



Nursing students' changing orientation and attitudes towards nursing during education: A two year longitudinal study



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ABSTRACT

Background: Previous studies have shown that nursing students' perceptions of nursing change over time. Little research has been undertaken in the Netherlands of students entering nursing programmes and of how they progress.

Objectives: The aims of this study were to explore whether nursing students' orientation and attitudes towards nursing changed over time, when these changes occurred, and what factors influenced the changes. We also aimed to identify the factors which prompted them to consider leaving their programmes, and what factors affected their motivation to stay.

Design: The study used a longitudinal quantitative design.

Participants: Questionnaires were administered to all students enrolled in a Bachelor's of Nursing programme at four nursing universities of applied sciences in the Netherlands ($n = 1414$). The data for this study were collected during the first two years of the programme, from September 2011 to June 2013. A total of 123 respondents completed the survey each year and this group was used to examine changes over time.

Methods: At four time intervals respondents completed a survey consisting of 1) the Nursing Orientation Tool, 2) the Nursing Attitude Questionnaire and 3) background characteristics. Non-parametric tests were used to explore changes in factor scores over time.

Results: The results showed an improvement in the students' orientation and attitudes towards knowledge, skills and the professional roles of nurses, while empathic behaviour decreased over time. Although the changes showed non-linear patterns over time, the results showed clear effects between the different time points. The reasons for attrition (24%) proved to be related both to problems with the educational programme and to personal problems. An important motivator for students to stay in the course was their passionate desire to become nurses, suggesting that the positive aspects of a nursing career dominated the problems they encountered.

Conclusions: Tutors and mentors should pay more attention to the individual perceptions and problems of first and second-year students, both in the classroom and during clinical placements. Knowledge of the students' perceptions from the very beginning could be vital to study success.

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1. Introduction

Several studies have explored students' reasons for becoming nurses. Both intrinsic factors, such as an altruistic motivation to help other people and a personal interest in healthcare (Halperin and Mashiach-Eizenberg, 2013; Jirwe and Rudman, 2012; Rogstad, 2002), and extrinsic factors, including job security, social status, employment opportunities and the ability to enter tertiary education, appear to influence career choice significantly (Mooney et al., 2008; McLaughlin et al., 2010; Wilkes et al., 2015). Moreover, past experiences as patients or

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with the hospitalization of loved ones, and prior health work experience were motivating factors which made students decide to become nurses (Day et al., 2005; Larsen et al., 2003). Students choose nursing for altruistic and professional reasons, where they see nursing as a profession focused on saving lives and improving healthcare through professional knowledge, which requires expertise and exercising responsibility (Halperin and Mashiach-Eizenberg, 2013; Manninen, 1998). With regard to professionalism, previous studies showed that the perceptions of nursing students changed as they progressed in their educational programmes, and moved from having a lay image to a professional image of nursing (Day et al., 2005; Karaoz, 2003). They revealed less idealistic views of nursing in terms of caring and helping people, and they spoke of nursing in more professional terms as they progressed in their programmes (Bang et al., 2011; Bolan and Grainger, 2009; Sand-Jecklin and Schaffer, 2006). During their educational programmes, students' perceptions of caring changed and they developed a stronger professional self-concept, including satisfaction, skill, leadership, flexibility, communication and the ability to cope with the role of being a nurse (Mackintosh, 2006; Watson et al., 1999a,b). The students who participated in the study by Safadi et al. (2011) started their programmes with traditional altruistic views, but they developed more biomedical, technological views during their education.

Nursing students' conceptions of nursing are largely based on discussions and dialogues between students and teachers at school, and on real observations made in clinical settings (Grainger and Bolan, 2006; Manninen, 1998; Sand-Jecklin and Schaffer, 2006). Students with experience in clinical settings were more focused on aspects of the professional nursing role (Cowin and Johnson, 2011; Safadi et al., 2011). The study by Day et al. (2005) and Sand-Jecklin and Schaffer (2006) showed that students' perceptions of nursing changed as a result of classroom experiences. Interaction with teachers and other students made students realize that nursing was an academic profession. Education programmes not only provide students with new knowledge and skills, but also with changing views on clinical practice, nursing roles and the professional values of nursing.

Healthcare education programmes have recently undergone a thorough change as a result of which the nursing workforce has transformed into a highly educated profession. Radical change in healthcare education took off in the Netherlands when the Bologna agreement was concluded in 2002. The Bachelor's–Master's structure in higher education, including vocational education, was introduced. Nursing students were confronted by a profound change from vocational training to higher education due to the Bologna process. It seems plausible that this change to a higher educational level resulted in more academic requirements, which may have an impact on preliminary withdrawal from the course by students who are more practically minded. It could be suggested that their focus might be less on the professional values, nursing roles, nursing practice and clinical decision-making that are some of the competence categories affected by the Bologna agreement (Salminen et al., 2010).

Nowadays, the Bachelor's of Nursing in the Netherlands is a four-year programme. In the first year, the students gather theoretical knowledge, practical work and communication skills. In the second year, they learn to work in more complex care situations and they complete a clinical placement of 10–20 weeks. The third year consists of a 20 week clinical placement and choosing a specialist nursing area for their final year. The fourth and final year focuses on working and doing research in clinical practice. The aforementioned change in the educational programme may have influenced students' commitment to their studies and to their future profession. The aforementioned change in the educational programme may have influenced students' commitment to their studies and to their future profession. This is an important issue, as commitment reflects an individual's desire to be part of a profession, and is a prerequisite for retention and/or attrition. Clements et al. (2016) explored the links between commitment and attrition, and the results of their study showed that students considered

commitment as essential to managing the demands of their educational programme.

High drop-out rates for student nurses, especially in the first two years of their educational programme, is a growing global concern. In the UK the average attrition rates for student nurses range between 20% and 40% (Clements et al., 2016; Willis, 2015). The attrition rates in Canada are 10–40% (Canadian Nurses' Association, 2009; Grainger and Bolan, 2006), and Australia faces attrition rates up to 40% (Dragon, 2009; Health Workforce Australia, 2014). In the Netherlands attrition rates for student nurses range between 20% and 50%, and are nationally more or less the same (the Netherlands Association of Universities of Applied Sciences; in Dutch: Vereniging Hogescholen, 2016). All these figures refer to attrition rates in the first two years until the year before graduation. However, we must be careful when interpreting these figures, as different definitions are used to describe attrition, and an accurate calculation of attrition rates is complex. Figures provided by the participating universities in our study showed that 45% of students left the programme during the first two years of their education. It is therefore interesting to explore the reasons for early withdrawal and the relationship with students' orientation and attitudes towards the nursing profession.

2. Objectives

The aim of this study was twofold: 1) to explore whether nursing students' orientation and attitudes towards nursing change over time; and when these changes occur, 2) to explore whether and why they ever considered withdrawing from their educational programme, and what intrinsic and extrinsic factors affected their motivation to stay.

3. Methods

3.1. Study Design and Sample

A longitudinal quantitative survey design was used. Respondents were recruited from four nursing universities of applied sciences in the Netherlands. Questionnaires were administrated to all students enrolled in the Bachelor's of Nursing programme.

3.2. Instruments

Students completed a three-part questionnaire consisting of a) the Nursing Orientation Tool (Vanhanen et al., 1999), b) the Nursing Attitude Questionnaire (Toth et al., 1998), and c) background information. The Nursing Orientation Tool (NOT) (Vanhanen et al., 1999) is a widely used self-report instrument and consists of 17 items using a five-point Likert scale. The instrument measures students' orientation towards nursing using three subscales: caring, nursing expertise and life orientation. The caring orientation is based on students' meaningful caring and nursing experiences either in their families or in working life ('A nurse must have a powerful need to take care for others'). The nursing expertise orientation is based on professional nursing experience ('I expect this training to give me a possibility to progress in my career'). Life orientation is based on the need to maintain a balance between family life and studies ('I do not want to make decisions in my life that would risk my family being together') (Vanhanen and Janhonen, 2000b, p. 655). The validity and reliability of the tool were tested in previous studies (Janhonen et al., 2000; Vanhanen and Janhonen, 2000a). The Nursing Attitude Questionnaire (NAQ) was developed by Toth et al. (1998) and is one of the earliest tools for measuring attitudes towards nursing. Attitude towards nursing was defined theoretically 'as the view that persons hold regarding the roles, values, and professional activities of nurses, and the responsibilities nurses have towards society' (Toth et al., 1998). The NAQ consists of a 30-item questionnaire using a five-point Likert scale. The reliability of the NAQ was tested in previous studies (Bolan and Grainger, 2009; Grainger and Bolan, 2006; Toth et al.,

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