Clinical instructors' Motivational roles and perceived effect on absenteeism among student nurses in a tertiary hospital, Benin-City, Nigeria

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Abstract:
BACKGROUND: Absenteeism is a situation whereby students abscond from clinical posting without good reason. This incidence among student nurses contributed significantly to the quality of nursing care; therefore, motivation of student nurses during clinical posting found to be an important ingredient needed in eradicating absenteeism. Consequently, this study aims to determine the reasons why student nurses abscond from clinical posting, its effect and how clinical instructor can motivate student nurses since they are the first role models and have a significant impact on their skill development.

MATERIALS AND METHODS: A descriptive, quantitative design was used to elicit the information from a sample of 80 nurses and 80 students' nurses. Nurses: 25 medical surgical ward, 23 surgical ward, 17 obstetrics and gynecology ward, 15 theaters, and 80 student nurses, statistically drawn through a stratified sampling technique across the wards and school of nursing. Data collected were analyzed using tables, percentages, means, and standard deviation at 0.05 level of significance through the Statistical Package for the Social Sciences software.

RESULTS: The student participants reported that non conducive working environment, working in infectious ward without adequate protection, non-cooperation from clinical instructor, excessive number of clinical hours, embarrassment faced in front of patients and other medical personnel, lack of prompt medical treatment and care when sick, too much workload, and other number of clinical assignments as a major reason why they abscond from clinical posting. The effect of student absenteeism and how students can be motivated is identified in this study.

CONCLUSION: Reported factors leading to absenteeism among nursing students and identified motivating care should be handled carefully by the hospital managers to produce better health-care delivery nurses in future.

Keywords: Clinical instructor, non-conductive working environment, nursing student, motivation, absenteeism.

Introduction

Absenteism is the act of absence oneself from a duty or responsibility. In nursing training, routine school attendance is necessary for student nurses to develop into well-educated, successful and qualified nurse practitioners, who will make significant contributions to the health-care delivery system of the country. Usually, absenteeism is considered as an indication of person poor performance. Like other
professions, absenteeism is considered an important dilemma in the nursing profession.\textsuperscript{7,8} Student nurse attendance during training is compulsory because it is a crucial requisite in training and influences the learning outcomes of nursing training.\textsuperscript{9,10} Absenteeism is a bigger problem that a nurse manager has to face on daily routine, especially teaching hospital where there are regular students on clinical posting.\textsuperscript{7,8} It affects not only delivering patient care but also affect staff moral and ethics.\textsuperscript{11-13} The International Council of Nurses report said that insufficient time allocation for students in clinical learning areas hinders the production of clinically safe and competent nursing graduates.\textsuperscript{14} The impact of nurse’s absenteeism on patient care is that patients will be neglected.\textsuperscript{15,16} Studies found that if the rates of absenteeism increase on a daily basis it will become a problem for health-care units and also for nurse manager; this will not only put burden on other nurses but quality of care will also be affected.\textsuperscript{17,18} Therefore, motivation of student during clinical posting is an important ingredient needed to avert the pending disaster on health-care delivery system in Nigeria.\textsuperscript{19-21} Motivation of student means to give an incentive or encouragement to student for an action.\textsuperscript{22,23} One major aim of nursing training is to motivate nurses to acquire skills for offering appropriate health-care services to patients with multiple complex health problems and to re-orient them from negative attitude like absenteeism during clinical posting has challenged the academic institution for a long time.\textsuperscript{24,25} Clinical posting in nursing education is an important component of the nursing curriculum aimed at actively engaging student nurses with the necessary skills needed for the nursing profession. Studies have shown that, in the clinical setting, the most important barrier to clinical education among students is the lack of interest and motivation.\textsuperscript{26-28} Nursing students need long-term motivation to help others in future. Hence, paying due attention to the concept of motivation is of great importance in clinical education.\textsuperscript{29} Clinical postings form a major role of nursing education has the important part in students’ perceptions during nursing practice.\textsuperscript{30} Clinical instructor represents the professional image, prospect of nursing career and they are the main role model for nursing students. Having a clear image of the career helps the students with choosing nursing as a career to do better in nursing practice.\textsuperscript{31}

Nursing is essentially a practice discipline, informed by a theoretical base.\textsuperscript{32,33} It is crucial that students have a rigorous preparation in clinical area.\textsuperscript{34} Thus, clinical posting provides the necessary practical skills that the students needed, and it is also provide an environment where students among others socialize into the profession.\textsuperscript{35,36} A clinical environment includes everything that surrounds the nursing work, including the clinical settings, the staff, and the patients.\textsuperscript{37} The clinical posting has been shown to have a direct impact on nursing student’s skills.\textsuperscript{38} Recently, there is a report of increase in student absenteeism rate in clinical posting.\textsuperscript{39} This is a major concern in all nursing training institutions in Nigeria and other Africa countries. Increase absenteeism will adversely affect the quality of nursing care in nearest future if not promptly addressed and contribute to increase morbidity and mortality rate in the country. Little research has been done on absenteeism, motivational roles of clinical instructor, and its effect on habitual absenteeism among student nurses during clinical posting. The objectives of the study therefore are to evaluate the reasons why student nurses absenting themselves from clinical posting, its effect and the roles of clinical instructor in motivating student nurses during clinical posting.

**Materials and Methods**

A descriptive quantitative design was used to elicit information from a sample of 80 staff nurses and 80 students. Nurses: 25 medical surgical ward, 23 surgical ward, 17 obstetrics and gynecology ward, 15 theater, and 80 student nurses, statistically drawn through a stratified sample technique across the wards and school. A self-structured questionnaire was designed to obtain the information on reasons why student nurses absent themselves from clinical posting, its effect and the roles of clinical instructor in motivating student nurses developing positive attitude toward clinical posting in the University of Benin Teaching Hospital, Benin City, Edo State. The sample size was determined using Taro Yamane method of sample size calculation. The formula and calculation are as follows: $n = \frac{N}{1 + N(e)^2}$ where, $n = $ sample size, $N = $ total population, and $e = $ margin of error. The study target population are clinical instructors and students nurses; the sample size was selected through stratified probability sample.

The inclusion criteria were as follows: Nurses and students who were willing to participate in the study and who consented after carefully going through the four basic principles of health-care ethics: Autonomy, justice, beneficence, and maleficence that are involve in conducting research studies on human participants. The exclusion criterion was any nurses who are working in general outpatient, which is not included in students’ clinical posting rotation of the hospital. Similarly, the students on the final nursing and midwifery council clinical posting were also excluded, to avoid distraction in preparing for their examination.

A self-structured questionnaire was used to measure the motivational roles of clinical instructor and its
effect on habitual absenteeism among student nurses during clinical posting. The instruments consisting of questions made up of four parts: Section A: Socio demographic data of respondent with three items; Section B: Reasons student nurses absentsing themselves from clinical posting in. It consist of 10 items and the mean score of 3.5 and above rated as a major reason of absenteeism, 2.0–3.4 mean score rated as a moderate reason of absenteeism, and a mean score below 2.0 is rated as may be cause of reason of absenteeism of students in clinical posting; Section C: Motivational role of clinical instructor toward students in clinical posting. It contains eight items and the mean score is rated as stated above; Section D: Perceived effects of student nurses absentsing themselves from clinical posting as reported by nurse clinician in the University of Benin Teaching Hospital. This section contained four items and rated as follows: the mean score of 1.5 and above as major effect of absenteeism of students in clinical posting, 1–1.5 represent minor effect of absenteeism of students in clinical posting, while means scores below 1.0 represent may be effect of student nurses absentsing themselves from clinical posting. The questionnaire was assessed and scrutinized by an expert to verify the content validity ensuring the items measured what is ought to measure. In order to ensure the reliability of the questionnaire, the split-half method was used as an indicator of the instrument stability and consistency. This was done by administering the questionnaire to 10 students and 10 nurses in Igbinedion Teaching Hospital. A correlational score(s) of 0.86 was obtained showing a high level of reliability of the instrument. The researchers personally administer the questionnaire to the students in school of nursing and nurses in University of Benin Teaching Hospital, Benin City, the researchers were present during the filling of the questionnaire for correction as well as clarity and achieved 100% return of questionnaire.

Ethical approval for this study was obtained from the University of Benin Teaching Hospital Ethical Committees where the study took place, with approval reference ADM/E22/ A/ VOL. VII/148180 on October 30, 2019. In line with the Belmont report, the researcher strove to do no harm to participants. Consent form was given to the participants to seek written consent, and verbal consent was also obtained before data collection. Participants were not being exploited financially and physically. The data obtained were coded and analyzed using the Statistical Package for the Social Sciences (SPSS) version 21.00 statistical software (IBM corp. released 2012. IBM SPSS statistics for Windows, version 21.0 Armonk, NY, USA: IBM Corp. variables and research questions were analyzed using the descriptive statistics such as mean and standard deviation.

### Results

Demographic characteristics about the nurses in total from the different wards and student nurses from the school of nursing are reported in Table 1: The sample was characterized by many women 136 (85.0) in the young adult age group of 96 (60.0) and fall between 21 and 35 years. Moreover, more than two-third of the respondents was not married.

| Variable          | Attributes | Frequency (%) |
|-------------------|------------|---------------|
| Age               | 21-25      | 36 (22.5)     |
|                   | 26-30      | 36 (22.5)     |
|                   | 31-35      | 24 (15.0)     |
|                   | 36-40      | 20 (12.5)     |
|                   | 41-45      | 24 (15.0)     |
|                   | 46-50      | 12 (7.5)      |
|                   | 51 and above | 8 (5.0)   |
| Gender            | Male       | 24 (15.0)     |
|                   | Female     | 136 (85.0)    |
| Marital status    | Single     | 68 (42.5)     |
|                   | Dating     | 56 (35.0)     |
|                   | Married    | 32 (20.0)     |
|                   | Divorced   | 4 (2.5)       |

SD=Standard deviation

| ITEMS                                                      | A, n (%) | SA, n (%) | D, n (%) | Sd, n (%) | Mean±SD |
|------------------------------------------------------------|----------|-----------|----------|-----------|---------|
| Non conducive working environment                          | 48(60)   | 22(27.5)  | 7(8.75)  | 3(3.75)   | 3.50±0.3 |
| Posting at Infectious ward                                | 8(10)    | 6(7.5)    | 26(32.5) | 40(50)    | 0.70±0.41 |
| “hospital nurses” are not cooperative                     | 28(35)   | 36 (45)   | 10 (12.5) | 6 (7.5)   | 3.20±1.86 |
| “Numbers of clinical hours” are more.                      | 48(60)   | 22(27.5)  | 7(8.75)  | 3(3.75)   | 3.50±0.3 |
| Nurses embarrass them in front of patients and medical personnel’s (Discrimination) | 20(25) | 10(12.5) | 20(25) | 30(37.5) | 1.50±0.88 |
| They do not receive prompt medical treatment and care when sick | 40(50)   | 18(22.5)  | 12(15)   | 10(12.5)  | 2.90±1.68 |
| They are not given meal at any time of the day             | 32(40)   | 16(20)    | 18(22.5) | 14(17.5)  | 2.40±1.39 |
| They do not like the Nurses and patients                   | 6(7.5)   | 4(5)      | 40(50)   | 30(37.5)  | 0.50±0.29 |
| They are given too much workload by the staff Nurses        | 18(22.5) | 34(42.5)  | 22(27.5) | 6(7.5)    | 2.60±1.51 |
| “number of clinical assignments are more”                   | 24(30)   | 38(47.5)  | 8(10)    | 10(12.5)  | 3.10±1.80 |

SA: strongly agree, A: Agree, D: Disagree, Sd: Strongly disagree, S.D: Standard deviation
Reasons why student nurses absent themselves from clinical posting are reported in Table 2. It shows that non-conducive working environment, posting of students into infectious ward without provision of adequate protective kits, lack of motivation or non-cooperative attitude from nurse-clinician, been subjected to excessive numbers of clinical hours, embarrassment faced by students in front of patients and medical personnel’s, lack of prompt medical treatment and care when sick, lack of incentives, too much workload, and other numbers of clinical assignments were found to be reasons why student nurses absent themselves from clinical posting in University of Benin Teaching Hospital, in Benin City, Nigeria.

Motivational roles of Clinical Instructors in Preventing Absenteeism among student nurses are reported in Table 3: It identifies discipline of err students on a daily basis, empowering students through clinical workshops, give an award to the best clinical student nurse, encouraging clinical achievement in students, effective curriculum planning, given monthly incentives, remove barriers in student-nurse interpersonal relationship and open a constructive feedback between clinical instructor and students as a way of motivating nursing students in clinical rotation.

Effects of student nurses absent themselves from clinical posting are reported in Table 4. It shows that it produces less efficient nurses; it brings about the downfall of nursing profession and reduces patient care satisfaction.

**Discussion**

This study find out that student nurses absent themselves from clinical posting because they are made to feel incompetent in front of patients and other medical personnel’s which implies that they have a poor relationship with clinical-instructor, and this is in agreement with a study conducted in private nursing school in KwaZulu-Natal, South Africa and found supportive relationships between nurse educators and students to be a major factor that fostering better academic performance of students in the clinical area.[40] Based on this present study, the researchers are of the opinion that negative students’ relationship with clinical instructor will create unhealthy working environment for them, thereby, keeping them more away from the clinical posting. Similarly, a study carried out in Iran on learning challenges of nursing students in clinical environment; discovered that unsupportive learning environment experienced by undergraduate nursing students during clinical placements is a major reason of absent themselves from clinical posting.[41]

The outcome of this study also corroborated with a study carried out in Limpopo College of Nursing in 2019 and reported the factors responsible for absenteeism as follows: Inadequate supervision of student nurses by professional nurses, being treated as a workforce in the clinical areas, study for tests and examinations, shortage of staff in the clinical areas, and being inconsiderate of student nurses request for days off in the clinical area, and they recommended that the college should make a provision of 1 week of study for student nurses between the period of clinical posting and examinations or test in school, as most of the students indicated that they absent themselves because of the need to prepare for examinations or test, and the hospitals where they are posted should find a new of not overworking students.

**Table 3: Motivational roles of Clinical Instructors in Preventing Absenteeism among student nurses at University of Benin Teaching Hospital**

| ITEMS | A, n (%) | SA, n (%) | D, n (%) | Sd, n (%) | Mean±SD |
|-------|----------|----------|----------|-----------|---------|
| Discipline err students on a daily basis | 38(47.5) | 20(25) | 8(10) | 14(17.5) | 2.90±1.70 |
| Empowering students through clinical workshops | 34(42.5) | 22(27.5) | 16(20) | 8(10) | 2.80±1.63 |
| Give an award for the best clinical student nurse | 30(37.5) | 26(32.5) | 18(22.5) | 6(7.5) | 2.80±1.63 |
| Encouraging clinical achievement in students | 28(35) | 18(22.5) | 24(30) | 10(12.5) | 2.30±1.33 |
| Effective curriculum planning | 40(50) | 14(17.5) | 18(22.5) | 8(10) | 2.70±1.57 |
| Given monthly incentives | 32(40) | 30(37.5) | 6(7.5) | 12(15) | 3.10±1.80 |
| Remove barriers in student-nurse interpersonal relationship | 44(55) | 26(32.5) | 6(7.5) | 4(5) | 3.50±2.03 |
| open a constructive feedback between nurse clinician and students posted to clinical area | 28(35) | 10(12.5) | 24(30) | 18(22.5) | 1.90±1.10 |

SA: strongly agree, A: Agree, D: Disagree, Sd: Strongly disagree, S.D: Standard deviation

**Table 4: Perceived Effects of Student Nurses Absenting Themselves from Clinical Posting as reported by Nurse Clinical Instructors in University of Benin Teaching Hospital**

| ITEM | YES n (%) | NO n (%) | Mean±SD |
|------|-----------|----------|---------|
| Less efficient nurses are produced | 76 (95.0) | 4 (5.0) | 1.90±1.10 |
| It brings about the downfall of nursing profession | 72 (90.0) | 8 (10.0) | 1.80±1.04 |
| It uplifts the nursing profession | 6 (7.5) | 74 (92.5) | 0.15±0.09 |
| It reduces patient care satisfaction | 70 (87.5) | 10 (12.5) | 1.75±1.02 |
| There is adequate patient care | 4 (5) | 76 (95) | 0.10±0.06 |
due to shortage of staff in the wards and provide them with little incentives for a work well done.\cite{42}

Moreover, this present study also found that clinical instructor can motivate student nurses to go for clinical posting through the following ways: Empowering students through clinical workshops, give an award for the best clinical student nurse, encouraging clinical achievement in students, effective curriculum planning, given monthly incentives, remove barriers in student-nurse interpersonal relationship and open a constructive feedback mechanism between clinical instructors and the students posted to the ward. This finding is in agreement with a study by Baraz et al. in 2015 which opined that a good supportive relationship between students and clinical instructor helped students to internalize among roles expected of them, thereby encouraging student nurses toward going for clinical posting.\cite{43,44} This is further explained by other studies showed that nursing students can be encouraged to go for clinical posting if they can communicate more openly with their immediate teachers and superiors leading to less absenteeism and increases their interest toward going for clinical posting.\cite{45,46}

According to Ironside in 2005 said that “Working together: Creating new partnership between clinical instructors and students and learning together: Creating excellence and shaping the future of nursing education through enacting new pedagogies.\cite{47} Good interpersonal relationship or excellent rapport between clinical instructor and student nurses during clinical posting form a vital tools for reducing absenteeism among students.\cite{48,49}

Furthermore, this study also discovered that when students absenting themselves from clinical posting during their training in schools of nursing, it will lead to the production of half-baked or less efficient nurses. This implies that there will be the production of nurses who cannot give quality care to their patients, thereby unable to meet up with their job expectations. This finding agrees with the study carried out in school of nursing, Oregon Health and Science University, Portland on evaluating the clinical judgment of newly hired staff nurses and found that new graduate nurses had difficulties in meeting job expectations and struggled to make and implement independent nursing interventions due to low clinical teaching while they were undergraduates.\cite{50} They thereby suggested that more orientation time and experience are needed for less-experienced nurses.\cite{51} A world without skillful nurses is a time bomb waiting to be exploded if not addressed and this could happen if student nurses continue to absenting themselves from clinical posting.

Nevertheless, this study was faced with some limitations such as small sample size and student nurses self-reporting since there is a difference in adolescents’ perception of a program and their honesty, likely, the reply of the participants to question was not precise and this may be related to their difference in economic status, associated with the noted bias in their responses.

**Conclusion**

The present study was designed to evaluate the reasons why student nurses absent themselves from clinical posting, its effect and the roles of clinical instructor in motivating student nurses in clinical posting at the University of Benin Teaching Hospital. It is recommended that clinical instructors should receive in-service training as regarding the student-nurses’ interpersonal relationship, how to handle students’ challenges and how to motivate them, as identified in this study. In the same way, the students mind should be prepared by the clinical instructors before posting them to the clinical area, so that they are aware of what is expected of them during clinical placement. Furthermore, the hospital management should organized incentives to all nursing students in clinical placement. Moreover, there should be preceptors in the ward to monitor and mentor student nurses, and finally, nursing schools should intermittently follow-up with the nurses in clinical posting, to assess the attitudes, behaviors, and total well-being of the nursing students.

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**Conflicts of interest**

There are no conflicts of interest.

**References**

1. Ruhle SA, Süß S. Presenteeism and absenteeism at work-an analysis of archetypes of sickness attendance cultures. J Bus Psychol 2020;35:241-55.
2. Tamanja EM. Teacher professional development through sandwich programmes and absenteeism in basic schools in Ghana. J Educ Pract 2016;7:92-108.
3. Rafferty AM. Nurses as change agents for a better future in health care: The politics of drift and dilution. Health Econ Policy Law 2018;13:475-91.
4. Jacobsen K, Meeder L, Voskuil VR. Chronic student absenteeism: The critical role of school nurses. NASN Sch Nurse 2016;31:178-85.
5. Werang BR, Agung AA, Hurit AA. Increasing teacher attendance in Indonesia: A longitudinal study in the remote elementary
6. Asiyai RI. Improving quality higher education in Nigeria: The roles of stakeholders. Int J Higher Educ 2015;4:61-70.
7. Kearney CA. Managing School Absenteeism at Multiple Tiers: An Evidence-Based and Practical Guide for Professionals: Oxford University Press; 2016. p. 28.
8. Baydoun M, Dumit N, Daouk O, Ory L. What do nurse managers say about nurses’ sickness absenteeism? A new perspective. J Nurs Manag 2016;24:97-104.
9. Dale B, Leland A, Dale JG. What factors facilitate good learning experiences in clinical studies in nursing: Bachelor students’ perceptions. ISRN Nurs 2013;2013:628679.
10. Nsemo AD, John ME, Ettifit RE, Mgbekem MA, Oyira EJ. Clinical nurses’ perception of continuing professional education as a tool for quality service delivery in public hospitals Calabar, Cross River State. Nigeria. Nurse Educ Pract 2013;13:328-34.
11. Martin CJ. The effects of nurse staffing on quality of care. Medsurg Nurs 2015;24:54-6.
12. Ticharwa M, Cope V, Murray M. Nurse absenteeism: An analysis of trends and perceptions of nurse unit managers. J Nurs Manag 2019;27:109-16.
13. Ozturk A, Karatepe OM. Frontline hotel employees’ psychological capital, trust in organization, and their effects on nonattendance intentions, absenteeism, and creative performance. J Hosp Market Manag 2019;28:217-39.
14. Hutton A, Veenema TG, Gebbie K. Review of the international council of nurses (ICN) framework of disaster nursing competencies. Prehosp Dis Med 2016;31:680-3.
15. Camden MC, Ludwig TD. Absenteeism in health care: Using interlocking behavioral contingency feedback to increase attendance with certified nursing assistants. J Organ Behav Manag 2013;33:165-84.
16. Dhami S, Züriņa F, Ausserhofer D, Simon M, Kunz R, de Geest S, et al. Absenteeism and presenteeism among care workers in Swiss nursing homes and their association with psychosocial work environment: A multi-site cross-sectional study. Gerontology 2016;62:386-95.
17. Mudaly P, Nkosi ZZ. Factors influencing nurse absenteeism in a general hospital in D Urban, South Africa. J Nurs Manag 2015;23:623-31.
18. Awases MH, Bezuendhout MC, Roos JH. Factors affecting the performance of professional nurses in Namibia. Curations 2013;36:E1-8.
19. Lazowski, Rori A., and Chris S. Hulleman. “Motivation interventions in education: A meta-analytic review.” Review of Educational Research 86.2 (2016): 602-640.
20. Saeedi M, Parvizy S. Strategies to promote academic motivation in nursing students: A qualitative study. J Educ Health Promot 2019;8:56.
21. Jooste K, Hamani M. The motivational needs of primary health care nurses to acquire power as leaders in a mine clinic setting. Health SA Gesondheid 2017;22:43-51.
22. Rode J, Gómez-Bagdethun E, Krause T. Motivation crowding by economic incentives in conservation policy: A review of the empirical evidence. Ecol Econom 2015;117:270-82.
23. Lilleker DG, Michalska KK. What drives political participation motivations and mobilization in a digital age. Polit Commun 2017;34:21-43.
24. Creamer AM, Austin W. Canadian nurse practitioner core competencies identified: An opportunity to build mental health and illness skills and knowledge. J Nurse Pract 2017;13:e231-6.
25. Shin S, Park JH, Kim JH. Effectiveness of patient simulation in nursing education: Meta-analysis. Nurs Educ Today 2015;35:176-82.
26. Heidari MR, Norouzadeh R. Nursing students’ perspectives on clinical education. J Adv Med Educ Prof 2015;3:39-43.
27. Ebrahimian H, Hassankhani H, Negarandeh R, Azizi A, Gillespie M. Barriers to support for new graduated nurses in clinical settings: A qualitative study. Nurs Educ Today 2016;37:184-8.
28. Jamsheed N, Molazem Z, Shariif F, Torabizadeh C, Naji-Kalyani M. The challenges of nursing students in the clinical learning environment: A qualitative study. Sci World J 2016;2016:1846178.
29. Yousefy A, Yazdannik RA, Mohammadi S. Exploring the environment of clinical baccalaureate nursing students’ education in Iran: A qualitative descriptive study. Nurs Educ Today 2015;35:1295-300.
30. Bigdeli S, Pakpour V, Aalaa M, Shekarabi R, Sanjari M, Haghani H, et al. Clinical learning environments (actual and expected): Perceptions of Iran university of medical sciences nursing students. Med J Islam Repub Iran 2015;29:173.
31. Wu LT, Low MM, Tan KK, López V, Liaw SY. Why not nursing? A systematic review of factors influencing career choice among healthcare students. Int Nurs Rev 2015;62:547-62.
32. Miller JE, Allen MN, Morrow RA. Critical theory: Critical methodology to disciplinarity in foundations in nursing. Can J Nurs Res 2001;33:109-27.
33. Marañón AA, Pera MP. Theory and practice in the construction of professional identity in nursing students: A qualitative study. Nurse Educ Today 2015;35:859-63.
34. Foster H, Ooms A, Marks-Maran D. Nursing students’ expectations and experiences of mentorship. Nurse Educ Today 2015;35:18-24.
35. Cruess RL, Cruess SR, Boudreau JD, Snell L, Steineert Y. A schematic representation of the professional identity formation and socialization of medical students and residents: A guide for medical educators. Acad Med 2015;90:718-25.
36. Haraldseid C, Friberg F, Aase K. Nursing students’ perceptions of factors influencing their learning environment in a clinical skills laboratory: A qualitative study. Nurse Educ Today 2015;35:e1-6.
37. Dimitriadou M, Papastavrou E, Efstathiou G, Theodorou M. Baccalaureate nursing students’ perceptions of learning and supervision in the clinical environment. Nurs Health Sci 2015;17:236-42.
38. McCutcheon K, Lohan M, Traynor M, Martin D. A systematic review evaluating the impact of online or blended learning vs. face-to-face learning of clinical skills in undergraduate nurse education. J Adv Nurs 2015;71:255-70.
39. Chukwu EO, Yakubu NH, Haruna H, Hamina D, Chia T, Fiasse TM, et al. Absenteeism among nursing students: A case study at University of Maiduguri, Borno State, Nigeria. Int J Manag Fuzzy Syst 2017;3:46-51.
40. Dube MB, Mlotshwa PR. Factors influencing enrolled nursing students’ academic performance at a selected private nursing education institution in KwaZulu-Natal Curations 2018;81:e1-7.
41. Baraz S, Memarian R, Vanaki Z. Learning challenges of nursing students in clinical environments: A qualitative study in Iran. J Educ Health Promot 2015;4:52. [doi: 10.4103/2277-9531.162345].
42. Browne-Ferrigno T, Muth R. Leadership mentoring in clinical practice: Role socialization, professional development, and capacity building. Educ Administ Quarterly 2004;40:468-94.
43. Farnan JM, Snyder Sulmasy L, Worster BK, Chaudhry HJ, Rhyne JA, Arora VM, et al. Online medical professionalism: Patient and public relationships: Policy statement from the American College of Physicians and the Federation of State Medical Boards. Ann Intern Med 2013;158:620-7.
44. Ironside PM. Working together, creating excellence: The experiences of nursing teachers, students, and clinicians. Nurs Educ Perspect 2005;26:78-85.
45. Ingrassia JM. Effective radiography clinical instructor characteristics. Radiol Technol 2011;82:409-20.
46. Masutha TC. Factors leading to student nurse’s absenteeism in the Limpopo College of nursing, during psychiatric nursing science clinical placement (Doctoral dissertation). South Africa; University of Venda; 2019. http://hdl.handle.net/11602/1351.
47. Lasater K, Nielsen AE, Stock M, Ostrogorsky TL. Evaluating the clinical judgment of newly hired staff nurses. J Continu Educ Nurs 2015;46:563-71.