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ORIGINAL STUDY

Clinical Learning Obstacles of Nursing Students at the University of Mosul: A Qualitative Study

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ABSTRACT

Background: Clinical learning is a crucial component of nursing education, as it provides students with the opportunity to apply their theoretical knowledge in real-life healthcare settings. However, nursing students often face obstacles during their clinical experiences that can hinder their learning and professional development. The study aim to explore the obstacles that nursing students confront during clinical training.

Materials and Methods: A qualitative phenomenological study design was used to reach the study's aim. The study was conducted in Mosul city and included 20 nursing students who were selected purposefully. A semi-structured interview with open-ended questions was used to collect the data, and content analysis was used to analyze the data.

Results: Three themes were extracted from participants that represent the main obstacles to effective clinical training for nursing students: inadequate clinical supervision, inadequate readiness of students, and an inappropriate clinical environment.

Conclusion: Overcoming these obstacles requires collaborative efforts from nursing education institutions, clinical instructors, healthcare facilities, and nursing students themselves. Strategies such as improving supervision and mentorship programs, increasing patient exposure opportunities, providing cultural competency training, implementing stress management techniques, and creating supportive learning environments can help address these challenges.

Keywords: Clinical learning, Obstacles, Nursing, Qualitative

1. Introduction

Nurses' proficiency is founded on the knowledge and skills imparted to them through training. The education they receive is a blend of both theoretical and practical learning opportunities, which empower them with the essential knowledge, competencies, and attitudes needed for delivering patient care (Brooke, Hvalič-Touzery and Skela-Savič, 2015). The educational journey of nursing comprises two interconnected components: theoretical instruction and hands-on training. A significant portion of nursing education takes place within real clinical settings

(Brooke, Hvalič-Touzery and Skela-Savič, 2015; Fathi and Ibrahim, 2023).

In numerous nations, including Iraq, clinical training constitutes over half of the formal nursing curriculum. Hence, clinical education holds a pivotal and integrated role within the nursing education system. As nursing is a skill-oriented vocation, clinical learning settings significantly contribute to honing professional capabilities and preparing nursing students for their transition into the nursing field as licensed nurses. Furthermore, the clinical facet of nursing education bears substantial influence on students' decision-making regarding pursuing or

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relinquishing nursing as their profession (Robichaux et al., 2022).

In contrast to traditional classroom education, nursing students engage in clinical training within a multifaceted clinical learning environment that is influenced by numerous factors. This environment offers nursing students a hands-on opportunity to apply theoretical knowledge and develop a range of cognitive, emotional, and practical skills essential for patient care (Lambert and Glacken, 2005).

The quality of clinical education is profoundly affected by how well students are prepared and introduced to this clinical setting. A positive clinical learning environment greatly benefits students' professional growth, while an unfavorable one can impede their progress (Flott and Linden, 2016).

The unpredictable nature of the clinical training environment can pose difficulties for nursing students. Insights from nursing clinical education experiences reveal that students' behaviors and performances tend to shift within this clinical setting, potentially hindering their learning process, patient care development, and overall professional performance. It's crucial to identify and address the challenges that students encounter in the clinical learning environment, as failure to do so can obstruct effective learning and skill development (Ahmed and Mohammed, 2019).

Studies underscore that inadequate exposure to the clinical learning environment has led to higher dropout rates, and some nursing students have even abandoned the profession due to the challenges they face in clinical settings (Berntsen, Bjørk and Brynildsen, 2017).

Numerous research studies, have explored aspects of the clinical environment. While some have focused on clinical assessment or stressors in clinical training, few have delved into the challenges nursing students confront in the clinical learning environment in Iraq. These challenges remain largely unexplored. Recognizing and understanding the multifaceted challenges that nursing students face in this environment can significantly enhance training, improve planning, and elevate the overall quality of education. This study aims to elucidate the various challenges that nursing students encounter during their clinical learning experience.

2. Materials and methods

2.1. Research design

This study applied a phenomenological design. The researcher employed content analysis within a qualitative framework to acquire comprehensive and profound insights from the subject of interest.

Qualitative research, renowned for its emphasis on credibility, clarity, confirmability, and adaptability, emerges as a suitable approach for nurturing comprehension and elucidation within the realm of nursing education.

2.2. Setting and participants

Participants in the study included nursing students from Mosul University, Iraq. Nursing students who have practical clinical training were selected. The participants in this study were selected purposively and consisted of twenty nursing students from different academic semesters. Various groups of students in terms of age, sex, academic semester, and experience of working at the patients' bedside were used in order to achieve deep and extensive data.

2.3. Data collection

The researchers used semi structured interview as their method. The interviews were conducted in person at a suitable location within the hospitals of Nineveh Governorate, where the students undergo their training. The interviews commenced with a broad open-ended question about the participants' experiences in the clinical environment. Further inquiries were made based on the participants' remarks and answers. All participant interviews were recorded and transcribed verbatim right after each interview session. The interviews, lasting approximately 30 to 40 minutes, had an average duration of 35 minutes. Interviews were continued with participants until the data was saturated and sampling was ended with data saturation.

2.4. Data analysis

Content analysis technique was employed to uncover and comprehend the obstacles faced by nursing students when dealing with the clinical environment. This analytical approach involves interpreting the text, focusing on its subject and context, while also exploring commonalities and distinctions within the text's various components. The researcher read through the interview transcripts multiple times to gain a comprehensive understanding. Sections of the interviews that pertained to participants' experiences of challenges in the clinical setting were singled out and compiled into a separate document. Subsequently, words, sentences, and paragraphs that had thematic relevance and contextual cohesion were combined and assigned codes. These codes and the units of significance were then interpreted within the study's context and compared to identify similarities

and differences. This process ultimately led to the creation of abstract subclasses based on underlying themes. Through a reevaluation of the codes and categories, three themes were identified and extracted.

2.5. Trustworthiness

To ensure data validity, the manuscripts underwent thorough review, and colleagues reexamined the data coding procedures. The entire process received peer review from an external observer. Extracted codes were shared with participants and gained their approval. To establish criteria for variability, scripts from numerous interviews, codes, and extracted categories were shared with methodologically knowledgeable colleagues who were not involved in the study's execution. Their assessment verified the accuracy of the data coding. Adequate time was dedicated to data collection, maintaining an unbiased standpoint, which bolstered research reliability. To enhance generalizability across settings, research outcomes were presented to uninvolved students who assessed the congruence between their experiences and the research results.

2.6. Ethical considerations

The University of Mosul's collegiate committee for medical research ethics granted clearance for the study's ethical conduct. The study's goals and procedures were described, emphasizing the participants' rights to autonomy, secrecy, and anonymity. Finally, the participant's written agreement was obtained.

3. Results and discussion

The participants consisted mainly of males (75%), primarily aged between 20 and 24 years (75%), and mostly in the third (45%) and fourth (35%) academic years. Most participants belonged to Al-Salam Teaching Hospital (40%) and Mosul General Hospital (30%) (Table 1). After the analysis of the research data, the researchers identified Four themes from the participants' interviews (Table 2).

3.1. Inadequate clinical supervision

The first theme identified was inadequate clinical supervision, which included three categories. Lack of guidance and support, limited opportunities for skill development, and increased risk to patient safety. The lack of guidance and support for students during their clinical activities poses a significant challenge. Without adequate guidance from clinical instructors,

Table 1. Socio demographic characteristics of participants.

	Participant no.
Gender	
Male	15
Female	5
Age	
20–24	15
25–30	3
30–35	1
35>	1
Academic level	
Second stage	4
Third stage	9
Fourth stage	7
Hospital	
Al-Salam Teaching Hospital	8
Ibn Al-Atheer Teaching Hospital	3
Al Khansa Teaching Hospital	1
Al-Jumhuri Teaching Hospital	1
Ibn Sina Teaching Hospital	1
Mosul General Hospital	6

students may find themselves navigating complex healthcare scenarios without proper direction. This can lead to an ineffective learning experience, hindering their comprehension of clinical practice and potentially affecting their future performance as healthcare professionals. Furthermore, limited opportunities for students to develop their clinical skills exacerbate the issue. Clinical skills are the cornerstone of a healthcare professional's expertise, and without sufficient chances to refine them, students may enter the workforce ill-prepared. This deficiency in skill development not only impacts their individual professional growth but also has broader implications for the quality and safety of healthcare services. The repercussions of inadequate clinical supervision extend beyond the students themselves. There's an alarming increase in the risk to patient safety associated with this problem. When students are not adequately supervised during clinical rotations, the likelihood of medical errors rises significantly. These errors can range from misdiagnoses to medication mistakes, posing a considerable threat to patients' well-being. In light of these findings, it is imperative to recognize the paramount importance of enhancing clinical supervision in healthcare education. By providing students with the guidance, support, and opportunities they need to develop their clinical skills effectively, we can improve their learning experience and, more importantly, ensure patient safety in healthcare settings. The well-being of both students and patients hinges on addressing these critical issues in clinical education.

One of the participants said, "The shortage of clinical instructors compared to the number of students can have detrimental effects on both student learn-

Table 2. Units of meaning, categories and themes.

Units of meaning	Categories	Themes
Lack of the percentage of clinical instructors compared to the number of students, and this leads to a lack of opportunity for students to learn clinical skills and increases the risk to patients	Lack of guidance and support Limited opportunities for skills development Increased risk to patient safety	Inadequate Clinical Supervision
Many students lack the theoretical information necessary to perform clinical skills Students do not have the skills to communicate with patients and medical staff during training in hospitals Many students lack motivation and desire to perform clinical skills	Lack of knowledge Poor communication and collaboration Lack of self-motivation and self-regulation	Inadequate Readiness of Students
Limited number of necessary equipment, supplies, and technology can impede the learning process. Huge number of students result in an imbalance between the guidance and support provided to students. Hostile behavior toward students and health care team. Assigning patients to student who do not have the necessary competency can compromise patient safety.	Lack of resources and supplies High number of students Hostile or unprofessional behavior Unsafe patient assignments	Inappropriate Clinical Environment

ing and patient safety, this shortage can also lead to increased risks for patients due to inadequate supervision and guidance during clinical rotations”

3.2. *Inadequate Readiness of Students*

The second theme identified was the inadequate readiness of students, which included the following categories, Lack of knowledge Poor communication and collaboration, lack of self-motivation, and self-regulation. Lack of knowledge is a significant concern when it comes to preparing students for the clinical work environment. It is imperative that students have a solid foundation in theoretical knowledge before they step into the real-world clinical setting. Unfortunately, some students may enter this environment without the necessary theoretical background, which could be attributed to various factors, including shortcomings in their educational institutions or a failure to grasp fundamental concepts during their coursework. Without a strong theoretical foundation, students may struggle to perform clinical tasks effectively and safely, potentially compromising patient care. Another critical issue that can hinder a student’s readiness for the clinical setting is poor communication and collaboration skills, leading to misunderstandings, errors, and suboptimal patient experiences. This not only impacts patient care but also affects the student’s ability to work harmoniously with their colleagues. Additionally, the lack of self-motivation and self-regulation among some students can hinder their preparedness for clinical

work, making it crucial for healthcare education to evolve and provide students with comprehensive theoretical education, robust training in communication and collaboration, and fostering self-motivation and self-regulation skills to better support them in their journey to become competent and confident healthcare professionals, ultimately enhancing their readiness to work effectively in a clinical setting.

One of the participants said, “Many students enter clinical settings with a lack of theoretical knowledge, communication skills, and motivation, which hinder their ability to perform clinical skills effectively”

Another participant said, “Many students don’t have a desire to perform clinical skills due to a lack of motivation, which plays a vital role in a student’s willingness to learn and actively participate in clinical skill development”

3.3. *Inappropriate clinical environment*

The third theme identified was inappropriate clinical environments, which included the following categories: lack of resources and supplies, high number of students, hostile or unprofessional behavior, and unsafe patient assignments. The participant’s concerns encompass various aspects of the clinical environment. They first highlight the deficiency in resources and supplies within healthcare institutions, encompassing equipment, tools, devices, and technologies. This insufficiency has a detrimental impact on students’ educational experiences and hampers their skill development. Furthermore, the discussion

delves into the issue of a high student population. It's emphasized that this substantial influx of students exerts additional pressure on the clinical setting, diminishing the prospects for effective learning. Another concerning dimension raised is the existence of hostile or unprofessional behavior exhibited by certain staff members or fellow students. Such behavior contributes to an environment that is far from conducive to learning and professional development. Additionally, the discourse draws attention to unsafe patient assignments, hinting at potential lapses in patient safety within the clinical environment. This issue is deemed critical and necessitates immediate attention. In summary, the clinical environment appears to grapple with multifaceted challenges, including resource shortages, an overwhelming student population, behavioral issues, and patient safety concerns. These concerns collectively underscore the need for comprehensive reforms and improvements in the clinical learning setting. One of the participants said, *"Health institutions lack the necessary equipment, tools, devices, and techniques to teach students. In addition, the large number of students is not proportionate to what is available in terms of equipment, tools, devices, and techniques"* Other participants said, *"Sometimes students or nursing staff are verbally or physically assaulted by patient companions, and this in turn reduces the students' desire and motivation to perform clinical skills"* Another participant said that *"leaving the student alone to provide care for the patient without any monitoring and supervision puts patients at risk"*

The findings from the study can inform efforts to improve clinical learning experiences and support the development of effective strategies to address the challenges faced by nursing students in the clinical setting. In this study, the perspectives of nursing students were explored to understand the clinical learning difficulties faced in Mosul. Through data analysis, three themes emerged: (1) inadequate clinical supervision; (2) inadequate readiness of students; and (3) an inappropriate clinical environment.

The theme of inadequate clinical supervision highlights the competence of some nurses as a barrier or challenge to effective clinical learning. One of the key consequences of inadequate clinical supervision is the potential for errors and compromised patient safety. Nursing is a complex field that requires critical thinking, decision-making, and technical skills. Without proper supervision, nurses may not receive the guidance and feedback necessary for improving their clinical practice. This can lead to mistakes, medication errors, and other adverse events that could harm patients. This finding aligns with previous research that has identified the importance of qualified and

professional clinical instructors for quality nursing education (Neshuku and Amukugo, 2015; Sundler et al., 2019).

The theme of inadequate readiness among students stands out as a substantial concern when it comes to adequately preparing them for the clinical work environment. Nursing requires a solid foundation of knowledge in areas such as anatomy, physiology, pharmacology, and patient care practices. A lack of knowledge can lead to mistakes in medication administration, incorrect assessments, and inadequate patient care. Effective communication and collaboration are vital within the nursing profession, as nurses work closely with interdisciplinary teams, patients, and their families. Poor communication can lead to misunderstandings, errors, and compromised patient safety. Nursing can be demanding and emotionally challenging, requiring self-motivation and self-regulation to maintain high-quality care. Burnout, a lack of engagement, and decreased job satisfaction can result from a lack of self-motivation and self-regulation. The results of this theme are consistent with the results of previous research (Immonen et al., 2019; Liaw and Huang, 2013; Mostafa Kamel, Abdeen and Mohamed, 2023; Pueyo-Garrigues et al., 2022; Sulaiman et al., 2023). The theme of an inappropriate clinical environment highlights that inadequate staffing, a large number of students, insufficient equipment, and limited supplies can impede nurses' ability to provide optimal care. This can lead to increased workload, stress, and potential errors in patient care. Hostile or unprofessional behavior in nursing education and clinical practice has significant negative impacts on the learning environment, student well-being, and patient care. It is important to address and prevent such behavior to maintain a safe and supportive environment. This finding aligns with previous research (Attia and Ibrahim, 2023; Gemuhay et al., 2019; Panda et al., 2021).

4. Implications and limitations

This study provides new insights into the obstacles experienced by nursing students in Mosul university and have important implications for nursing education and practice in Ninevah governorate. By addressing these issues, we can work towards creating a learning environment that not only equips students with the necessary skills but also fosters a culture of excellence and safety in healthcare institutions.

Limitations of the study: This study was conducted only in Mosul. So, it may not fully represent the obstacles experienced by nursing students during clinical training across the different Iraqi colleges.

5. Conclusion

In conclusion, exploration of these three key themes—inadequate clinical supervision, inadequate readiness of students, and inappropriate clinical environment—sheds light on critical issues within the educational and training landscape in healthcare institutions.

Firstly, the theme of inadequate clinical supervision underscores the importance of effective mentorship and guidance in clinical settings. It is evident that insufficient oversight can hinder students' learning experiences and impede their ability to develop essential skills. Addressing this challenge requires the establishment of robust supervision systems that prioritize students' educational needs.

Secondly, the inadequate readiness of students highlights the necessity of ensuring that students are adequately prepared for their clinical experiences. This encompasses not only theoretical knowledge but also practical skills and a comprehensive understanding of their roles and responsibilities. Institutions must invest in thorough pre-clinical training to equip students with the competence and confidence needed to excel in real-world healthcare settings.

Lastly, the theme of inappropriate clinical environments underscores the importance of creating a conducive and safe environment for learning and practice. This includes addressing resource shortages, managing large student populations effectively, promoting professional behavior, and ensuring patient safety. A suitable clinical environment is the cornerstone of a successful healthcare education system.

Incorporating these themes into institutional policies and practices is essential to enhance the quality of healthcare education and better prepare future healthcare professionals.

Author contribution

Study conception, original draft writing, data gathering, data analysis, and collective author review of the published version.

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Conflict of interest

The authors report no conflict of interest concerning this research.

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