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## Problems Faced By Students Of Nursing College

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### ABSTRACT

Nurses are one of the important care providers and backbone of the health care system in Bangladesh. But, nurses are facing their problem at academic, clinical and community level. So, every year a number of student nurses drop their study that develops shortage of future nurse in our country. However the present study was conducted to find out the trouble encounter by student nurses for their comfortable accommodation, to analyze the problems faced by student nurses in their class during teaching and to identify the problems which experience during community visit and work in clinical settings. It was a descriptive type of cross-sectional study and conducted at selected different Government-Dhaka Nursing College and private-Holy Family Red Crescent Nursing College in Dhaka City. From each nursing college 200 respondents were selected. So, total 400 respondents were selected for the study. Purposive sampling method was used for the study. Data were collected from primary and secondary sources. Primary data were collected by face-to-face interview by the investigator. Collected data were analyzed by computer program Statistical Package for the Social Sciences (SPSS). From the result it was found that there were some problems in hostel such as food, senior-junior related problem, hostel authority related problems. There were some classroom related problems such as seating problem, noise Problem, ventilation problem and problem in teaching aid, quality teaching methods and shortage of quality teachers. In some cases teachers were less qualified and low pronunciation problem. Lack of modern teaching training among teachers was also a vital problem. The nursing course curriculum and syllabus need to be changed. In some cases nurses faced community problems.

**Key Words:** *Student, Nursing College, Problems, Class room facilities, Hostel facilities, Food quality, teaching aid, Teachers' training.*

### INTRODUCTION

Nurses are one of the main care providers in the health care system. Nurses form the backbone of health care services representing over 50% of the health professionals Student nurses are the foundation of nursing services. But, they are facing their problem at academic, clinical and community level. So, every year a number of student nurses drop their study that develops shortage of future nurse in our country. [Source: <https://www.assignmentpoint.com/science/medicalproblems-faced-by-students-of-nursing-institutions.html>)]

There are at present 2,213 public and private hospitals with a total capacity of 51,684 beds. There is only one bed for 2,665 people, one doctor for 3012 patients and one nurse for 6342 patients in the country according to government estimates. WHO launched the "Strategic Direction for Strengthening Nursing and Midwifery Services 2002-2008" (Resolution 54.12) targeting 5 main areas to scale up and enhance the development of nursing and midwifery services to respond to health needs on the basis of sound scientific and clinical evidence.<sup>1</sup>

Nursing Education is based on modern trends and developments in medical, health, social and educational sciences in order to keep pace with the changing needs of society and advanced technology. The education process involves knowledge application, development of psycho-motors skills and subsequent change in attitude and behavior in the desired direction. The development of moral values (e.g. Responsibility, Honesty, Loyalty, etc.) is an important component of helping nursing students to become efficient nurses

<sup>1</sup> Nursing and midwifery services. [Downloaded on September 12, 2010]; Available from: URL [http://www.whoban.org/nursing\\_midwife.html](http://www.whoban.org/nursing_midwife.html)

and good citizens. Helping nursing students to achieve their highest potential, both personal and professional, enable them to help themselves, their profession and society.

Nursing Education is a dynamic, continuous learning process of acquiring nursing and midwifery knowledge and skills that bring about change of student behaviors. Nursing education requires active and life-long learning and new learning builds on previous knowledge and experience. Learning in nursing educations best achieved when student is motivated and ready to learn, where student's dignity is respected; teaching strategies and learning experiences are carefully selected to facilitate critical thinking; and professional or clinical role modeling is offered.<sup>2</sup>

The Nursing profession in Bangladesh has reached at sustainable level. This profession has demonstrated its will to succeed in a creditable force within the health care team. Nurses of Bangladesh are now ready to contribute in improving the quality care of clients for the achievement the goal of the National Health Services. The registered nurses are working in public & private sectors in different posts & position in different Hospitals, Colleges & Institutes from primary level to tertiary level of health care delivery system of Bangladesh.<sup>3</sup>

There are 46 nursing institutes/College in the government sector seats 2730 and 335 private Institutes/College and seats 16,780 in total 19,510 are offering three years Diploma in Nursing science and Midwifery and 3-year Diploma in Midwifery 60 government sector seats 1775 and 105 private Institutes/College seats 3810 in total 5,585.

There are 13 in the government sector seats Colleges of Nursing affiliated to different university of Bangladesh offering four years Bachelor of Science Degree (B. Sc.) in Nursing with a total of 1200 seats, 7 non-government sector colleges seats 235 private college 148 and seats 7180 total seats 8,380.

Post-basic (2 years) College of Nursing 10 in the government sector seats 725 and 1 in the Autonomous sector seats 25, 119 in the non-government sector and seats 4705 in total 5430.

M.Sc. in nursing (2 year) there are 02 nursing College in the government sector seats 270 and 13 nursing College in the non-government and seats 1630 in total 1900 seats.

Total enrollment of years 3-year Diploma in Nursing science and Midwifery and 3-year Diploma in Midwifery, 4 year B. Sc. Nursing and 2 year post-basic B. Sc. Nursing, and 2 year M.Sc. in Nursing students are 40,805 per year each year to prepare professional nurses with leadership, management and teaching abilities.

Attracting qualified people into nursing is the first step in ensuring that adequate numbers of registered nurses (RNs) are available to meet the needs of hospital patients. The assessment and supervision of student nurses during clinical placement remains a complex activity. The student needs to be assessed thoroughly to identify his or her strengths and weaknesses. Further, this assessment should be conducted in circumstances which allow the student to be at his or her best.<sup>4</sup>

## OBJECTIVES OF THE STUDY

The specific objectives of the study are as follows:

- 1) To analyze the problems faced by student nurses in their class during learning.
- 2) To identify the problems faced by student nurses during community visit and work in clinical settings.

<sup>2</sup> Bangladesh Nursing Council. Diploma in Nursing Science and Midwifery Curriculum 2009. Technical assistance by BAN OSD 002 (NUR), World Health Organization.

<sup>3</sup> Directorate of Nursing Services. Present scenario of Nursing in Bangladesh: Nursing Services and Nursing Education. [Downloaded on September 12, 2010]; Available from: URL <http://www.mohfw.gov.bd/index.php/directorates-and-other-offices/dns>

<sup>4</sup> Kevin J. Problems in the supervision and assessment of student nurses: Can clinical placement be improved? Contemporary Nurse (2006). 22(1); 36-45. [Downloaded on September 12, 2010]; Available from: URL <http://www.atypon-link.com/EMP/doi/abs/10.5555/conu.2006.22.1.36>

## METHODOLOGY OF THE STUDY

**Study area:** The study was conducted at Dhaka city in Bangladesh.

**Study Design** It was a Descriptive type of Cross-Sectional Study.

**Study place:** Selected different Government-Dhaka nursing college and private-Holy Family Red Crescent Nursing College in Dhaka City.

**Sample Population:** All year registered student's nurses studying in the Nursing College the sample population of the study.

**Sampling method:** Purposive sampling method was used for the study.

**Sample size:** Two Nursing Colleges were selected for the study. Dhaka Nursing College and Holly Family Nursing College were selected. From each nursing college 200 respondents were selected. So, total 400 respondents were selected for the Study.

**Sources of Data:** Data were collected from primary and secondary sources.

**Sources of Primary:** Primary data were collected from the respondents of the study area.

**Sources of secondary data:** Secondary data were collected from books, research reports, journals, annual reports, Website of Ministry of Health and family planning internet etc.

**Sample Size:** Due to time and financial Constraints the sample size of the study was limited to 400 (200 respondents from each Nursing College)

**Inclusion Criteria:** All registered Nursing students were studying in the Dhaka nursing College and Holy Family Red Crescent Nursing College during the study period.

**Exclusion criteria:** Those were not interested to participate in the study.

**Duration of the Study:** The duration of the study was 24 months.

**Tool of Data Collection:** The tool was prepared by keeping the objectives of the study as the framework that reflect the study variables. A pre-designed semi-structured questionnaire was developed use as data collection instrument.

**Procedure of Data Collection:** Prior to the interview, the purposes of data collection were explained to the respondents and verbal consent was obtained. Data were collected by face-to-face interview by the investigator.

**Data Analysis:** Collected data were analyzed by computer program Statistical Package for the Social Sciences (SPSS).

## RESULTS AND DISCUSSION

**Table 1: Whether Large Classroom is a problem**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Agreed	250	62.5	62.5
Neutral	30	7.5	70.0
Disagreed	120	30.0	100.0
Total	400	100.0	

Whether Large Classroom is a problem has shown in the above table. From the result it was found that 62.5% respondents were agreed that large classroom is a problem, 7.5% respondents neutral and 30% respondents disagreed that large classroom is a problem.

**Table 2: Classroom Problems Faced by Respondents**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Noise Problem	180	45.0	45.0
Ventilation problem	30	7.5	52.5
Problem in teaching aid	90	22.5	75.0
Quality teaching methods	70	17.5	92.5
Shortage of quality teachers	30	7.5	100.0
Total	400	100.0	

Classroom Problems Faced by Respondents has shown in the above table. From the result it was found that 45% respondents faced noise problem, 7.5% respondents faced ventilation problem, 22.5% respondents faced problem in teaching aid, 17.5% respondents faced quality teaching methods and 7.5% respondents faced shortage of quality teachers.

**Table 3: Ventilation is good in Class Room**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Agreed	180	45.0	45.0
Neutral	30	7.5	52.5
Disagreed	160	40.0	92.5
Strongly disagreed	30	7.5	100.0
Total	400	100.0	

Ventilation is good in Class Room has shown in the above table. From the result it was found 45% respondents were agreed that ventilation is good in class room, 7.5% respondents neutral that ventilation is good in class room and 40% respondents disagreed that ventilation is good in class room and 7.5% respondents strongly disagreed that that ventilation is good in class room.

**Table 4: Whether Training has Vital Role to Teach Students**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Strongly agreed	160	40.0	40.0
Agreed	210	52.5	92.5
Disagreed	30	7.5	100.0
Total	400	100.0	

Whether Training has Vital Role to Teach Students has shown in the above table. From the result it was found that 40% respondents strongly agreed that training has vital role to teach students, 52.5% respondents were agreed that training has vital role to teach students, and 7.5% respondents disagreed that training has vital role to teach students.

**Table 5: Teaching learning materials helps students to learn better**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Strongly agreed	160	40.0	40.0
Agreed	180	45.0	85.0
Disagreed	60	15.0	100.0
Total	400	100.0	

Teaching learning materials helps students to learn better has shown in the above table. From the result it was found that 40% respondents strongly agreed that teaching learning materials helps students to learn better, 45% respondents were agreed that teaching learning materials helps students to learn better, and 15% respondents disagreed that teaching learning materials helps students to learn better.

**Table 6: Trained teachers are more expert than non-trained teachers**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Strongly agreed	100	25.0	25.0
Agreed	270	67.5	92.5
Disagreed	30	7.5	100.0
Total	400	100.0	

Trained teachers are more expert than non-trained teachers has shown in the above table. From the result it was found that 25% respondents strongly agreed that trained teachers are more expert than non-trained teachers, 67.5% respondents were agreed trained teachers are more expert than non-trained teachers and 7.5% respondents disagreed trained teachers are more expert than non-trained teachers.

**Table 7: Teachers use understandable pronunciation while teaching in the classroom**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Agreed	210	52.5	52.5
Neutral	30	7.5	60.0
Disagreed	130	32.5	92.5
Strongly disagreed	30	7.5	100.0
Total	400	100.0	

Teachers use understandable pronunciation while teaching in the classroom has shown in the above table. From the result it was found 52.5% respondents were agreed that teachers use understandable pronunciation while teaching in the classroom, 7.5% respondent's neutral teachers use understandable pronunciation while teaching in the classroom and 32.5% respondents disagreed teachers use understandable pronunciation while teaching in the classroom 7.5% respondents strongly disagreed Teachers use understandable pronunciation while teaching in the classroom.

**Table 8: Most teachers don't take preparation before going to class**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Strongly agreed	70	17.5	17.5
Agreed	150	37.5	55.0
Neutral	60	15.0	70.0
Disagreed	120	30.0	100.0
Total	400	100.0	

Most teachers don't take preparation before going to class has shown in the above table. From the result it was found that 17.5% respondents strongly agreed that most teachers don't take preparation before going to class, 37.5% respondents were agreed that most teachers don't take preparation before going to class, 15% respondents neutral that most teachers don't take preparation before going to class and 30% respondents disagreed that most teachers don't take preparation before going to class

**Table 9: Quality Teaching Aids, Methods, Nursing training available in nursing college as per expectation**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Strongly agreed	130	32.5	32.5
Agreed	150	37.5	70.0
Disagreed	120	30.0	100.0
Total	400	100.0	



Quality teaching aids, methods, nursing training available in nursing college as per expectation has shown in the above table. From the result it was found that 32.5% respondents strongly agreed that quality teaching aids, methods, nursing training available in nursing college as per expectation, 37.5% respondents were agreed that quality teaching aids, methods, nursing training available in nursing college as per expectation, and 30% respondents disagreed that quality teaching aids, methods, nursing training available in nursing college as per expectation

**Table 10: Necessity of changing nursing course curriculum**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Strongly agreed	190	47.5	47.5
Agreed	120	30.0	77.5
Disagreed	90	22.5	100.0
Total	400	100.0	

Necessity of changing nursing course curriculum has shown in the above table. From the result it was found that 47.5% respondents strongly agreed that there is a necessity of changing nursing course curriculum, 30% respondents were agreed that there is a necessity of changing nursing course curriculum, and 22.5% respondents disagreed that there is a necessity of changing nursing course curriculum.

**Table 11: Name of Community Problems**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Security problem	60	15.0	15.0
Heavy work load	90	22.5	37.5
Attitude problem of community mobilizer	130	32.5	70.0
Transportation problems	120	30.0	100.0
Total	400	100.0	

Name of Community Problems has shown in the above table. From the result it was found that 15% respondents replied that security is community problem, 22.5% respondents replied that heavy work load is a community problems, 32.5% respondents replied that attitude problem of community mobilize and 30% respondents replied that transportation problem is s community problem.

**Table 12: Hospital Problems Faced by Respondents**

Respondents' opinion	Frequency	Percent	Cumulative Percent
Heavy work load	60	15.0	15.0
Attitude problem of the seniors	190	47.5	62.5
Physicians conduct and unfamiliar attitude	60	15.0	77.5
Transportation problems	90	22.5	100.0
Total	400	100.0	

Hospital Problems Faced by Respondents has shown in the above table. From the result it was found that 15% respondents replied that heavy work load is hospital problem, 47.5% respondents replied that attitude problem of the seniors is hospital problem, 15% respondents replied that physicians conduct and unfamiliar attitude is hospital problem, 22.5 % respondents replied that transportation problem is hospital problem.

## CONCLUSION

With regard to training deficit, it is of utmost importance to invest in students' training and empowerment so that they can interact with patients using care methodologies that promote the systematization and operationalization of the care relationship. This need was identified based on the lack of knowledge and training of communication techniques reported by the sampled students. Lack of experience was also identified by students as a cause of difficulty at the beginning of their CT due to the lack of dexterity and for being their first contact with clinical settings. In addition, students identified personal characteristics as a

barrier to their communication skills, to the extent that their introversion, insecurity, anxiety, and fear prevent them from achieving academic success. Therefore, CT should include moments when tutor nurses, supervisors, and students discuss situations of greater difficulty and identify the underlying causes and potential strategies to overcome them in the future. Furthermore, since students are young adults transitioning from adolescence to adulthood, tutor nurses and supervisors should respect each individual's own pace for skill acquisition and development, taking into account his/her specific stage of personality development. In addition to the direct impact on care quality and efficiency, the training of nursing professionals and students using innovative care methodologies seems to be a possible strategy for achieving communication proficiency. The findings obtained from the study demonstrated that ineffective communication, inadequate preparation, and emotional reactions are Bangladeshi nursing students' challenges in the clinical learning environment.

It is one of the teachers' major responsibilities to treat nursing students properly in the clinic, causing higher enthusiasm and motivation for learning as well as increasing their self-confidence. Nabolsi et al. demonstrated in their study that proper treatment and establishment of a communication with students are an important item for nursing teachers to be a role model for students. Training that involves value and respect facilitates the teaching-learning process and socializes the students into the nursing profession. Many of the students participating in the study complained about the staff's discrimination between them and students of medicine. The result of the study found that a high percentage of nursing students reported discrimination between them and students of other fields.

Discrimination in the use of educational facilities and amenities and also in interpersonal communication was reported as a factor distorting the nursing students' professional identity in the clinic. The comparison between nursing and medicine and regarding medicine as a superior major violates nursing students' personal dignity and gives them a sense of professional inferiority. Students' inadequate preparation for entering the clinical environment creates problems for them and nursing teachers. Even though they learn the fundamentals of nursing in classrooms and practice rooms, nursing students do not have sufficient time to practice and repeat these skills to completely enter the clinic. The students' insufficient practice and lack of skill before entering the clinical environment created problems for them with respect to learning in the clinic. Moreover, the students' lack of skill in confronting the clinical environment and dealing with actual patients is evident. Students' lack of knowledge and skill and inadequate preparation for entering the clinical environment disturb their learning processes and make them anxious. Acquisition of communication skills in nursing students creates a guiding atmosphere in the clinical environment, followed by an increase in their motivation.

Nursing students' lack of practical skills is considered as a challenge in entering the clinical environment. Nursing students' stress in confronting the clinical environment affects their general health and disturbs their learning processes. According to one study, stress is one of these students' experiences in the clinical environment. It was revealed that the causes of nursing students' stress in the clinical environment fall into three types of stress due to the educational plan, stress due to the educational environment, and factors concerning the students. Nursing students' young age when entering the clinical environment and their social and emotional lack of experience lead to stress and psychological problems. An inferiority complex is another challenge mentioned by the students participating in the study. Low self-confidence is one of the nursing students' problems. Adequate self-confidence is one of the nursing students' requirements in providing good care. Lack of self-confidence has been referred to as a major cause of fear and anxiety in nursing students. The researcher demonstrated in his study that lack of self-confidence also disturbs communication in nursing students. Moreover, having adequate self confidence for care giving is one of the most important factors affecting the students' learning.

The study also found that nursing students in Bangladesh are faced with many challenges in the clinical learning environment, which affect their professionalization and learning processes. Many students are not mentally prepared to enter the clinical environment leading to higher rates of psychological problems. Moreover, lack of adequate knowledge and skill along with lack of mental and psychological preparation disturbs the learning and patient care giving processes. Improper treatment, discrimination, inadequate knowledge and skill, and lack of communication skills in these patients lead to stress and inferiority complexes in them. In view of the students' challenges in confrontation with the clinical learning environment and the necessity of learning and providing patients with care in a peaceful environment free of

any tension, educational authorities and nursing faculties are required to pay particular attention to these issues and try to facilitate the nursing students' learning and professionalization.

## RECOMMENDATIONS

The recommendations of the study are as follows:

- (1) Based on the results of the study, many students lack the communication skills necessary for effective communication in the clinical environment. It is recommended that the effective communication skills are taught to students before they enter the clinical environment with the emphasis on the differences between the clinical environment and the classroom environment.
- (2) In view of the results of the study, many students mentioned lack of theoretical knowledge and practical skills as one of the problems involved in care giving. Therefore, before students enter the clinical environment, it should be ascertained that they are theoretically and practically prepared as they take tests and give care in the skill lab.
- (3) In light of the presence of stress and inferiority complexes in students in confronting the clinical environment, it is recommended that while they receive psychological consultation on the nursing profession, care giving, and the hospital environment plans be made for them to visit the hospital and to get acquainted with the clinical learning environment before they begin the actual internship.
- (4) The innovation of this study was that we studied how the nursing students were faced with the clinical learning environment and all components of this process by a grounded theory study (this paper is a part of a larger grounded theory study). In addition, in this study, the challenges of nursing students were deeply assessed with respect to educational, behavioral, emotional, and practical an aspect, which differentiates this study from other previous studies.

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