

PROSPECTIVE STUDY ON PERCEPTIONS OF ACTUAL AND PREFERRED HOSPITAL CLINICAL ENVIRONMENT OF STUDENT NURSES AND MIDWIVES IN IMO STATE UNIVERSITY OWERRI

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Abstract: This is a prospective study on perceptions of actual and preferred hospital clinical learning environment of student nurses and midwives in Imo state university, Owerri. The study was guided by four objectives and four research questions. This research specifically assessed the student nurses view of their actual and preferred hospital CLE, determine if differences exist in student nurses view of their actual and preferred hospital CLE, establish the association between the actual and preferred hospital CLE and identify factors that influence student nurses opinion of their hospital CLE. The researcher reviewed and summarized related literatures in the study. The research design adopted was descriptive research design. The target population was 254 nursing and midwifery students in fourth and fifth year in the department of nursing science, Orlu campus. The sample size of 152 nursing students was purposively chosen for the study. Questionnaire was used as instrument of data collection. Data collected were analyzed using descriptive statistics such as frequency, percentages and mean were presented using tables for easy interpretation. The findings revealed that there is significant difference in the student nurses and midwives' views of their actual and preferred hospital clinical learning environments (>2.50) in all the groups except personalization (<2.50). This implies that the student nurses' view of the preferred hospital clinical learning environment is always higher than their view of the actual hospital clinical learning environment. They were agree to be the factors that influence student nurses' opinion of their actual and preferred hospital clinical hospital environment (mean scores >2.50); except age of student (mean scores <2.50) and gender of student (mean scores >2.50). The importance of helping students feel valued and interpersonal relationships in the clinical area need to be highlighted in the preceptor preparation programmes. Recommendations for further studies were made.

Keywords: Perceptions; Actual and preferred hospital clinical environment; Student nurses; Midwives; Owerri

1 INTRODUCTION

Nursing education relies on clinical practice experiences, which are integral components of the nursing curriculum (American Association of Colleges of Nursing . Clinical placements provide nursing and medical students with opportunities to apply and integrate theoretical knowledge and skills learned in the classroom into real-world patient care situations, as emphasized by the National League for Nursing and accredited by the Commission on Collegiate Nursing Education [1].

Nursing is a practice-based profession that relies heavily on experience. As a result, clinical work is a crucial component of nursing education, and the environment in which students gain practical experience plays a vital role in their learning. However, controlling this environment can be challenging. The clinical environment is complex, influenced by various psychological factors, including cognitive, social, cultural, emotional, motivational, and educational elements. To foster effective clinical learning, it's essential to involve nursing students in interactive clinical activities, ensure staff support meets their learning needs, and develop innovative educational strategies [2]

clinical settings provide students with unique learning opportunities where classroom theory and skills are applied to real-life situations. In addition to fostering students' application of knowledge, skills, and attitudes in clinical contexts, it is crucial that valuable clinical time be utilized effectively and productively [3].

The clinical setting is crucial in shaping how nursing and midwifery students learn and develop their practical skills. It provides an opportunity for students to apply theoretical knowledge to real-world situations, helping them gain essential decision-making abilities in a clinical context. During their education, these students spend a significant portion of their time in clinical environments to improve their practical skills four key aspects of the clinical learning environment that influence student learning; physical space, psychosocial and interaction factors, organizational culture, teaching and learning components. These elements collectively impact the quality and effectiveness of the clinical learning experience for nursing and midwifery students [4].

The social and interpersonal aspects of the clinical environment, including communication styles, behaviors, and attitudes of healthcare professionals, instructors, and students, significantly impact the learning process in clinical settings. Research consistently shows that the quality of the nursing learning environment plays a critical role in shaping nursing students' perceptions of their clinical learning experiences. Students who are passionate about their chosen profession tend to adapt more easily to practical training. Positive factors influencing students' views of clinical learning environments include a welcoming ward atmosphere and strong supervisory relationships. On the other hand,

challenging clinical learning environments are characterized by: unwelcoming nursing staff, clinical instructors lacking expertise in specific clinical areas, and mismatch between student capabilities and patient care complexity. These factors can negatively impact students' perceptions and experiences in clinical settings [5]

In Nigeria, nursing and midwifery education is offered through both hospital-based diploma programs lasting three years and university degree programs of four years (for direct entry students) or five years duration. In addition to theoretical components, both pathways have mandatory clinical rotations across various health facilities and community settings. As part of their clinical training spanning three to five years, nursing and midwifery students are placed across multiple departments and care environments. Each new posting requires students to adjust to different staff, patient groups, diseases, and workplace cultures, all while having their performance evaluated continuously [6].

Clinical practice is a fundamental component of nursing education, playing a vital role in developing essential professional skills and enhancing the overall quality of teaching. The clinical setting provides nursing students with crucial opportunities to transform theoretical knowledge into practical skills that are indispensable for patient care. This hands-on experience enables students to bridge the gap between classroom learning and real-world application, fostering the development of clinical competence and professional confidence [7].

The hospital ward comprises the core of the clinical learning environment for nurses and midwives, as it is where students spend most of their practical training duration. The ward climate and dynamics significantly influence the experiences of all those present, including nursing and midwifery students. Hence students' perception of their hospital-based clinical training summarizes their interpretations of interactions within this social context. Understanding the prevailing social climate and environment characteristics provides insight into people's behaviors and emotions in that setting. Similarly, exploring nursing and midwifery students' views of their actual and ideal clinical learning settings can reveal aspects requiring improvement to maximize learning. It can also help enhance the educational quality of clinical exposures [8].

Across countries, students report similar perceptions of their clinical environments. Some studies have identified gaps between actual hospital-based training environments encountered by students and preferred learning conditions. Generally, students prefer more favorable clinical environments than what they perceived as actually existing. Specifically, students expect environments with greater personalization of teaching, student empowerment, innovative educational activities, and task alignment. Research also suggests clinical experiences can positively influence students' attitudes towards that health facility [9]

Further research reveals that while clinical environments effectively promote safe practices, they are often not inclusive of student needs or open to innovative educational activities that challenge the current situation. Students from diverse backgrounds find clinical adjustments especially difficult. However, positive clinical training experiences shape not just learning outcomes but also future career decisions. There are few studies exploring nursing and midwifery students' perceptions of both actual and preferred clinical learning environments. In fact, no published Nigerian study has examined clinical environments from the nursing and midwifery student viewpoint [10].

Despite the immense impact of clinical training on student development, little research gives voice to Nigerian nurses and midwives' experiences or expectations of these environments. Hence, this study aims to address this gap by assessing nursing and midwifery students' perceptions of current and ideal hospital-based clinical learning settings in Enugu state. The findings may provide specific targets for enhancing clinical education to produce more competent nurse and midwives [11].

While clinical training is integral to nursing and midwifery education, creating optimal learning environments has proven challenging. Research shows that negative clinical experiences induce high stress and anxiety among students, contributing to attrition rates. Sources of anxiety include lack of experience, unfamiliar contexts, difficult patients, fear of errors, and faculty evaluation. Additionally, studies reveal students facing unfriendly, indifferent, and unsupportive nursing staff during placements. Feeling excluded affects their sense of belonging, further elevating anxiety and demotivating learning. Although mild anxiety can enhance perceptions, higher levels impede skills and performance acquisition [11]

The researcher being a nursing and midwifery student for over five (5) years has often heard students describe difficult clinical experiences from lack of direction to not feeling like team members. Despite being an extra employee, implying focused on learning not workforce contribution, students feel pressured to demonstrate competence through clinical work with limited guidance. While scant studies have examined student perspectives on actual versus ideal clinical learning environments, none have done so in Nigeria. As proper environments facilitate learning, the researcher is interested in assessing Nigerian nursing and midwifery students' perceptions of their clinical experiences versus preferences. This could identify targets for maximizing the educative value of this indispensable yet challenging component of nursing and midwifery education [12].

The absence of published insights into Nigerian nursing and midwifery students' clinical environment perspectives represents a gap needing addressed. Findings can help training programs align placements with learner needs for greater satisfaction, lowered anxiety and attrition, and enhanced patient care capabilities.

2 MATERIALS AND METHODS

2.1 Research Design

This research adopted a cross-sectional descriptive survey design. The cross-sectional approach involves collecting data at a single point in time. It provides an opportunity for the researcher to study the phenomenon as it occurs by assessing student nurses' and midwives' perceptions of their actual and preferred clinical learning environment at Imo State University, Owerri.

2.2 Area of Study

The research was conducted in the Department of Nursing Science at Imo State University, located on the Orlu campus in Imo State, specifically among the fourth and fifth year students of the department. This department is situated next to the Accident and Emergency Unit of the Imo State University Teaching Hospital Orlu (IMSUTH) and is dedicated to guiding and educating student nurses on the essential principles and legal aspects of the nursing profession.

2.3 Target Population

According to Glen (2019), the target population in epidemiology is an informal term used to describe a group of elements from which you want to gather more information. In this study, the target population consists of two groups of student nurses and midwives currently enrolled in the Department of Nursing Science, Imo State University, Orlu campus: 400-level students, totaling 119 students and 500-level students, totaling 126 students. The total number of students in both class is 245, as obtained by the researcher from the students' record unit of the department.

2.4 Sampling Technique

Purposive sampling method was used to choose participants from the 400-level and 500-level class. This method was selected because the researcher identified specific students who could provide the necessary data, allowing for a targeted selection process. Sample size of 152 was selected from the total population. Inclusion criteria was met as only students who have completed their clinical experience, willing to participate and are available at the time of study participated in the research.

2.5 Instrument for Data Collection

The instrument used for collection of data was a semi-structured questionnaire based on existing literature. The questionnaire consisted of closed-ended questions and was divided into two parts:

2.6 Validity of the Instrument

To establish the validity of the instrument, the researcher employed both face and content validity approaches. This involved submitting the developed instrument to a project supervisor for evaluation. face validity is a crucial aspect of instrument validation, as it assesses whether the items appear relevant and appropriate to the intended population. The validity was ensured by aligning all questions with the research objectives. The researcher also made all necessary revisions based on feedback before finalizing the instrument.

2.7 Reliability of the Instrument

Reliability refers to the consistency and dependability of a measurement tool from the researcher's perspective. To confirm the reliability of the instrument, a pilot study was conducted using 32 student nurses at a nursing school in Imo State, in which 32 copies of questionnaires were administered to them once. After the questionnaires were filled out, the researcher collected the responses. The results were then analyzed using Cronbach's alpha reliability coefficient test to assess the internal consistency of the instrument. The analysis yielded a high alpha value of 0.8, indicating that the instrument demonstrates strong reliability.

2.8 Method of Data Collection

The researcher distributed the validated questionnaires to the respondents within the study area. A total of 152 questionnaires were distributed, completed, and successfully collected. This resulted in a return rate of 100%. The entire process was completed over a span of 5 days.

2.9 Method of Data Analysis

The data collected for the study was collated, organized, and analyzed using the Statistical Package for Social Sciences (SPSS) software, version 20.0.

To analyze the data, the researcher employed Descriptive Statistics including; simple frequency distribution, simple percentage method and Mean.

3 RESULTS

Demographic Characteristics of Respondents:

Descriptive statistics involving frequencies and their percentages were used to analyze data on demographic profiles of the respondents. The results of the analysis were presented in Table 1 below.

Table 1 Demographic Characteristic of the Respondents (n = 152)

Demographic Characteristics	No of Respondents	Percentage
Mode of Admission		
Generic	103	67.8%
Direct Entry	49	32.2%
Total	152	100%
Year of Nurse Training		
Fourth Year	74	48.6%
Fifth Year	78	51.4%
Total	152	100%
Age Group		
18-23years	79	52.0%
24-29years	58	38.3%
30yrs & above	15	9.6%
Total	152	100%
Gender		
Female	131	86.5%
Male	21	13.5%
Total	152	100%

From the above table, it revealed that out of the 152 students from the Department of Nursing Science, IMSU, 103 (67.8%) of them were Generic Nursing Students, while 49 (32.2%) of them were Direct Entry Nursing Students. In the year of study, 74 (48.6%) of them were 4th year students, while 78 (51.4%) of them were 5th year students. The age of the respondents in this study ranges from 18 – 40years, majority of the respondents 79 (52.0%) and 58 (38.3%) were 18-23yrs and 24-29yrs respectively, while only 15 (9.6%) of them were 30yrs & above. Their gender distribution shows that more than three-quarter 131 (86.5%) of them were females, while only 21 (13.5%) of them were males.

3.1 Objective 1: To Determine Student Nurses and Midwives' View of Their Actual Hospital Clinical Learning Environment

Eighteen (18) items, which were divided into six (6) subscales, generated to realize this objective, with the cut-off point of 2.50. Data were analyzed item by item alongside with the mean scores for each item in the Appendix IV but the summaries of each of the six subscales were shown in Table 2.

Table 2 Student Nurses and Midwives' View of Their Actual Hospital Clinical Learning Environment

Subscales	N	Mean	Remark
Personalization	152	2.36	Disagreed
Student's involvement	152	2.82	Agreed
Satisfaction	152	2.45	Disagreed
Task orientation	152	2.56	Agreed
Innovation	152	2.66	Agreed
Individualization	152	2.50	Agreed
Cumulative mean	152	2.57	Positive View

Source: Field Survey, 2024; Criterion Mean = 2.50

The result on Table 4.2 shows the mean scores of the summaries of the six groups on the student nurses and midwives' views of their actual hospital clinical learning environment. The mean scores from the six (6) subscales are 2.36, 2.82, 2.45, 2.56, 2.66, 2.50 respectively. The result shows that they have a significantly positive view about student's involvement, task orientation and innovation which have mean scores of 2.82, 2.56, and 2.66 respectively. Alternatively, personalization and satisfaction have their mean scores below 2.50 and this means that they have a significantly negative view. Individualization is not significantly positive with a mean score of 2.50 which means that there is no indifference. Generally, the cumulative mean score is 2.57 and this implies that student nurses and midwives have a significantly positive view on their actual hospital clinical learning environment.

3.2 Objective 2: To Establish Student Nurses and Midwives' Preferred Hospital Clinical Learning Environment

Eighteen (18) items, which were divided into six (6) subscales, generated to realize this objective, with the cut-off point of 2.50. Data were analyzed item by item alongside with the mean scores for each item in the Appendix V but the summaries of each of the six groups were shown in Table 3.

Table 3 Student Nurses and Midwives' Preferred Hospital Clinical Learning Environment

Subscales	N	Mean	Remark
Personalization	152	2.35	Disagreed
Student's involvement	152	2.78	Agree
Satisfaction	152	2.80	Agree
Task orientation	152	2.90	Agree
Innovation	152	2.63	Agree
Individualization	152	2.71	Agree
Cumulative Mean	446	2.51	Positive View

Criterion Mean: 2.50

The result on Table 4.3 shows the mean scores of the summaries of the six groups on the student nurses' preferred hospital clinical learning environment. Student's involvement, satisfaction, task orientation, innovation and individualization have mean scores of 2.78, 2.80, 2.90, 2.63 and 2.71 respectively and this implies that their view is significantly positive, but their view about personalization is significantly negative with a mean score of 2.35. The cumulative mean is given as 2.70 which means that majority of the respondents are in agreement with the items in the scale and the student nurses and midwives' view of their preferred hospital clinical learning environment is significantly positive.

3.3 Objective 3: To Determine if Differences Exist in Student Nurses and Midwives' View of Their Actual and Preferred Hospital Clinical Learning Environments

Eighteen (18) items in both the CLEI (Actual and Preferred forms), which were divided into six (6) subscales, generated to realize this objective with a criterion mean of 2.50. Data were analyzed item by item alongside with the mean scores and the summaries of each of the six groups were shown in Table 4.

Table 4 Differences in the Student Nurses and Midwives' View of Their Actual and Preferred Hospital Clinical Learning Environment

Subscales	N	Actual Form	Preferred Form
		Mean	Mean
Personalization	152	2.36	2.35
Student's involvement	152	2.82	2.78
Satisfaction	152	2.45	2.80
Task orientation	152	2.56	2.90
Innovation	152	2.66	2.63
Individualization	152	2.50	2.71
Cumulative Mean	152	2.57	2.70

Criterion Mean= 2.50

The result on Table 4.4 shows the mean scores of the summaries of the six groups on the student nurses and midwives' views of their actual and preferred hospital clinical learning environments. There is significant difference in the student nurses and midwives' views of their actual and preferred hospital clinical learning environments in all the groups. Personalization has a significantly negative view in both actual and preferred hospital clinical environment with means scores below 2.50. In satisfaction, the mean scores for actual and preferred hospital clinical learning environments are given as 2.45 and 2.80 respectively, which implies that the respondents have a more positive on satisfaction in the preferred form and a negative view on the actual form. There is no significant difference but the student nurses and midwives' view of the preferred hospital clinical learning environment is higher than their view of the actual hospital clinical learning environment.

3.4 Objective 4: To Identify Factors that Influence Student Nurses and Midwives' Opinion of Their Actual and Preferred Hospital Clinical Learning Environment

Ten (10) items generated to realize this objective were subjected to one sample t-test with the cut-off point of 2.50. Data were analyzed item by item alongside with the mean scores for each item in Table 5.

Table 5 Factors that Influence Student Nurses and Midwives' Opinion of Their Actual and Preferred Hospital Clinical Learning Environment

S/N	ITEMS	SA	A	D	SD	N	Mean
1.	Age of student	23	55	45	29	152	2.47
2.	Gender of student	23	64	40	25	152	2.56
3.	Year of study	53	71	20	8	152	3.11
4.	Higher education before entering nursing school	42	60	34	16	152	2.84
5.	Interest in nursing education	88	55	7	2	152	3.51
6.	Student's self concept	71	67	12	2	152	3.36
7.	Mood of the learner	69	70	12	1	152	3.35
8.	Socio-cultural conditioning of the student	51	74	22	5	152	3.12
9.	Intellectual abilities of the learner	74	63	11	4	152	3.36
10.	Having worked in healthcare setting before nurse education	64	55	22	11	152	3.14

Criterion Mean= 2.50

The result on Table 4.5 shows the mean scores of the factors that influence student nurses' opinion of their actual and preferred hospital clinical learning environment. They were agreed to be the factors that influence student nurses and midwives' opinion of their actual and preferred hospital clinical learning environment with their mean scores above 2.50 except age of student, mean score given as 2.47 and there is no significant difference in gender of student with mean score of 2.56. This implies that age and gender of the students were indifference in the student nurses and midwives' opinion of their actual and preferred hospital clinical learning environment.

4 DISCUSSION

The results show that the respondents have significant negative view about personalization and satisfaction (mean scores <2.50). However, they have significant positive view about student's involvement, task orientation and innovation (mean scores >2.50), but were indifferent in their view about individualization. Meanwhile, the student nurses view of their actual hospital clinical learning environment is significantly positive [13].

This finding is validated by that of [14] who found out that many nursing students perceive their actual clinical learning environment as anxiety and stress provoking. Since an optimal clinical learning environment has a positive impact on the students' professional development, a poor learning environment can have adverse effects on their professional development process. The unpredictable nature of the clinical learning environment can create some potential problems for nursing [15]

The results revealed that they have significant positive view about student's involvement, satisfaction, task orientation, innovation and individualization (mean scores > 2.50), but their view about personalization is significantly negative (mean scores < 2.50). Meanwhile, the student nurses and midwives' view of their preferred hospital clinical learning environment is significantly positive (mean scores > 2.50).

This aligns with the research conducted by [16] which examined the clinical learning environment and highlighted that an effective clinical learning setting, characterized by adequate opportunities for student engagement and a focus on their learning needs, is deemed essential by respondents for enhancing the clinical learning experience. The study suggests that a supportive atmosphere where students feel valued and can receive constructive feedback significantly contributes to their educational outcomes.

However, the results of this study is in contrast with that of [17] which reported that highest mean score for preferred CLE was observed in the scales of personalization (27.87), satisfaction (26.82) and task orientation (26.78), the lowest mean score was found in the scales of individualization (22.72) and involvement (24.31).

There is significant difference in the student nurses and midwives' views of their actual and preferred hospital clinical learning environments (>2.50) in all the groups except personalization (<2.50). This implies that the student nurses' view of the preferred hospital clinical learning environment is always higher than their view of the actual hospital clinical learning environment.

Similarly, it was reported in their studies that there were significant differences between students perception of the actual CLE and the ideal (preferred) CLE they desired. There is a noticeable gap between the expectations and reality of the clinical learning environment for the students in nursing. Generally, students preferred a more positive and favourable clinical environment than they perceived as being actually present.

The results show that they were agree to be the factors that influence student nurses' opinion of their actual and preferred hospital clinical hospital environment (mean scores >2.50); except age of student (mean scores <2.50) and gender of student (mean scores >2.50). This implies that age and gender of the students were indifference in the student nurses opinion of their actual and preferred hospital clinical hospital environment.

This study is dissimilar with that of [18,19] which reported that chi-square tests showed no significant differences between the student groups in relation to their age, experience in health care or higher education before entering nursing education. In the same way, [20,21,] in their study reported that t-tests showed no significant differences in either total score or subscale scores related to age or work experience (with or without work experience in health settings). However, students with no prior college-level or university-level education had significantly higher mean scores on the innovation subscale, compared with students with prior college-level or university level education (20.61 versus 17.92, $P = 0.047$).

The findings of this study provided a comprehensive overview of the student nurses view of their actual and preferred hospital clinical learning environment, relationship between the actual and preferred clinical learning environment and the factors that influence their opinions of the hospital clinical learning environment. There is significant difference in the student nurses view of their actual and preferred hospital clinical learning environment. This indicates that compared to the actual clinical learning environment, students prefer an environment with a greater degree of task orientation, satisfaction, personalization, innovation, student's involvement and individualization [22,23].

This study highlights the need to provide a more supportive and positive clinical environment. To achieve this reorganisation of the educational framework is essential, focusing on individualisation, student's involvement and innovation.

5 CONCLUSION

Establishing a supportive environment for health education aimed at nurses, midwives, and aspiring health professionals is crucial. The training environment significantly influences both the academic and social learning outcomes of students. Given the vital role of this learning atmosphere, it is essential for nursing and midwifery training institutions to offer a well-structured clinical learning environment. Such an environment will ultimately lead to improved nursing outcomes.

COMPETING INTERESTS

The authors have no relevant financial or non-financial interests to disclose.

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