



Attitudes toward clinical practice in undergraduate nursing students: A Q methodology study



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SUMMARY

Background: Clinical practice (CP) provides an opportunity to directly apply nursing theories learned in class to practice, with the aim of improving nursing knowledge and skills. Nursing students' perspectives about CP can be diverse.

Objective: To identify nursing students' attitudes toward CP.

Design: Q-methodology, an integration of quantitative and qualitative methods, was used.

Participants: A convenience P-sample consisting of 43 second-year undergraduate nursing students.

Methods: Forty-three selected Q-statements from each of the 43 participants (P-sample) were classified into the shape of a normal distribution using a 9-point bipolar scale. The collected data were analyzed using the pc-QUANL program.

Results: Two discrete factors emerged. Factor I comprised a querulous attitude with a critical perspective. Factor II comprised an enthusiastic attitude with a future-oriented perspective.

Conclusion: The subjective viewpoints of the two identified factors can be applied in planning effective CP for nursing students.

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Introduction

Clinical practice (CP) in the nursing curriculum is an essential prerequisite condition in the education and training of competent professional nurses (Bisholt et al., 2014; Papathanasiou et al., 2014). CP provides an opportunity to directly apply nursing theories learned in class to practice, with the aim of improving nursing knowledge and skills (Ironside et al., 2014; Sharif and Masoumi, 2005; Ulfvarson and Oxelmark, 2012).

The most important learning outcome in CP is real-world experience of communicating with patients and other health care members (Levett-Jones and Lathlean, 2008). Through CP, nursing students are aided in establishing effective interpersonal relationships, which can help in their development of a professional identity (Brown et al., 2012). In addition, nursing students learn their role of nurses and the vital importance of nursing care in the clinical setting (Jonsén et al., 2013; Smedley and Morey, 2010).

Positive experiences of CP improve the critical thinking and problem-solving ability of nursing students, promote a strong sense of belonging, inspire confidence, and enhance nursing professionalism and identity (Blomberg et al., in 2014; Levett-Jones and Lathlean, 2008; Mattila et al., 2010). In contrast, a negative experience with CP can lead to frustration, which detracts from the continuum between

school-based and hospital-based nursing training (Brown et al., 2012), disappointment related to hands-on nursing performance, alienation, and debased self-esteem (Mattila et al., 2010).

CP and its positive experiences/attitudes play significant roles in the future career choices of students including the choice of a workplace after graduation (McKenna et al., 2013). Conversely, negative CP experiences create feelings of being left out and decrease self-esteem (Mattila et al., 2010). Both positive and negative experiences and attitudes toward CP depend on close collaboration between school teachers and clinical staff who are especially responsible for the students' clinical education as a preceptor (Haugan et al., 2012; Jonsén et al., 2013; Löfmark et al., 2012). Therefore, developing high quality clinical environments and harmonious cooperation between the nursing school and hospital are cornerstones in optimizing clinical practice (Andrews et al., 2006; Bisholt et al., 2014; McKenna et al., 2013). Evaluating and reflecting nursing students' diverse experiences and attitudes, in particular, provide a helpful insight to facilitate development of effective clinical teaching strategies in nursing education (Sharif and Masoumi, 2005). Consequently, the experiences, attitudes, perspectives, feelings, and perceptions of each student toward CP must be investigated before and after clinical practice, and the results must be also respected and reflected to maximize clinical learning outcomes.

Few studies have investigated the attitudes of nursing students toward CP. Careful contemplation and proper understanding of the attitudes of nursing students toward CP and reflection of these results

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in planning and evaluating clinical practice are the linchpin to achieve clinical learning objectives. The main objective of this study was to identify subjectivity including attitudes of nursing students toward CP.

Nursing Student CP in South Korea

Nursing education in South Korea operates on two different tracks: three years at a college or four years at a university. Nursing curriculums in colleges and universities can be different or diverse, but nursing students' CP must exceed 1000 h during the two years before graduation (Park, 2012). The level of hospitals for CP varies (university hospital, advanced large hospital, and general or medium-sized hospital), which can produce diverse learning environments. Hence, the attitudes of nursing students toward CP can vary. Hands-on practice or observation-based practice depends on hospital policy. However, unit managers who are involved in CP must have a bachelor's degree, and be capable of evaluating nursing student's performance or attitudes.

Methods

Q Methodology

Q-methodology, first introduced by William Stephenson in 1935, is an integrated research approach that synthesizes quantitative and qualitative methods, which enables conversion of subjective human perspectives into an objective outcome (Akhtar-Danesh et al., 2008; Watts and Stenner, 2005). Q-methodology explores and clarifies individuals' consistent point of view about a phenomenon, interest, or concern (Dziopa and Ahern, 2011).

A Q methodological study involves several steps (Fig. 1). The first is the development of the concourse using diverse sources, such as literature review, interview, scientific papers, books, and newspapers (Akhtar-Danesh et al., 2008). The second is a production process of statements known as the Q-sample (or Q-set). The third is the selection of the sample of participants (P-sample or P-set). The fourth is a process of Q-sorting using a bipolar Q-sort table designed as a grid or data collection table. Individual subjectivity is deduced through the Q-sorting procedure (Watts and Stenner, 2005). After these processes, the collected data are analyzed by varimax rotation for a by-person factor analysis. Several factors are eventually identified and labeled by a team of domain experts. The participants are asked to gather more information about the two most agreeable and disagreeable statements (Akhtar-Danesh et al., 2008; Dziopa and Ahern, 2011). These open-ended comments are a vital part of the Q methodological procedure for the interpretation of the emergent factors' viewpoints, communicating the shared viewpoints, and providing a source of further insights. In factor interpretation, a table commonly connotes the loadings of study participants Q sorting on extracted and rotated factors with z-scores. The eigenvalues and the percentage of the study variance are illustrated by each factor (Watts and Stenner, 2005).

Research Procedure

Concourse (Q Population)

The concourse is representative of the universal point of views about a certain topic, and is central to the process of creating Q-sample (Akhtar-Danesh et al., 2008). In this study, the Q population consisted of statements generated from the following process (Fig. 2). The first

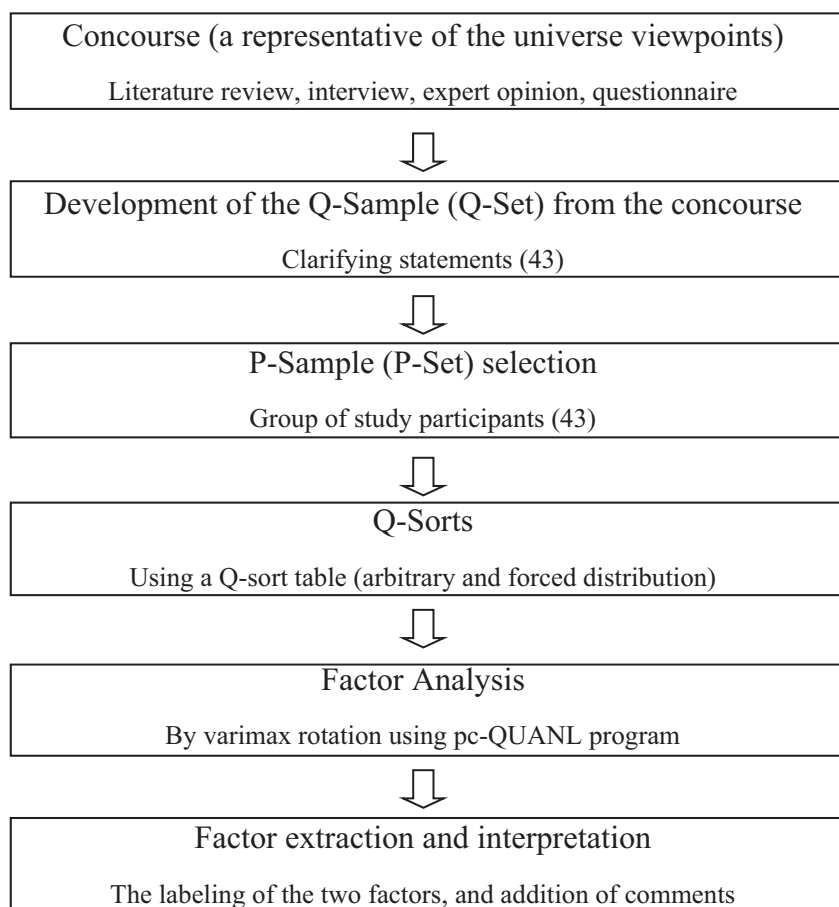


Fig. 1. The practical steps in Q-methodology.

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