



Theory and practice in the construction of professional identity in nursing students: A qualitative study



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SUMMARY

Background: The problem of nurses' professional identity continues to be seen in the disjunction between theoretical training and clinical placements. Moreover, it is not known how nursing students perceive these contradictions or how this discrepancy influences the construction of professional identity.

Objective: To gain insight into nursing students' perception of their theoretical and practical training and how this training influences the process of constructing their professional identity.

Design: Qualitative, ethnographic study.

Participants/Settings: Third-year nursing students at the l'Escola Universitària d'Infermeria Vall d'Hebron de Barcelona.

Methods: Participant observation was conducted in the hospital setting and primary care. Discussion groups were held. The constant comparative method was used for the analysis. The study adhered to the criteria of credibility, transferability, dependability and confirmability.

Results: Students believed that both theoretical and practical trainings were indispensable. Nevertheless, clinical placements were considered essential to confer sense to the theory and to shape their identity, as they helped student nurses to experience their future professional reality and to compare it with what they had been taught in theoretical and academic classes. The role of the clinical placement mentor was essential. With regard to theory, the skills developed in problem-based learning gave novice nurses' confidence to approach the problems of daily practice and new situations. Equally, this approach taught them to reflect on what they did and what they were taught and this ability was transferred to the clinical setting.

Conclusions: For students, both strategies (theory and practice) are vital to nursing education and the construction of a professional identity, although pride of place is given to clinical placements and mentors. The skills developed with problem-based learning favor active and reflective learning and are transferred to learning in the clinical setting.

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Introduction

The nursing literature specifically on nurses' professional identity is diverse but shares a perspective of concern, whether highlighting the importance of constructing a sound identity (de la Cuesta, 2007; Alberdi and Cuxart, 2005) or explaining the reality of a diffuse nursing identity (Ramió, 2006; Cohen, 1988).

Some authors report that some of the manifestations of this diffuse and diverse professional identity among nurses and the discipline of nursing itself are a constant preoccupation with recognition of a well-defined nursing role (Collière, 1993) and the need to demonstrate the specific contribution of nursing that distinguishes it as an independent

discipline (Medina, 1999; Medina, 2005). Although there seems to be a theoretical consensus that care is the main function defining the nursing profession, nurses continue to experience difficulty in acting as carers. That is, there is a discrepancy between theory and practice.

Moreover, it is not known how this problem of identity, manifested in the disjunction between theory and real-world practice, is transmitted during student nurse education or how it is perceived by student nurses. It is especially important to address this gap in knowledge, given that professional identity is a key element in any profession.

Background

Professional identity is that which is constructed in relation to a reference group of professionals and a workspace (Caballero, 2009). The process of constructing an identity as a member of a collective takes place throughout nurses' lives, before entry to nursing studies,

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during training and after qualifying. Nevertheless, the training period is the key in this process (Johnson et al., 2012).

Socialization essentially occurs when students are receiving their basic nursing education (Serra, 2008; Shinyashiki et al., 2006). During this period, they learn the norms, values, behaviors, attitudes and culture of the profession to which they aspire to belong. The aim of socialization is, therefore, to develop a professional identity among future nurses (Fagermoen, 1997). Cohen (1988) believed that all students have to pass through a 4-stage model to “feel comfortable” in their professional role. The first stage consists mainly of basic theoretical learning. In the second phase, the students begin to feel able to question what they learn and to compare information, norms and values. In the third phase, the students must find a model of their professional role that meets both their personal needs and the demands of their profession. In the fourth and final phase, the students feel comfortable with their professional role, which forms part of their self-concept.

The relationship between theory and practice during education is a central topic in a debate that takes place in various disciplines. A notable contribution by Schön (1992) shows how the education of university students is based on a hierarchy of knowledge in which basic sciences take pride of place and clinical placements are relegated to the last rung of the ladder. Along the same line, referring to nursing, Medina (2005) shows how this hierarchical distinction between theoretical knowledge and its practical application is established: clinical placements are placed last due to the supposition that it is in this setting that student nurses will learn to apply basic knowledge. However, what is taught to students, what they will do or see in clinical placements, and what they will experience throughout their university education are what will constitute their idea of a professional nurse. Professional socialization will be the result of novice nurses' own experience as students, which will contribute decisively to the formation of a professional nursing identity (Serra, 2008).

Despite the diversity of studies focusing on students, many analyze the factors related to the reasons for choosing nursing as a career (Halperin and Mashiach-Eizenberg, 2014; Price, 2009), pre-registration student nurses' personal qualities and possible changes after training (Pitt et al., 2014), their view of the clinical learning environment (Papathanasiou et al., 2014), and the process of socialization (Price, 2009; Shinyashiki et al., 2006). However, there is little information specifically on how student nurses perceive the theoretical and practical trainings received and how these trainings contribute to constellating their identities as future nursing professionals.

Objective

To gain insight into nursing students' perception of their theoretical and practical training and how this training influences the process of constructing their professional identity.

Methods

Design

A qualitative research study was conducted within a constructivist paradigm and with ethnography as the most appropriate methodological strategy to approach the study aim. Ethnography aims to understand the meanings assigned by people to their practices (Geertz, 1996). The present study aimed to analyze students' perceptions of the role of theory and practice in their nursing education and how it influences the construction of their professional identity. Their experience as students contributes to creating these meanings.

Setting

The fieldwork was conducted from December 2010 to May 2012 in l'Escola Universitària d'Infermeria Vall d'Hebron de Barcelona

(EUIVH), in the Hospital Universitario Vall d'Hebron (HUVH) and in a primary care center (PCC).

Participants and Sampling

The study population consisted of third-year nursing students studying at the l'EUIVH for a Nursing Degree with the following inclusion criteria: being a third-year student during the 2010–2011 academic year, starting and continuing nursing studies in l'EUIVH exclusively, and participating voluntarily.

Sampling was intentional, aimed at selecting persons with specific characteristics, which would guarantee a greater quantity and quality of information (Valles, 2007). Selection of the EUIVH students exclusively was due to a feature distinguishing it from most university schools of nursing: since the 2002–2003 academic year, the nursing curriculum ceased to be organized by subject matter and became organized by competencies, using a student-centered teaching–learning method, known as problem-based learning.

Data Collection

The participant observation and discussion groups were selected.

Participant observation (Taylor and Bogdan, 1992) was deemed necessary to provide access to and understand the professional reality in which student nurses would participate and be fully immersed during their training. Observation was conducted in the hospital and primary care settings throughout the 4 months when students carried out their clinical placements. The settings consisted of departments where third-year students carried out these placements. The departments were selected with the help of key informants because it was believed that these departments were those that would enable both the students and the nurses involved in their training to contribute a greater quantity and quality of information. The information given to participants on the presence of the investigator varied, always attempting to follow an open strategy. The prolonged fieldwork helped the participants to behave naturally and allowed the setting and activities to remain undistorted by the presence of the investigator. Another contributory factor was that the presence of students on clinical placements from distinct disciplines is very common in these settings. Field notes were recorded throughout the process.

The information gathered during observation was used to prepare and hold the student discussion groups. A student was selected to identify future participants. Personal contact was then made with the identified students, who were invited to participate. Three groups were conducted until reaching information saturation. All groups were led by the main investigator, with 8, 8 and 7 participants (in the last discussion group, one person failed to attend). In each group, sex, age, marital status, geographical origin and work experience were proportionally represented to reflect the health setting; these criteria, and the fact that the students were all studying for the same degree, guaranteed the required homogeneity (to allow and encourage debate) and heterogeneity (sufficient diversity to allow contrasting opinions, which would enrich the discourse). For the script, open-ended, structured questions were prepared with a logical sequence to guide the discussion and elicit the maximum amount of information. The mean duration of each session was 113 min. The sessions were recorded on video and in audio format and notes were taken by the moderator. The recordings were then transcribed and a session was held with the participants of each of the groups to review the contents.

Ethical Considerations

Participation was voluntary at all times and written informed consent was obtained from participants and from the management of the distinct institutions. Data confidentiality and anonymity were guaranteed. The recordings were the responsibility of the investigator and

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