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The effect of internship on nursing students' attitudes towards their caregiver roles

Abstract

Aim: Care is acknowledged as the core and cornerstone of the nursing profession and its educational curriculum. Clinical instruction is instrumental in fostering the acquisition of cognitive, affective, and psychomotor skills essential for caregiving. Internship practice, which constitutes a crucial segment of clinical teaching, has a significant place for nursing students to develop positive attitudes towards care. This study aimed to determine whether nursing students' attitudes changed towards care before and after the internship practice.

Materials and Methods: A total of 164 (57.9%) nursing students who were in the fourth year internship practice were included in the study. This research was designed as a single-group pretest-posttest quasi-experimental research. "Attitude Scale for Nurses in Caregiving Roles" was used to determine nursing students' attitudes their care behaviors before and after the internship. The study was carried out between September 2018 and June 2019. Descriptive statistics, Paired Samples Statistics, Post hoc LSD statistical methods were used in data analysis.

Results: Scale pretest and posttest mean scores (70.85 and 70.14, respectively) were found to be similar. There was no difference between the scale scores according to the gender variable. Those who love their profession ($\bar{x}=80.0$, $p=0.47$), think that internship contributes to vocational training ($\bar{x}=80.0$, $p=0.048$) and had high opinions about nurses' attitudes towards care ($\bar{x}=80.0$, $p=0.014$) had statistically higher scale scores compared to others.

Conclusion: According to the findings of this study, internship practice did not create a difference in students' attitudes towards care. If care is indeed accepted as the essence of nursing, the sensitivity shown to compassionate emotional behaviors in nursing education should also be transferred to cognitive technical skills.

Keywords: Care, nursing students, internship, care role

INTRODUCTION

Care is accepted as the essence and foundation of the nursing profession and nurse training programs (1). It is believed that by supporting patient health, care provides an increase in the level of well-being (2). The burgeoning scientific recognition accorded to caregiving in recent years, evidenced by a plethora of findings elucidating its profound influence on patient outcomes, buttresses the assertion that it constitutes an indispensable facet of nursing pedagogy (3).

Care, being a multidimensional concept, encompasses the outcomes shaped by individuals' cultures, values, experiences, and relationships with others (4). Nursing theorists mostly explain the basis of care with the perspective of humanism and human

science (5). In general, care is defined as nurses' utilization of feelings, thoughts and actions for the physical and emotional comfort of the patient (2). Care is an indispensable and important concept for nursing and an individual, psychological, subjective, humane, and moral phenomenon based on interpersonal relationships (6). Care is a measurable and assessable phenomenon, and it is possible to divide care behaviors into sub-categories. Larson (1981) divided care behaviors into two basic categories as expressive behaviors and instrumental behaviors. Expressive behaviors are belief and sincerity building trust in patients and acceptance of feelings. Instrumental behaviors, on the other hand, include actions with task-oriented activities such as the treatment procedure, stress management, training and problem solving (7). Truly, these behaviors are influenced by a multitude of factors.

Some of the factors that affect nurses' care perceptions and care behaviors are vocational education, experience, self-esteem, respect for the profession, belief and the working environment (5). Among these factors, the outputs of vocational education depend on the learning and teaching processes (8). It is accepted that care can be taught, learned and measured when it is included in the curriculum by modeling and enforcing from the first years (9). Noddings (1984) is the earliest theorist who tried to explain the care teaching model under 4 elements which are modeling, dialogue, practice and confirmation (6). Care should be demonstrated to students so that they learn how to do it, an open-ended dialogue should be used to discuss care behaviors, opportunities should be created to practice care and feedback should be provided for these care practices. Care behaviors can be acquired through practice, particularly when students perceive the essence of nursing education as centered around care. Through learning and practicing caring behaviors, students ultimately cultivate the qualities necessary to evolve into professional nurses (10,11). The acquisition and refinement of these behaviors can be facilitated by fostering conducive learning environments for students within the faculty, promoting collaboration between faculty members and practice settings, and employing deliberate teaching strategies that prioritize student-centered learning (12). Furthermore, enhancing care skills can also be achieved through utilizing nurses as role models in the clinical teaching environment, reviewing incentivizing incidents, and focusing on hidden curriculum objectives (13).

Newly graduated nurses often encounter negative emotions stemming from feelings of unpreparedness and inadequacy within their work environment. Consequently, many nursing schools employ internships as a means to augment students' competency levels. The overarching objective of internship programs is to enhance the quality and safety of healthcare delivery to patients by bolstering the qualifications of novice nurses (14). Moreover, internships offer potential benefits such as heightening students' professional satisfaction and fostering retention within the profession through the mitigation of stress and anxiety. There are many studies examining the relationship between grade level and perception and behaviors of care (6,15-18). However, few studies examined intern students' pre- and post-internship care attitudes in regard to different variables. This study explored nursing students' care attitudes before and after internship. Based on the study findings, it is believed that the extent to which the targeted change can be achieved via internship will be presented with this study.

MATERIALS AND METHODS

Research Model

This research was designed as a single-group pretest-posttest quasi-experimental study.

The Universe and Sample of the Study

The research was carried out in a nursing faculty in Izmir between September 2018 and June 2019. Nursing undergraduate education is a 4-year programme and the last year students complete the

internship practice. Students spend a total of eight months, with four weeks in each department (core nursing courses), four days a week. The universe for this study consisted of 283 fourth year intern students attending a nursing faculty. It was aimed to reach the entire population by using purposive sampling method. The research sample consisted of 164 fourth-grade students who agreed to participate in the study.

Data Collection Tools

"Personal information form" and "attitude scale for nurses in caregiving roles (ASCRN)" were used in the study to collect research data. Personal Information Form consists of a total of 6 open-ended questions to collect information about participants' gender and grade point average, whether the participants liked their profession, whether they believed that internship contributed to professional development and how they defined importance of care. Questions were rated with a six point Likert-type scale (very little, little, moderate, good, very good, excellent).

The scale was developed and tested for validity and reliability; the scale is a 16-item 5-point Likert-type scale for measuring the caregiving attitudes of nurses (9). The ASCRN consists of three subscales as follows: attitude towards meeting the self-care requirements of the patient and the counseling role of the nurse (items 2, 6, 10, 11, 14, 15, and 16), attitude towards protecting the individual and respecting their rights (items 3, 5, 12, and 13), and attitude towards their own role in the treatment process (items 1, 4, 7, 8, and 9). The responses of the nurses to the items were absolutely disagree, disagree, somehow agree, agree, or absolutely agree, and these responses were scored between 1 and 5. The maximum and the minimum scores that could be obtained from the scale were 80 and 16, respectively. Higher scores indicated a more positive attitude of the nurses towards their caregiving roles, whereas lower scores indicated a more negative attitude. The Cronbach's alpha coefficient for all items of the scale was determined to be 0.91. In this study, Cronbach's alpha coefficient for the ASCRN was .827.

Research Procedure

Nursing students who were informed about the research and agreed to participate in the research were asked to complete the "Personal Information Form" at the beginning of the internship practice along with ASCRN as pretest. During the eight-month internship period, the students performed practices in different clinical settings to achieve the teaching goals of eight departments. Volunteer students who completed this eight-month clinical course were asked to complete the ASCRN as posttest.

Data Analysis

The statistical analysis of the data was conducted using the IBM SPSS 22.0 software package. Variables were summarized with number of units (n), percentage (%), mean ($\bar{x}$) and standard deviation (SD). Appropriate statistical tests were performed after checking the homogeneity of the variances with Levene's test and the normality of the data with the Shapiro-Wilk test. Chi-square statistic was used in the categorical variable; t-test was used for the analysis of dependent and independent variables.

in quantitative data with normal distribution, and One Way ANOVA test values were taken into consideration in the analysis of variance of multiple comparisons. The relationship between scale scores was expressed by Spearman correlation analysis. α error level $p < 0.05$ was considered statistically significant in all data.

Ethical Considerations

Approval was obtained from the Ege University, Scientific Research and Publication Ethics Committee on 07.11.2018 to carry out the research (meeting 09/05 and decision no: 59). Permission was obtained from the authors of the “attitude scale

for nurses in caregiving roles” which was used in the study for data collection. After the students participating in the study were informed, their written and verbal consents were obtained.

RESULTS

Students' pretest and posttest dependent group comparisons showed no significant difference between the groups in terms of mean scale scores. 90.1% of students were females. No statistically significant difference was found between the pretest-posttest mean scores of the students according to the gender variable (Table 1).

Table 1. Scale pre and post-test total scores

Paired samples statistics			
		$\bar{X} \pm SD$ SD	Test statistics
Total scale	Pretest	70.85 $\pm$ 6.27	t=0.992
Mean score	Posttest	70.14 $\pm$ 8.16	p=0.323
	N (%)	Pretest	Posttest
		$\bar{X} \pm SD / \text{Min-Max}$	$\bar{X} \pm SD / \text{Min-Max}$
Female	149 (91)	71.06 $\pm$ 6.25/58-80	70.44 $\pm$ 8.01
Male	15 (9)	68.80 $\pm$ 6.43	67.13 $\pm$ 9.27
Test statistics		t:1.337, p=0.183	t:1.503, p=0.135

$\bar{X}$: average, t: Paired Samples Statistics, SD: standard deviation

A statistically significant difference was found between the posttest scale scores of the nursing students who reported positively about their feelings about the profession compared to the students who were not positive in their feelings about the profession ($p < 0.05$). There was a statistically significant difference between the posttest scale scores of the students who thought that internship contributed to the profession and the

posttest scale scores of other students ($p = 0.048$). A statistically significant difference was identified between the posttest scale scores of the students who stated that they cared about nurses' care attitudes compared to the students who did not profess high opinions about care attitudes ($p < 0.05$). The LSD method from post hoc analyzes was utilized to determine the source of these differences ($p < 0.05$; Table 2).

Table 2. Posttest mean score according to different variables

Embracing the profession	N	$\bar{X} \pm SD / \text{Min-Max}$	Test statistics
Very little ^a	30	69.03 $\pm$ 7.63/45-80	F: 2.302 0.047 (f $\neq$ a,b,c,d)
Little ^b	28	68.71 $\pm$ 8.97/39-79	
Moderate ^c	24	70.29 $\pm$ 5.51/60-80	
Good ^d	56	69.25 $\pm$ 9.14/28-79	
Excellent ^f	10	76.50 $\pm$ 5.42/62-80	F: 2.292 0.048 (c $\neq$ e,f)
Internship contributes to the profession	N	$\bar{X} \pm SD / \text{Min-Max}$	
Moderate	29	66.72 $\pm$ 10.83/28-78	
Very good ^e	40	72.02 $\pm$ 7.24/54-80	
Excellent ^f	23	72.73 $\pm$ 5.93/62-80	F: 2.961 0.014 (d $\neq$ b,f)
Nurses' attitudes towards care is important for me	N	$\bar{X} \pm SD / \text{Min-Max}$	
Little	11	74.72 $\pm$ 4.73/63-80	
Good ^d	62	67.98 $\pm$ 9.00/28-79	
Excellent ^f	35	73.20 $\pm$ 6.65/54-80	

$\bar{X}$: average, t: paired samples statistics, SD: standard deviation, F: LSD method from post hoc analyzes, a: very little, b: little, c: moderate, d: good, e: very good, f: excellent

Students' subscale pre-test and post-test dependent group comparisons demonstrated no significant difference between the groups (Table 3).

There was a significant difference in the ASCRN in Meeting Self-Care Needs and Counseling" score of students who answered positively to the question about whether they liked their profession ($p<0.05$) compared to the subscale score of students who reported negatively to this question. There was a

statistically significant difference between the subscale scores of students who thought that internship contributed to the profession compared to subscale scores of other students ($p<0.05$). There was a statistically significant difference between the subscale scores ($p<0.05$) of students who reported having high opinions about nurses' care behaviors compared to ones who did not care for nurses' care behaviors. LSD method from post hoc analysis was used to determine the source of these differences ($p<0.05$; Table 4).

Table 3. Subscale pretest and posttest mean scores

Paired samples statistics			
Subscales		$\bar{X}\pm SD$	Test statistics
Attitude subscale in regards to nurse roles in meeting self-care needs and counseling	Pretest	31.09 $\pm$ 2.89	t=0.704
	Posttest	30.86 $\pm$ 3.65	p=0.483
Attitude subscale in regards to nurse roles in protecting individuals and respecting their rights	Pretest	18.03 $\pm$ 1.71	t=0.944
	Posttest	17.84 $\pm$ 2.19	p=0.346
Attitude subscale in regards to nurse roles in the treatment process	Pretest	17.50 $\pm$ 1.79	t=1.336
	Posttest	17.23 $\pm$ 2.23	p=0.183

$\bar{X}$: average, t: paired samples statistics, SD: standard deviation

Table 4. Meeting self-care needs and counseling subscale posttest scores according to variables

Variables	N	$\bar{X}\pm SD/\text{Min-Max}$	Test statistics
Embracing the profession			
Very little ^a	30	30.40 $\pm$ 3.31/19-35	
Little ^b	28	30.35 $\pm$ 3.82/20-35	
Moderate ^c	24	30.70 $\pm$ 2.78/25-35	F: 2.720
Good ^d	56	30.37 $\pm$ 4.01/11-35	0.022
Very Good ^e	16	32.68 $\pm$ 3.49/25-35	(f $\neq$ a,b,c,d)
Excellent ^f	10	33.90 $\pm$ 2.28/28-35	(e $\neq$ a,b,d)
Internship contributes to the profession			
Moderate	29	29.37 $\pm$ 4.92/11-35	F: 2.633
Very Good ^e	40	31.82 $\pm$ 3.26/25-35	0.026
Excellent ^f	23	32.13 $\pm$ 2.51/28-35	(c $\neq$ e,f)
Nurses' attitudes towards care is important for me			
Little ^b	11	33.00 $\pm$ 2.09/28-35	F: 3.620
Good ^d	62	29.75 $\pm$ 4.09/11-35	0.004
Very Good ^e	29	30.62 $\pm$ 3.68/20-35	(d $\neq$ b,f)
Excellent ^f	35	32.45 $\pm$ 2.86/25-35	(e $\neq$ f)

$\bar{X}$: average, t: paired samples statistics, SD: standard deviation, F: LSD method from post hoc analyzes, a: very little, b: little, c: moderate, d: good, e: very good, f: excellent

DISCUSSION

Zhang et al. (2022) stated that a good clinical environment contributes to increasing students' self-confidence, decreasing their anxiety about the clinical environment, developing their skills, increasing their motivation and learning roles and responsibilities (19). Teaching about care provides nursing students with strength and self-confidence and students learn how to develop their own caring attitude (20). Students who do not experience caring behaviors may experience feelings such

as depression, stress and anxiety. These feelings may hinder learning and prevent them from performing their nursing skills (11,21). Caring behaviors can only be supported by generations who experience and have positive feelings for care (2). This study determined that students' pretest and posttest scale mean scores were similar and moderate. According to this finding, it can be argued that students' attitudes towards care roles were at a moderate level. The findings of the study are supportive and in line with the results reported in the literature (22-24). However, the lack of difference between the scale scores before and after

the internship suggests that internship practice did not make any difference in these students' attitudes towards their caregiver roles. According to Cohen's theory, professional nursing skills and values of nursing students develop gradually over time through the nursing education and clinical teaching process. Moreover, according to Cohen, there is a difference in the care behaviors of 1st and 4th year nursing students which occurs as a result of clinical teaching (25). Many studies reported a positive development in the perception and attitude of nursing students when they advance in their studies along the years (26,27). Neumbe et al. (2023) stated that students who started the nursing profession as idealists and were eager to care for patients were disappointed and behaved sloppily and cynically in their studies in later grades (28). Fahmy et al. (2020) stated that students' ideals about care weakened at the end of the education program and they provided negative definitions about nursing care (29). It was stated that clinical training can affect nursing students negatively, such as being insensitive to human needs. The studies conducted in Türkiye also reported a negative relationship between nursing students' perception of care behavior and grade level (30,31). These negative results were usually associated with learning and teaching processes. In addition, it is stated that the advanced technology and economic constraints of the health care system may cause nursing students to focus their learning efforts on the instrumental aspect of care, resulting a lack in the expressive aspects of care (32). One of the reasons for this situation may be the nurses' task-oriented work and the creation of negative role models. Clinical field culture was reported to be one of the factors that negatively affect students' care behaviors (33). According to the findings of this study, the scale scores of the students who had a high-grade point average, who loved their profession, who had high opinions about nurses' care attitudes and who believed that the internship period would contribute to professional development were much higher than the other groups. Interest and eagerness are accepted as prerequisites in maintaining the nursing profession. The current study supports this idea. In this respect, studies support the view that students who selected the nursing profession on their own volition have higher levels of professionalism compared to other students (24,34). Many researchers emphasize that nursing students' care perceptions and care behaviors can only be realized when care is indeed perceived as the nature of nursing practices and training. In this process, nurses and educators' modeling behaviors are crucial (35,36). In addition, it is emphasized that the interaction between students, nurses and educators as well as a climate that supports care are important in this process. Studies indicate that students' caring behaviors can be improved by basing clinical teaching on the positive effect of care (37).

The students who had high scores about their feelings towards the profession and had high opinions about nurses' care behaviors had more positive attitudes towards expressive care behaviors compared to instrumental care behaviors, indicating that student nurses were aware of patients' needs. The students stated that the basic needs of the patient should be met with

trust and comfort and this should be achieved through effective communication (2,4,7). In addition, studies demonstrated that students were positive about protecting patient rights, respecting them and recognizing their right to choose, which is similar to the findings of this study (38). In addition, this study concluded that students who had high opinions about nurses' attitudes towards care had more positive attitudes towards instrumental behaviors rather than emotional behaviors. In similar studies, students reported that instrumental care practices were more important than expressive behaviors (2,5). These results show that students who are affected by nurses' care behaviors perceive only instrumental care behaviors as care and they pay attention to them. It is an important finding that students have positive perceptions about care behaviors, but this positive perception is based on instrumental care behaviors. Therefore, more emphasis is needed on the development of expressive care behaviors in the nursing curriculum as well as throughout nursing education. To develop caring behaviors, the faculty should have a positive understanding of care and needs to create a suitable environment for care because care is an interpersonal process based on interaction and can only be gained in such environments (38). In addition, nurses should act as role models in the process of transferring the role and content of care to students (36). Some studies in this field demonstrated that students can develop care behaviors by copying the behaviors of educators and experienced nurses through interaction (2). Also, feedback from patients and patient relatives for students' care behaviors was found to be effective on students' caring behaviors (39).

In their studies, Loke et al. (2015) and Fenizia et al. (2019) reported a two-way change in the care behaviors of 2nd and 3rd year students. A significant improvement was observed in handling tasks with competence in the instrumental dimension of care while there was a decrease in responding to individual needs in the expressive dimension of care. However, along the years, progress is expected in all aspects of care behaviors. Accordingly, there is a need for more effective approaches related to teaching the expressive dimension of care, especially in later grades. One of the reasons why students' perceptions and attitudes differ about different aspects of care may be related to the methodology of the research because students define care as a multidimensional concept in qualitative studies (2). However, quantitative studies also provided similar results showing that students' perceptions and attitudes towards care mostly focus on basic physiological needs (38). Studies conducted in Türkiye also support this result (19). Culture is given as another reason for this difference. Nursing students in different cultures have different perceptions and attitudes towards expressive and instrumental behaviors of care (40). In addition, the education system and the curriculum are among the reasons for this difference (1). Changes in technology, new practices, increased workload and the increasing use of medical method in health services can be counted among the reasons why physiological needs are more important than emotional needs in nursing practices.

CONCLUSION

According to the findings delineated in this study, the participation in internship programs did not yield a statistically significant variance in the attitudes of nursing students towards caregiving. To elucidate the observed disparities and garner more insightful outcomes, it becomes imperative to scrutinize not only the behaviors but also the perceptions and attitudes of students. Furthermore, the discernment that students harboring a fervent dedication to the profession, appreciating nursing caregivers' altruistic actions, and maintaining affirmative perspectives regarding clinical education showcased more favorable dispositions towards both the affective dimensions of caregiving and caregiving itself could be deemed pivotal within this investigation.

Conflict of Interests

The authors declare that there is no conflict of interest in the study.

Financial Disclosure

The authors declare that they have received no financial support for the study.

Ethical Approval

Ethics Committee Approval: Approval for our study was obtained from the Ethics Committee of Ege University Faculty of Medicine 07.11.2018 to carry out the research (meeting 09/05 and decision no: 59).

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