be utilized to battle the negative stress experienced and may enhance outcomes of program achievement (Boardman, 2016). Likewise, the benefits of improving resilience may contain better clinical outcomes of patients, a reduction in the loss of workforces and improved personal well-being (Dyrbye & Shanafelt, 2012).

With respect, to a student's 'resilience skill promotion, as already discussed in literature that education is a potential path for resilience promotion (Rogers, 2016) because of high levels of attrition and poor morale in nursing (Hunter, & Warren, 2013). What's more, developing and promoting resilient environments through mentorship programs, is emerging as a way to reduce negative, and increase positive, outcomes of stress. These programs ought to develop constructive and supporting proficient professional relationships, empower inspiration and individual reflection (Jackson, Firtko, and Edenborough 2007; McCann, et, al, 2013). Additionally, a consciousness of the ways in which resilience can be fostered is likely to assist students to be succeeding in their career rather than making a positive contribution to the lives of their patients and clients. To build up evidence-based interventions is mandatory to enhance resilience among trainee and qualified helping professionals have been generally stressed (Hodges et al. 2008; McAllister and McKinnon 2008). In the field of higher education, students have several challenges to their scholarly progression; one of these challenges is academic procrastination (Balkis, 2013). Academic procrastination has been viewed as an intermediary for withdrawing learning, and it adversely impacts accomplishment (Asarta & Schmidt, 2013). The term procrastinate originate from the Latin word "Procrastinus," and means to put off, delay, prolong, or postpone performing a task (Schouwenburg, 2004). Procrastination can be transitory or permanent and can be defined as a component of the behavioral output- putting off the action or the cognitive output- putting off making a decision (Rosario, Costa, Nunez, Pienda, Solano & Valle, 2009).

Procrastination, or the intentional, behavioral delay in starting or finishing of a scholarly task within the desired time frame, is considered as one of the most widespread phenomenon in college settings. Within an academic organization, Steel (2007) reported that, more than 80% of students procrastinated, and up to 50% were chronic procrastinators. Procrastination has many negative effects on students, for instance, wasting time, loss of opportunities, diminished productivity, and lack of success in addition to serious emotional and health problems (Özer, 2011; Sabri, et, al, 2016).

II. Significance of The Study

Worldwide incorporates different cultures which have many differences and resemblances. Whatever the case, a few cultures appears to profit by their particular ways to deal with specific issues more than others .Therefore, there will be a crucial necessity to exchange knowledge and competencies of healthcare professionals among worldwide different cultures. In this manner, worldwide and culturally diverse nursing studies are an effective tool for knowledge advancement (Irvine et, al, 2007; Kononovas, & Dallas, 2009; Suhonen, Saarikoski, & Leino-Kilpi, 2009).

Nevertheless, universally, nursing students usually experience a high level of academic stress because of the intensity of their nursing programs which comprised of scholastic and clinical performance, fear of failure, and time management issues (Wolf, Stidham, & Ross, 2015). To overcome the stressful and demanding clinical practices, health professions students must learn the basic skills to tolerate and regain from adverse situations during their educational training (Peterson & Brommelsiek, 2017). Therefore, resilience has become an increasingly popular term, used to apply to a diverse range of situations (Office for National Statistics, 2013). Since resilience is time-bound and circumstantial in its nature, large portions of today's health care professions students may have insufficient experience with overcoming adversity. Subsequently, academic procrastination occurs, when students unnecessarily postpone completing activities, projects or assignments. Recent studies have estimated procrastination among university students as 20–30%, and sometimes up to 60% (Motie et al., 2012; Lakshminarayan et al., 2013).

Such procrastination appears to make university students becoming self excusive and ignoring their scholarly responsibilities during the entire course of studies (Hussaina & Sultan, 2010). Consequently, as indicated in the literature that there is a plentiful evidences which recommend the incorporation of resilience training in nursing education programs to diminish the procrastination (McDonald, Jackson, Wilkes, & Vickers, 2013). Accordingly, a noteworthy inspiration driving this study was to shed the light on the cross-cultural research, which not yet got enough consideration, which possess a several limitations for the generalizability of the findings of cross-cultural study (Ares, 2016).

In addition, this study might give valuable knowledge for the academic staff and counselors, to understand how academic resilience and procrastination among nursing, operates differently in culturally diverse students that possess different challenges and internalize the value of education differently in order to build compatible educational programs in the future

AIM

To compare between cross cultures regarding academic resilience and procrastination' tendency among nursing students.

RESEARCH QUESTION

To what extent, is there cross-cultural differences between academic resilience and procrastination' tendency among nursing students?

SETTINGS

The study was conducted in an accredited nursing science department in a Faculty of Medicine, which affiliated to a Nigerian University and accredited Faculty of Nursing which affiliated to an Egyptian University.

STUDY SAMPLE

A convenience sampling method was utilized to gather the data from the two study sample consisted of (No.520) Egyptian and Nigerian nursing students. Of these, (No.270) were Egyptian nursing students and (No.250) Nigerian nursing students. The formal length of the university study program of nursing in Nigeria is 5 years, whereas, in Egypt is 4 years.

INCLUSION CRITERIA

- The studied samples originating from the biggest two African universities
- Accredited nursing program
- Adopt the same credit hour system

EXCLUSION CRITERIA

- Internship program year nursing students
- Evidence of a diagnosed psychiatric disorder either current
- The entire pilot study sample

DESIGN

Descriptive, comparative, correlational research design was utilized in conducting the current study

III. Data Collection Tool

Structured questionnaire consists of three sections was used to collect data pertinent to the current study.

First Section: Demographic And Academic Data Sheet: It contains demographic characteristics of undergraduate nursing students such as age, gender, and marital status, academic level and last semester grade point average (GPA).

Second Section: The Resilience Scale (RS): The scale which developed by *Wagnild & Young, (1993)* is a 26-item scale using a 5-point Likert-type scale ranging from strongly disagree (1) to strongly agree (5). The resilience scale (RS), used to measure the studied participants' levels of resilience, and consists of a (17-item) "Personal Competence" subscale and a (9-item) "Acceptance of Self and Life" sub-scale. Consequently, the maximum overall score was 130 (26 x 5) and the minimum overall score was 26 (26 x 1). Student 'nurses was classified on the resilience scale into three categories according to their mean percentage scores to questionnaire items as follow: score <50 % → indicated low level of resilience, between 50% to 66.6% → indicated moderate level of resilience and score >66.6% → indicated high level of resilience.

Third section: Academic procrastination was assessed by 2 x 2 model of time-related academic behavior scale developed by *Strunk, Cho, Steele & Bridges (2013)*. It contains (22 items) which divided into; four sub-scales: procrastination-avoidance (7 items), procrastination-approach (7 items), timely engagement-avoidance (5 items) and timely engagement-approach (7 items). All items were rated on a 5-point Likert-type scale where, (1) was "strongly disagree" and (5) was "strongly agree". Student 'nurses was classified on procrastination scale into three categories according to their mean percentage scores to questionnaire items as follow: score <50 % → indicated low level of procrastination, between 50% to 66.6% → indicated moderate level of procrastination and score >66.6% → indicated high level of procrastination.

TOOL VALIDITY

For the content validity, purpose, the English questionnaire was translated into Arabic by a bilingual expert, who had adequate knowledge of and experience in translation from English to Arabic, and then translated back into English from the Arabic text to meet the cultural applicability. The homogeneity of original and back-translated questionnaire was then evaluated by the researchers. As well as, in order to determine content validity a three nursing education experts were tested the readability of the questionnaire, accuracy, question sequence comprehensiveness of the questions and relevance of the items in the scales and completion time.

PILOT STUDY

Upon completing the tool validity and once the permission was granted by the pertinent authorities, the pilot study was completed through convenience sampling. The entire pilot sample incorporated, was (No.52) which constitutes 910%) of the overall study participants, which divided into (No.27) Egyptian and Nigerian (No.25) studied participants from all over academic years , to clarify any ambiguity in the items, to ensure applicability and the item comprehension. It also used in estimating the needed time for filling the two tools. No modification was done in the questionnaire.

RELIABILITY ANALYSIS

Upon completing the pilot test, the reliability analysis was done for the overall structured questionnaire. The analysis yielded an average Chronbach's alpha of 0.813 for each dimension and 0.838 for all items, indicating sufficient internal consistency.

ETHICAL CONSIDERATION

As for the ethics clearance, approval was gained to conduct the research at each of the sites from the Heads/Deans of those faculties, and the scientific departments. At the interview with the study participants, oral informed consents were secured from each participant. The participants were informed on the purpose and benefits of the study and they were informed that their participation is voluntary and were assured about complete confidentiality of the obtained data and the study would not affect in any way the academic work.

IV. Procedure For Data Collection

An official permission was secured to conduct the study from the pertinent authorities in each country to carry out the study. Then the head of the scientific departments was approached to explain the aim of the study and to obtain their permission to approach the nursing students in their classrooms. The nursing students were solicited in line with research ethics and they were duly briefed on the aim of the study. Potential nursing students were approached at a time in the class suitable to them and their academic staff. Nursing students in each academic year received an explanation of the aim of the study in their classrooms. It is emphasized that the participation was voluntary and that deciding not to participate would not result in a penalty in the course. Also, nursing students were assured that, their privacy and confidentiality would strictly be protected as no personal identifiers were included in the questionnaire and any information given will only be used for research purpose. It was also explained that non-participation in the study would cause no disadvantage for the nursing students. The researchers gave the nursing students directions on how to fill the questionnaire. The questionnaire was administered during regular class times to attain the optimal response rate. The questionnaire took approximately 20–25 minutes to complete it .Confidentiality and anonymity of the data were assured by using anonymized codes instead of students' names. Return of a completed questionnaire implied consent to participate in the study. Data Collection started from July for Nigerian students and November to December, 2016 for Egyptian students.

STATISTICAL ANALYSIS

The completed questionnaire was first coded and entered into the computer. Data analysis was conducted with the Version 21.0 of the IBM SPSS Statistical Product and Service Solutions software. At first the data were screened for missing data and Univariate outliers. Missing data were investigated using frequency counts and no cases were found. Descriptive statistics such as the mean, standard deviation and frequency were used. Also, Chi-square tests were used to analyze the grade differences in academic resilience and procrastination tendency classified by country, furthermore, two way ANOVA test was utilized. All statistical tests were two-tailed, and p value less than.05 was recognized as significant.

V. Results

Overall data were collected from (No. 520) nursing students, of these, (No.270) were Egyptian nursing students and (No.250) were Nigerian. Concerning, the nursing students age, average mean score of the chronological age of Egyptian and Nigerian nursing students was (Mean =20.16, \pm SD = 1.69) and (Mean =26.04, \pm SD = 6.75) respectively. In addition, overall average mean scores of the chronological age of the nursing students in the two countries was (Mean =22.99, \pm SD = 5.65). In terms of Nigerian and Egyptian nursing students' gender, (54 % & 58.9%) were females respectively.

Concerning, Nigerian and Egyptian nursing students' marital status, of the overall Nigerian and Egyptian nursing students (69.6%& 97.0%) were single. As regards Nigerian and Egyptian nursing students' academic years, (29.6%) of Nigerian nursing students was in the first academic year and the lowest percentage (6.3%) was in fifth academic year. Meanwhile, (33.33%) of Egyptian nursing students was in the first academic year and the lowest percentage was in fourth academic year (21.9%).

Regarding the Nigerian and Egyptian nursing students' previous GPA, (46.4%) of the overall Nigerian nursing students, had gotten (D) and (41.5%) of the overall Egyptian nursing students, had gotten (A). In terms of the Nigerian and Egyptian nursing students' academic status, (90.4%) of Nigerian and (95.6%) of Egyptian nursing students, were freshman in the current courses. As for Nigerian and Egyptian nursing students' place of residence during the study, (38.8%), of the Nigerian and (63.7%) of Egyptian' nursing students were live with their families. Concerning Nigerian and Egyptian nursing students' study hours, (54.8%) of the overall Nigerian students was studying (11 to 20) hours per week and (54.4%) of the overall Egyptian students, was studying (1-10) hours per week. With respect to employed and unemployed Nigerian and Egyptian nursing students, (94.0%) of the overall Nigerian and (84.1%) of the overall Egyptian nursing students were unemployed.

As found in table (1): Chi- Square tests of overall resilience scores indicated a highly statistically significant cross-cultural difference between Nigerian and Egyptian' nursing students ($\chi^2= 250.56$, Sig= 0. 000), where (37.4 %) of Egyptian nursing students had a high resilience level, when compared with Nigerian nursing students (2.4%). Meanwhile, (94.0%) of Nigerian nursing students had a low resilience level, when compared to their Egyptian counterparts (25.6%).

Moreover, the findings indicate that there was a highly statistically significant cross-cultural difference in the overall nursing students' academic procrastination scores between Nigerian and Egyptian' nursing students ($\chi^2=112.39$, Sig=0.000), whereas (29.6 %) of Egyptian nursing students, had the highest overall procrastination scores, when compared to their Nigerian counterparts (5.6%). Meanwhile, (78.8%) of Nigerian nursing students, had low overall procrastination scores, when compared to their Egyptian counterparts (33.3%).

It is evident from figure (1) that there was a highly statistically significant difference ($\chi^2=17.39$, P=0.00) between the Nigerian and Egyptian nursing students regarding the overall percentage of resilience scores classified by academic year, where (53.5%) of Egyptian nursing students in the first academic year was highly resilient, when compared to their Nigerian counterparts (16.7%). Moving ahead, (77.8%) of Nigerian nursing students in the second academic year was moderately resilient, when compared to Egyptian counterparts (29%). Moreover, it was observed that (37.7%) of Egyptian nursing students in the fourth academic year were rated themselves as having a low level of resilience ,when compared to the Nigerian counterparts (19.6%).

Figure (2): indicated that there was a highly statistically significant difference ($\chi^2=-17.39$, P=0.002) between Nigerian and Egyptian nursing students regarding overall procrastination percentage scores classified by academic year, where (42.9%) of Nigerian nursing students in the second academic year was rated themselves as high procrastinators, when compared to their Egyptian counterparts (20%). In addition , (35.9%) of Nigerian nursing students, in the first academic year, rated themselves as moderate procrastinators, when compared to their Egyptian counterparts (32%). Moreover, it was observed that (28.9%) of Egyptian nursing students in the first academic year were rated themselves as having a low level of procrastination, when compared to their Nigerian counterparts (27.9. %).

As noted in figure (3): that a highly statistically significant cross-cultural difference ($\chi^2= 225.07$, P=0.000) was found between Nigerian and Egyptian nursing students with respect to the overall percentage of resilience scores classified by academic performance, where (58.4%) of Egyptian nursing students who rated themselves as having a high level of resilience, had gotten (A), when compared to Nigerian counterparts (16.7 %). In the same theme, (39%) of Egyptian nursing students who rated themselves as having a moderate level of resilience had gotten (A), when compared to their Nigerian counterparts (22.2%). as well as (46.4%) of Nigerian nursing students who rated themselves as having a low level of resilience, had gotten (C), when compared to Egyptian counterparts (33.3%).

As indicated in figure (4): that a highly statistically significant cross-cultural difference ($\chi^2= 225.07$, P=0.000) was found between Nigerian and Egyptian nursing students concerning the overall procrastination percentage scores classified by academic performance, where (46.3%) of Egyptian nursing students who rated themselves as having a high level of procrastination, had gotten (A) when compared to Nigerian counterparts (21.4 %). On the same line, (48.7%) of Nigerian nursing students who considered themselves as having a moderate level of procrastination, had gotten (D) when compared to Egyptian nursing students (3%). In addition , (46.7%) of Nigerian nursing students who considered themselves as having a low level of procrastination, had gotten (D) when compared to Egyptian nursing students (3.3%).

Table (2) pointed out that there was a statistically significant cross-cultural difference (F= 4.120, Sig=0 .043) between Nigerian and Egyptian nursing students regarding the overall mean resilience scores classified by gender, where Egyptian male students was significantly higher (Mean =3.70, ± 0.36) than Nigerian male counterparts (Mean =2.71, ± 0.35). Also, Egyptian female students were more resilient (Mean =3.60, ± 0.53) than did their Nigerian female counterparts (Mean =2.77, ± 0.44).

In the same table the results revealed that there was a statistically insignificant cross-cultural difference (F=3.567, Sig=0.060) between Nigerian and Egyptian nursing students regarding the overall mean procrastination scores classified by gender. It is noticed that Egyptian male students were more procrastinators

(Mean =3.31, ±0.37) than Nigerian male counterparts (Mean=2.80, ±0.36).Also, Egyptian female students were more procrastinators (Mean =3.22, ±0.37) than Nigerian female counterparts (Mean =2.83, ±0.44).

As seen in table (3): Chi- Square tests indicated that there was a highly statistically significant cross-cultural difference between Nigerian and Egyptian nursing students regarding low resilience scores and procrastination score levels ($\chi^2= 34.50$, Sig= 0.000), where (80.9%) of Nigerian nursing students who rated themselves as having a low level of resilience, considered themselves as low procrastinators. Meanwhile, (46.4%) of Egyptian nursing students who rated themselves as having a low level of resilience, perceived themselves as low procrastinators. Also, results revealed that, there was statistical insignificant cross-cultural differences between Nigerian and Egyptian nursing students regarding the moderate resilience and procrastination levels ($\chi^2= 1.435$, Sig= 0.488), where (44.4%) of Nigerian nursing students who rated themselves as having a moderate level of resilience, considered themselves as low procrastinators.

Meanwhile, (42.0%) of Egyptian nursing students who rated themselves as having a moderate level of resilience, rated themselves as moderate procrastinators. Furthermore, statistical insignificant cross-cultural differences were found between Nigerian and Egyptian nursing students regarding high resilience scores and procrastination score levels ($\chi^2= 1.484$, Sig= 0.476), where (50.0%) of Nigerian nursing students who rated themselves as having a high level of resilience, considered themselves as low procrastinators. Meanwhile, (39.6%) of Egyptian nursing students who rated themselves as having a high level of resilience, ranked themselves as high procrastinators.

In conclusion, a highly statistical significant cross-cultural difference was found between Nigerian and Egyptian nursing students regarding the relationship between academic resilience and procrastination tendency levels ($\chi^2 = 112.39$, Sig= 0.000). It was noticed that, among Nigerian nursing students overall resilience score, (78.8%) of them were low procrastinators. Meanwhile, within Egyptian nursing students overall resilience score, (33.3%) of them were low procrastinators. on the other hand, among Nigerian nursing students overall resilience score, (5.6%) of them were high procrastinators. Meanwhile, in Egyptian nursing students overall resilience score, (29.6%) of them were high procrastinators

VI. Figures And Tables

Table (1): Differences in Nursing Students Scores of Academic Resilience and Procrastination Tendency levels By Country (No.520)

Country	Academic Resilience levels				Academic Procrastination Tendency levels				
		Low	Moderate	High	Total	Low	Moderate	High	Total
Nigerian Nursing Students	N	235	9	6	250	197	39	14	250
	%	94.0	3.6	2.4	100.0	78.8	15.6	5.6	100.0
Egyptian Nursing Students	N	69	100	101	270	90	100	80	270
	%	25.6	37.0	37.4	100.0	33.3	37.0	29.6	100.0
Total	N	304	109	107	520	287	139	94	520
	%	58.5	21.0%	20.6	100.0	55.2	26.7	18.1	100.0
Difference	Chi- Square =250.564, Sig= 0. 000**				Chi- Square =112.399, Sig=0.000**				

(**) *Highly Statistically Significant At P<0.01*

Figure (1): Differences in Nursing Students Resilience Scores By Country And Academic Year (No.520)

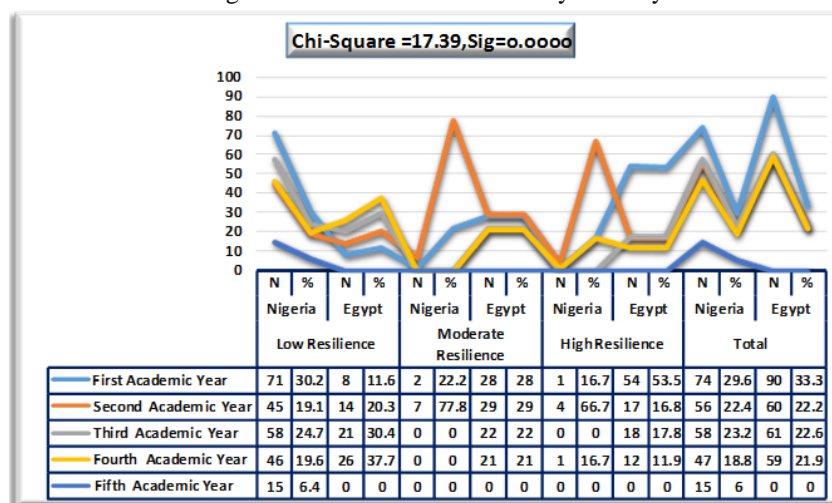


Figure (2): Differences in Nursing Students procrastination Scores by Country and Academic Year (No.520)

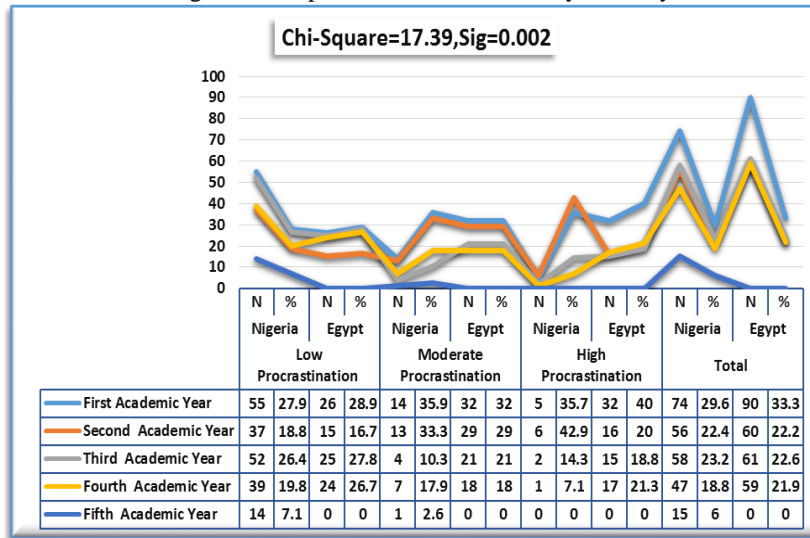


Figure (3): Differences in Nursing Students Resilience Levels Scores by Country and academic performance (No.520)

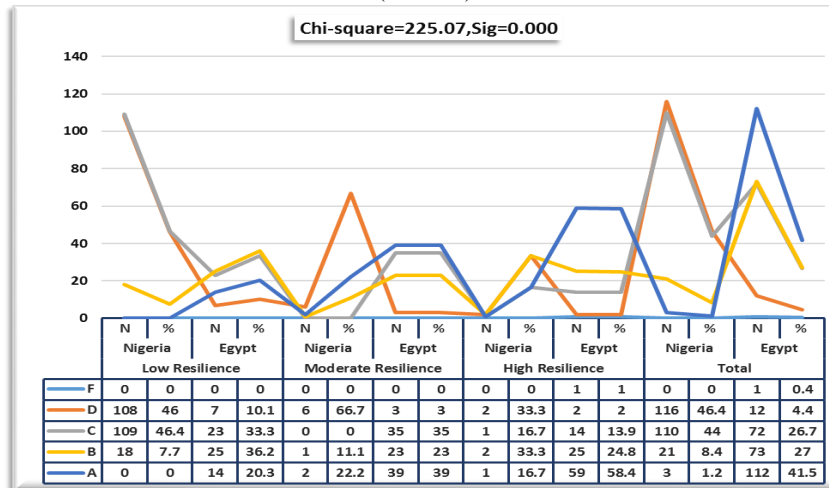


Figure (4): Differences In Nursing Students Procrastination Scores By Country And Academic Performance (No.520)

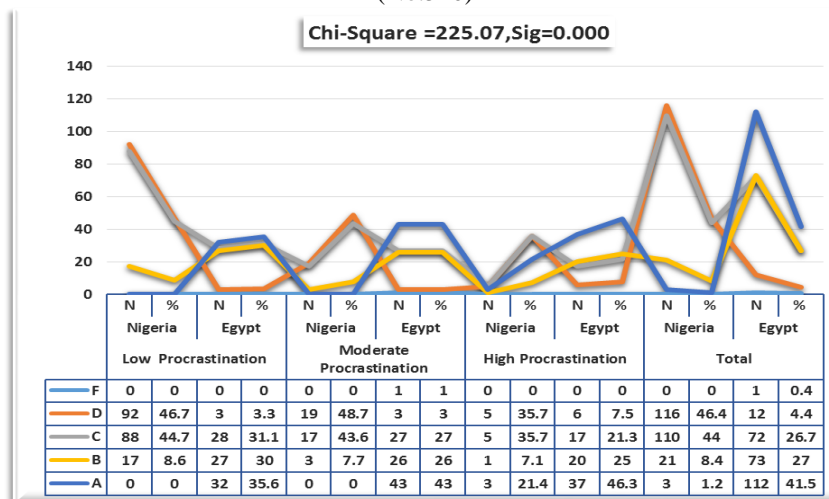


Table (2): Differences in Nursing Students Mean Scores of Academic Resilience and procrastination by Country and Gender (No.520)

Gender	Country	N	Nursing Students Resilience		Nursing Students Procrastination	
			Mean	±SD	Mean	±SD
Male Nursing Students	Nigeria	115	2.71	±0.35	2.80	±0.36
	Egypt	111	3.70	±0.36	3.31	±0.37
	Total	226	3.20	±0.61	3.05	±0.45
Female Nursing Students	Nigeria	135	2.77	±0.44	2.83	±0.44
	Egypt	159	3.60	±0.53	3.22	±0.37
	Total	294	3.22	±0.64	3.04	±0.44
Total	Nigeria	250	2.74	±0.41	2.82	±0.41
	Egypt	270	3.64	±0.47	3.26	±0.37
	Total	520	3.21	±0.63	3.05	±0.44
Difference (Gender * Country)			F= 4.120,Sig=0 .043*		F=3.567, Sig=0.060	

Table (3): Relationship between Academic Resilience and Procrastination among Nursing Students By Country (No.520)

Resilience levels	Country	N %	Procrastination levels			Total	x2	Sig
			Low	Moderate	High			
Low Resilience level	Nigeria	N	190	36	9	235	34.507	0.000**
		%	80.9	15.3	3.8	100.0		
	Egypt	N	32	25	12	69		
		%	46.4	36.2	17.4	100.0		
	Total	N	222	61	21	304		
		%	73.0	20.1	6.9	100.0		
Moderate Resilience level	Nigeria	N	4	2	3	9	1.435	0.488
		%	44.4	22.2	33.3	100.0		
	Egypt	N	30	42	28	100		
		%	30.0	42.0	28.0	100.0		
	Total	N	34	44	31	109		
		%	31.2	40.4	28.4	100.0		
High Resilience level	Nigeria	N	3	1	2	6	1.484	0.476
		%	50.0	16.7	33.3	100.0		
	Egypt	N	28	33	40	101		
		%	27.7	32.7	39.6	100.0		
	Total	N	31	34	42	107		
		%	29.0	31.8	39.3	100.0		
Total Resilience	Nigeria	N	197	39	14	250	112.399	0.000**
		%	78.8	15.6	5.6	100.0		
	Egypt	N	90	100	80	270		
		%	33.3	37.0	29.6	100.0		
	Total	N	287	139	94	520		
		%	55.2	26.7	18.1	100.0		

(**) *Highly Statistically Significant At P<0.01*

VII. Discussion

Nursing is a highly demanding profession with daily occupational, organizational, physical, and psychological demands that may act as stressors that can undermine professional practice (Kornhaber & Wilson, 2011; Howe et al., 2012). With respect to nursing education, nursing students invulnerable to the complex and difficult challenges related to the education process (Mehta, Robinson, & Hillegrass, 2008). One component that has been perceived as defensive and that enhances the adaptation and management of stress and accordingly enhances student nurses' scholastic performance and capability to cope is resilience (Pines et al., 2012). Resilience can be considered as a process of adaptation to adversity and stress. Resilient individuals drive healthy coping styles and are better prepared to meet the challenges (Eley et al., 2013). A resilient individual described as somebody that adapt successfully to complicated and hostile situations, will be able to adapt to the unfavorable situation and gained from the experience with resulting personal growth (Zautra, Hall, and Murray 2010; McAllister & Lowe, 2011).

Throughout the education process, individuals have to deal with assigned projects, term papers and reading materials most of the time. This academic work load points that, a great majority of nursing students often engages in procrastination during their college life (Uzun et al. 2011). Procrastination, which is a repeated failure of doing what ought to be carried out to achieve one 'goals' is currently a shared phenomenon among students, especially those who get ready to their final examination and this is doing more harm to their scholarly performance (Oundo&Chuka, 2013). Consequently, the study sought to compare between cross cultures regarding academic resilience and procrastination tendency among nursing students.

With respect to, nursing students' resilience, a highly significant cross-cultural difference was found between Nigerian and Egyptian nursing students in regards to the overall resilience scores. Where, more than one third of Egyptian nursing students had the significant highest resilience level when compared to Nigerian counterparts. In the interim, the overwhelming majority of Nigerian had the significant lowest resilience level when compared to Egyptian counterparts. It seems possible that these results are because of the difference in internal and external defensive mechanisms which operated differently in Nigerian and Egyptian nursing students' cultures, where external defensive comprise the educational environment that ought to encourage nursing students feeling of achievement. Meanwhile, internal defensive comprise the individual qualities that may possibly facilitate or hinder the potential resilience upgrading of Nigerian and Egyptian nursing students.

At this point of view, It has been acknowledged in the literature that the individual resilience qualities could be culturally sensitive (*Nishi, et, al, 2013*). Besides, one would expect education systems to have crucial functions in students' resilience. In general, colleges foster numerous of the adaptive systems in the individual that produce the capability for resilience over the course of development, likewise affording opportunities for building relationships between peers beyond the family. These relationships contribute to the resilience capacity building (*Masten, 2014*). The present findings seem to be inconsistent with *Hamdan-Mansour, et,al,(2014)* who found that half of the university students had a moderate to high level of resilience.

Academic procrastination is the irrational delay in the beginning or completion of an academic task within the desired time frame, such as, studying for exams or writing a term paper (*Karatas, 2015*). It has many negative influences on students, such as wasting time, loss of opportunities, decreased productivity, and lack of success in addition to serious emotional and health problems (*Grunschel et al., 2013*). A student's academic procrastination, may perhaps be took place, because of the culture difference in academic values and behaviors. Cultural background and values may influence an individual's choice of engaging in or avoiding a challenging task, or may influence the interpretation of procrastinating behaviors (*Klassen, et,al 2010*).

In this context, a highly significant cross-cultural differences were found between Nigerian and Egyptian nursing students regarding overall nursing student procrastination scores, where about the third of Egyptian nursing students, had significantly the highest procrastination scores, when compared to Nigerian counterparts. Possible explanation of this result, it might be related to the difference in academic motivational levels, which operated differently in fostering' Nigerian and Egyptian nursing students procrastination, where low extrinsic motivated nursing students may delay or unable to complete an academic task within the desired time frame. According *Rakes & Dunn (2010)*, motivation is a process through which a person can show a great amount of perseverance and energy in order to finish a task. This study paralleled with previous study of *Uzun Özer, Demir, & Ferrari, (2009a)* which indicated that around third percentage of the nursing students perceived themselves as high procrastinator.

Concerning the classification of resilience scores by gender, a statistically significant cross-cultural difference was found between Nigerian and Egyptian nursing students with respect to the overall mean resilience scores classified by gender, where Egyptian male students were more resilient than their Nigerian male counterparts. Likewise, Egyptian female students were more resilient than their Nigerian female counterparts. A possible explanation for this might be that the capability to react in a consistent mode to the challenges and the capability to recover from unfavorable situations are operated differently in Nigerian and Egyptian male and female nursing students' cultures. The present findings seem to be consistent with those of *Aloba, Olabisi, & Aloba, (2016)* who found Nigerian male students had significantly the highest mean scores on resilience when compared to their female counterparts. Similarly, this study produced results which corroborate the findings of *Abiola & Udofia, (2011)* who found that the Nigerian male students had significantly higher mean scores on resilience compared to their female counterparts.

With respect to the classification of resilience scores by academic year, a highly statistically significant difference was found between Nigerian and Egyptian nursing students regarding the overall percentage resilience scores classified by academic year, where more than half of Egyptian nursing students in the first academic year were highly resilient when, compared to Nigerian nursing students. Moving ahead, more than three quarter of Nigerian nursing students in the second academic year were moderately resilient when, compared to Egyptian nursing students. Moreover, it was observed that more than one third of Egyptian nursing students in the fourth academic year were rated themselves as having a low level of resilience scores when, compared to the Nigerian nursing students.

It seems possible that these results are related to the difference in adjustment levels, which operated differently in increasing the Nigerian and Egyptian nursing students' resilience because of the excessive and the multifaceted nature of the assignments which obliged from the students. Therefore, nursing students resilience decreased when they moved to the higher academic year. This study produced results which corroborate the findings of *Jiang & Pan (2012)* who reported that there was a significant grade features difference in resilience. Grade four college students had lower scores than other grades. On the other hand, the findings of the current study contradict the previous research of *Öksüz & Güven, (2014)* which demonstrated that there were

significant differences between resilience levels of the study sample with respect to grade level. In other words, it was found that increased grade levels lead to the strengthening the resilience.

Regarding the categorization of resilience scores by academic performance, a highly statistically significant cross-cultural differences were found between Nigerian and Egyptian students regarding the overall resilience percentage scores which classified by academic performance, where, more than half of Egyptian nursing students who considered themselves as high resilient, had gotten (A) when compared to Nigerian nursing student. In the same theme, more than one third of Egyptian nursing students who considered themselves as moderately resilient had gotten (A) when compared to Nigerian counterparts. Besides, less than half of Nigerian nursing students that considered themselves as low resilient, had gotten (C) when compared to Egyptian counterparts.

Possible explanation of this results might be related to the difference in nursing students' future-oriented expectation which operated differently in fostering Nigerian and Egyptian nursing students' resilience regardless of the negative events that may be present in their academic environments. According to **Snyder & Lopez, (2007)** future oriented Individuals are likely to participate in defensive behaviors to lessen the chance of immoral things happening in the future and they form clear goals and conjure the requisite paths to reach those goals. The finding of the current study is in agreement with **Scales et al. (2006)** who found that high level of resilience trait is strongly associated with high grade point averages (GPAs). Moreover, **Gizir & Aydin, (2009)** reported that moderate level of academic resilience may help to explain the average academic performance levels among the majority of the students. Thus, the results corroborate the assertion that there is a direct relationship between resilient behavior and academic achievement. Also, the current study finding is in agreement with **Tingting, (2013)** findings, which showed that there were statistically significant correlation between academic achievements and the overall resilience scores.

With respect to nursing students' procrastination' classification by gender, the results revealed that there was a statistical insignificant cross-cultural difference between Nigerian and Egyptian nursing students regarding the overall mean procrastination scores which classified by gender, where Egyptian male students were more procrastinators than their Nigerian male counterparts. Also, Egyptian female students were more procrastinators than their Nigerian female counterparts. This finding support the previous research finding of **He, Liu, Zhou, Yang, Zhang, & Ma, (2011)** which showed that the procrastination of students has significant differences in gender, where male students have the highest scores than female and the students from towns have the highest scores than the students from countries. Also, **Balkis and Duru (2009)** observed that male students intend to procrastinate more than female students.

Concerning nursing students procrastination categorization by academic performance, the results revealed that there was a highly statistically significant cross-cultural differences between Nigerian and Egyptian nursing students with respect to the overall procrastination scores which classified by academic performance, where less than half of the Egyptian nursing students that rated themselves as having a high level of procrastination, had gotten (A) when compared to their Nigerian counterparts. Near half of Nigerian nursing students who considered themselves as having low level of procrastination had gotten (D), when compared to the Egyptian nursing students. A possible explanation for this finding might be related to the difference in the amount of academic workload which incorporates a number of assignments and study hours per week that the Nigerian and Egyptian nursing students bear, which possibly will cause diverse levels of procrastination in both cultures.

According to **Cao (2012a)**, the students with high academic achievement are also likely to chronically engage in procrastination behaviors, and when they do, they tend to procrastinate in a purposive, or active, manner. However, little research has been conducted to investigate high-achieving students' active procrastination. In addition, **Hussain & Sultan (2010)** clarified that procrastination influence the academic performance of students in terms of classroom learning and their contribution in activities, submission of their assignments, preparing for the examinations and academic achievement. Likewise, the work load of assignments and improper time management by the students caused procrastination. This result is out of line of those of **Lakshminarayan, Potdar & Reddy, (2013)** who found that the students that were considered themselves as high procrastinators, performed below average in their academics, whereas low procrastinators scored average or above average in their academic performance. Also, **Jiao, et al, (2011)** indicated that the study participants with the lowest levels of achievement tended to be procrastinators.

Finally, the results indicated that there was a highly significant cross-cultural difference between Nigerian and Egyptian nursing students with respect to the resilience and procrastination score levels, where half of high resilient Nigerian nursing students rated themselves as low procrastinators. Meanwhile, less than half of high resilient Egyptian nursing students rated themselves as high procrastinators. Also, a highly statistical significant cross-cultural difference was found between Nigerian and Egyptian nursing students regarding the relationship between the overall academic resilience and procrastination tendency levels, where

more than three quarter of resilient Nigerian nursing students rated themselves as low procrastinators. Meanwhile, the one third of resilient Egyptian nursing students rated themselves as high procrastinators.

It seems possible that these results were due to the cultural differences in problem-solving coping styles which preferred by Nigerian and Egyptian nursing students to overcome challenging academic situations, where each culture may affect the consideration of the pressures of a given event. Accordingly, nursing students in each of these cultures may be more or less resilient. The present findings seem to be consistent with *Öksüz & Güven, (2014)* who stated that the increase in resilience leads to the escalation of procrastination. Whereas, *He, Liu, Zhou, Yang, Zhang, & Ma, (2011)* findings showed that there are significant negative correlation between procrastination and resilience.

VIII. Conclusion

The most noticeable finding in this study is that a highly significant cross-cultural difference was found between Nigerian and Egyptian nursing students with respect to academic resilience against the stress and procrastination tendency levels. Majority of Nigerian nursing students had low procrastination, when compared to their Egyptian counterparts. Moreover, it was found that the transition to the higher academic level leads to lessening the resilient levels among Egyptian nursing students. Taken together, these findings demonstrated that academically resilient nursing students have fewer tendencies towards procrastination and more academic performance.

IX. Recommendations

- Nursing colleges should use a resilience measuring tool earlier to nursing students' enrollment to identify their resilient potentials. Nursing students with lesser resilience scores must join tutoring program and a nursing faculty's consultant can be assigned to empower these students.
- Pre-registration nursing education should include participative conferences aimed at deliberating the challenges will face nursing students during the educational process.
- Nursing students' supervision should comprise resilient approaches, discussions to support nursing students.
- Nursing faculties need to adopt a preceptor program for nursing students because; the preceptor can provide individualized support to nursing students.
- Resilience improving program should be inculcated in nursing education to enhance the nursing students' resilient potentials which lead to academic success and efficacy.
- Educating nursing students regarding the concepts of self-efficacy and self-regulation can pave the way to student success.
- Qualitative research studies must be done to find out what are the influential factor and its influencing mechanism on nursing student academic resilience.
- It would be interesting for further research to utilize longitudinal study to investigate how student and newly qualified nurses develops resilience over time in different cross cultures.
- It is necessary to control nursing students' academic procrastination to improve students' academic achievement by academic staff in both countries through conducting time and stress management, communication and study skills training programs.
- Considerably more work should be done to determine the influence of personnel and environmental factors on procrastination, which is known to be multifaceted in nature.
- Last but not the least, these findings suggest that the educators and researchers can implement cross-cultural learning activities for nursing students with a common language.

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