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THE LIVED EXPERIENCE OF FIRST YEAR UNDERGRADUATE STUDENT NURSES: A

HERMENEUTIC PHENOMENOLOGICAL STUDY

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ABSTRACT

Introduction

This study gives insight into the experiences and perceptions of one group of undergraduate nursing students as they make the transition into Higher Education and the nursing profession, during the first year, of their three-year programme. Research has shown that first year undergraduate experience is complex and challenging for any student. For undergraduate nursing students, the process of achieving additional professional practice competencies required for United Kingdom nursing registration adds additional responsibility and potentially, more pressure. Few studies have considered student nurses' lived experiences during their first year of study in any depth.

Study aim

This study aimed to understand how one group of undergraduate nursing students' perceived their experiences of the transition into higher education and nursing profession

Design

Framed within an interpretive philosophical paradigm, a hermeneutic phenomenological approach enabled the exploration of participants' lived experiences.

Setting and Participants

The study took place at a Higher Education Institution approved nurse education provider in the North of England, United Kingdom (UK). Following ethical approval, ten first year student nurses from a range of different backgrounds gave informed consent to participate.

Methods

Over a one year period between 2013 and 2014 participants provided data at three points during their first year (four months, eight months and twelve months) via semi-structured, digitally

recorded individual interviews (n=30) and digital recordings of critical incident accounts as they occurred (n=30). Data was transcribed verbatim, systematically thematically analysed drawing on hermeneutic phenomenological principles and verified for thematic accuracy by participants in 2015.

Findings

Five themes emerged from the data: uncertainty; expectations; learning to survive; seeking support; and moving forward. Findings identify that the participants had developed skills to survive however considerable variation in their experience, influenced motivation and behaviour. They developed their own skills of coping to deal with the demands of academic life and those of the practice setting. An explanatory student journey model demonstrated that developing self-efficacy was key to their successful transition through the first year of undergraduate study.

Conclusions

Understanding the first year student nurse perspective and insight into their coping strategies are key to supporting a positive learning journey. Positive feedback from nurse educators, a growing sense of nursing community and motivation to succeed facilitates their internalisation of nursing identity, norms and values and an active pursuit of learning towards graduate status and becoming a nurse.

Key Words

Student nurses, transition, lived experience, professional transformation, self-efficacy

INTRODUCTION/ BACKGROUND

When embarking on undergraduate nursing programmes students face many challenges. They are entering an environment which they need to adapt rapidly to enable them to engage in academic and socio-cultural changes (Morosanu et al. 2010). Some of the challenges include being away from home for the first time; exposure to professional practice and limited support because of leaving family and friends. The first year is viewed as critical in ensuring that students engaging within programmes of learning are successful in achievement Trotter and Roberts (2006), Ooms et al. (2012). Recent research Mahssod (2017) identify this is in part related to Higher Education Institutions' (HEIs) organisational processes that are required to enable the student to succeed and have a positive student experience. Other current literature relating to the first year undergraduate

experience more generally indicates recurrent themes relating to performance and retention, support and learning and teaching.

Notable exceptions that suggest the first year student experience is transformational include Tinto (1996), Pascarella and Terenzini (1999, 2005), Pitkethley and Prosser (2001), McInnis (2003), Harvey and Drew (2006) and Hillman (2005).

Year one is a valuable stage of the student journey during which students begin to take responsibility and develop skills relating to self-management. Specific issues that affect the students' first year experiences include: engagement (Morrow and Ackermann 2012); workload (including assessments) (Thalluri and King 2009); support (Ooms et al. 2012); learning in practice; expectations; (Mikkonen 2016); attrition (Braine and Parnell 2011) (Pitt et al 2012); and relationship with lecturers (Hamshire et al. 2017). However, there is a lack of qualitative research that has specifically focused on year one undergraduate nursing students' lived experiences of their journey. This study aimed to address this using the following research question: How do undergraduate nursing students' perceive their experiences of the transition into higher education and nursing profession?

RESEARCH METHODOLOGY

This research was conducted in the interpretive paradigm using a hermeneutic phenomenological approach informed by the work of van Manen (2016). Hermeneutic phenomenology meant that the researcher could explore the participants' interpretations and add own interpretations. Hermeneutics adds the interpretive element to explicate meanings and assumptions in the text that participants themselves may have difficulty in articulating, for example, tacit practice knowledge (Crotty 1996). Communication and language are intertwined and hermeneutics offers a way of understanding such human experiences captured through language and in context (van Manen 2016). The aim of utilising hermeneutic phenomenology was to construct an animating, evocative description of human actions, behaviours and intentions.

Recruitment and sampling

Purposeful sampling was used to select information-rich participants for detailed study (Cresswell 2017). Ten student nurses consented to participate. This sample size facilitated collection and analysis of in-depth data and increased the intensity of contact with participants (Cohen et al. 2000). Participants were enrolled undergraduates at one UK HEI from different nursing fields: child (n=2); mental health (n=2); learning disability (n=2) and adult (n=4) providing breadth of perspective within the sample. No deliberate selection based on demographic characteristics was made.

<u>Data collection</u>

Data was collected via a diary-interview method (Zimmerman and Wieder 1977) between January 2013 and April 2014. Participants were asked over a period of a year to record their experiences and submitted digitally recorded diaries of critical and significant incidents occurring in university and clinical placement. Each recording lasted between 45 and 90 minutes. An Olympus Digital Voice Recorder VN-8500PC was used as the primary method of audio recording. Students had their own device for the period of the year. The recordings were downloaded and sent via e-mail prior to transcription. A secure e-mail address was identified.

The advantage of a digital voice recorder is that it was compact enough to transport, was not obtrusive and could be used when chosen to by the students. The digital devices were also used to record one to one interviews. Participants were guided to include positive and negative reflections on meaningful events for later exploration. Recordings were transcribed verbatim (n=30) with analysis informing the interview guide. A series of three interviews were scheduled on University premises, with each participant at a date following submission of recorded critical incidents, each lasting between 1hr and 1hr 30 minutes. These dates were at significant points in the first year programme i.e. following a theory and practice allocation, which was approximately four months, eight months and end of first year. Transcriptions of recordings formed the basis of each semi-structured interview. In keeping with hermeneutic phenomenology, (van Manen 2016) interviews enabled conversational relationships to develop with participants facilitating exploration and reflection on the meaning of their experiences. Interviews focusing on their diary entries and the interview facilitated questioning that started broad, becoming increasingly focused offering a balance between directing questioning towards the research question whilst facilitating the emergence of issues important to participants (Lincoln and Guba 2000).

<u>Data analysis</u>

Drawing on hermeneutic phenomenological data analysis techniques recurring themes were identified resulting in "thick description" of participants' experiences (van Manen 2016). Using a six stage systematic analysis method (Titchen and McIntyre 1993) involved: line by line immersion, organising, reading and initial interpretation of textual data sets; understanding, identifying and coding first order "participant" constructs; abstraction, identifying second order, "researcher" constructs and grouping into sub-themes; synthesis and theme development, grouping and elaboration; illumination and illustration of phenomena establishing links to the literature and developing data stories; finally, integration, external critique and reporting of final themes.

Interpretations were cross-checked with original transcripts to maintain closeness to the participants' constructs, maintaining authenticity in the analysis. The final themes were reviewed by participants in January 2015 who verified their accuracy in reflecting their perceived lived experiences; thereby adding rigor to the research process (Lincoln and Guba 2000).

Ethical considerations

Ethical approval was obtained (University Ethics Committee August 2012). Participants were assured

of confidentiality and anonymity in reporting, unless issues of safeguarding or unsafe practice were disclosed. Participants' human dignity was respected and they were treat with appropriate sensitivity, consideration and care.

Rigor

Reflective notes were compiled throughout enabling recording of researcher decision making, influence and reflexivity to ensure dependability and authenticity of findings (Cresswell 2017). "Hermeneutic alertness" (van Manen 1997 p.48) was maintained by stepping back to reflect on meanings of situations rather than accepting them at face value.

FINDINGS

Analysis yielded five themes: uncertainty; expectations; learning to survive; seeking support; and moving forward. Each is presented supported by verbatim quotes with participant number and line number identified.

Theme one: Uncertainty

Transition into higher education and nursing created participant uncertainty. They were challenged by the nursing concept, values and beliefs as they learned, especially placement one:

"I am less sure what a nurse is and what the function of a nurse is than I was before I started

and I feel slightly at a loss..... it was quite a dispiriting experience". (P5 Line 583)

 Mentors were identified as important to help mediate this uncertainty providing positive role models:

 "the whole mentoring support was brilliant." (P 7Line 352)

"she is a role model, like I want to be someone like her, the way that she is able to be so

professional and yet be so kind with the patients". (P 10 Line 394)

Post practice student discussions facilitated by nurse educators enabled deeper learning, enhancing student confidence thereby reducing uncertainty:

"I think it's just good practice at the end of placement...... to kind of debrief the whole

situation". (P5 Line 831)

Mature participants raised the importance of advance preparation for the significant academic demands of the programme:

"would it be worth investing some time in mature students ......while you can be fantastic, one

to one with a patient ....if you are not academically sufficient to pass the essays, where will

you end up?". (P4 Line 110)

Discussions of initial feelings featured amongst the participant's feedback and language referring to feeling nervous, isolated was used to describe how they felt in the first few days/weeks.

"my feelings starting on the course, I was overwhelmed shall we say. I've waited four years to get on to the programme". (P4 Line 3)

"when I came here I was on my own. I was totally on my own". (Line 226) How did that make you feel? Isolated. (P2 Line 234)

Theme two: Expectations

Participants' all suggested clearer information from the outset about both the theory and practice expectations of the course were needed including more clarity about the role of the nurse educator:

"I am not really clear on what the role of a tutor is, I don't think that's ever truly clarified,

you know, what they are there for and to the extent of the help that they are willing to give.."

(P7 Line 36)

Participants occasionally felt disappointed with a lack of support, for example in delayed response to emails:

"I am really disappointed that that email [to tutor] has just gone completely unnoticed and

I've had nothing back from it. It's just not been a really good support". (P3 Line 26)

Understanding expectations relating to the first placement experience were identified as important with the mentor identified as the person who had an influence on understanding for example:

"the charge nurse was very good because he took the time to explain things to me, he was a very busy man, he was very straight to the point because he didn't have time, but I am like that and I don't mind and I got to see things from his perspective". (P1 Line 560)

Theme three: Learning to survive

Evolving resilience as a means of learning to survive was evident in the data. All participants described drawing on an inner strength to succeed identifying a sense of community amongst peers as important in the development of self-confidence in their ability to cope:

"I think, as an older person you have the resilience, I have been in plenty of situations before which have been kind of unpleasant and you just have to put up with it and you can do that better when you are older. When you are eighteen it is difficult to do this. I was talking to her about this (fellow student), and she came in with the kind of really high expectations about what this was going to be, as I think everybody does". (p.5 Line 629)

Mature participants identified increased family support as essential to their survival during their degree. For example, one participant's spouse changed jobs to help juggle childcare demands providing her with high levels of motivation to succeed. Others also described 'juggling' commitments to balance increasingly challenging personal and professional demands:

"I feel like everything has been a bit of an upheaval. Finding time to do things and looking after the three children and doing their homework and my homework and life itself, family life, but I have managed". (P.4 Line 18)

 Integrating into the university was a complex challenging process. At an early stage in year one, one participant struggled with the fact she was not sharing accommodation with other nurses:

".. like compared to my flatmates, you know, city life, going out, drinking, hardly doing any work, missing classes....but I think no, I have to be in class, no, I can't come in with a hangover, no, I have to leave early if I am on a night out because I have work in the morning, and it's so different......."

there's not even anybody about during the holidays......I think it would have been nice if I had lived with one other nurse". (P10 Line 484)

As the year progressed and friendships developed this participant no longer discussed feelings of loneliness having learned how to survive through developing resilience and coping strategies.

Theme four: Seeking support

Seeking out support was a process participants increasingly engaged in over the year. They placed

high value on helpful, approachable, caring staff that were available and willing to listen to their concerns. In the study context, their guidance tutor and group were valued positively as a source of support:

"...straight away I felt that I had a social network and gradually formed bonds with people in the rest of our group. So that's, having that little Graduate Tutor (GT) group is a great sense of community straight away and meeting your GT, tutor on the first or second day is great because you know you have got a named person". (P7 Line 38)

One participant referred to the Guidance Tutor (GT) group as their "body armour" explaining that seeking support from them had helped them cope. Not all participants had a positive experience with nurse educators including difficulty in communicating, not feeling valued or not feeling able to seek their support. One person described encountering a death in the clinical setting for the first time and feeling she couldn't go to her GT for support:

".. it was the first time I have ever seen anyone die or even anyone who was dead and how difficult that was.......if you feel as though you are not getting a response [from the tutor], you think, oh why should I bother?" P10 (Line 210)

The use of Skype was identified as a positive source of support by the participant who lived a good distance away from the university. Social media also provided a source of peer support:

".... we did start a nursing group on social media , just a private one between our GT..... it's been quite good because anytime that I am getting stuck on an assignment..... I just look at that and I think, right, well is there anything that I feel the same or have I, somebody asked that question before me and what have other people said". (P9 Line 32)

Theme five: Moving forward

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By month twelve, all participants developed confidence, were enabled and felt empowered to move forward into year two. Despite the challenges, instilled ambition gave them the intrinsic motivation to succeed. Focusing on the future with its potential personal and professional rewards was a key motivator. For mature participants these rewards were perceived as for their families too: "I have got an eighteen year old daughter; I have got to show her that you can't just sit on your backside, actually that is important being a role model when you are older, you know, just for your kids". (P2 Line 907)

Over the first year some of the participants perceived that their level of confidence was growing and they were starting to believe in themselves:

"I am starting to believe I can do this; I have made the right choice and have received excellent feedback from mentors. I am ready for year two". (P 6 Line 5)

They also developed insight into which actions were more likely to lead to success. This anticipation of desirable outcomes motivated some to persist and succeed:

"my goal is to obtain a two one in my degree and so what I am very sure about is that I wanted to sort of prepare before I started .... so I bought some books and tried to learn from them. This has definitely paid off in preparing me for the year that has passed". (P3 Line 17)

 Constructive feedback had enabled participants to learn, develop academic skills and move forward however negative feedback had the opposite effect:

"Whilst the feedback was truthful, some of the wording I thought was quite blunt. I had been assured that any feedback would be positive or, you know, not making the person feel slighted in any way but I did feel there was a little bit of that and I was disappointed in the comments,

(P7 Line 80)

DISCUSSION

This study set out to address the question: How do undergraduate nursing students' perceive their experiences of the transition into higher education and nursing profession? Five themes were identified which together provide relevant insight: uncertainty; expectations; seeking support; learning to survive and moving forward. The overarching commonality across and within each theme was the students' intrinsic motivation and the development of their own coping skills. Drawing on support available they began to believe they had the skills for tackling academic and practice

challenges; in essence they had developed self-efficacy (Bandura 1977; Snydser and Lopez 2010) as student nurses.

Data showed the students were challenged by the transition into Higher Education adapting to new learning and social environments, in university and practice. This raised levels of uncertainty, especially early in year one. There was evidence that as part of developing self-efficacy, learner autonomy, greater levels of resilience and coping strategies developed over time. The development of student resilience is key within nurse education (Thomas and Hunter Revell 2015). This is congruent with other research that suggests transition into the university is a crucial period and is likely to have an impact on future achievements (Hultberg et al 2008). Figure 1 depicts the key themes identified and how they present over the period of a year.

Figure 1: Student Journey within the First Year
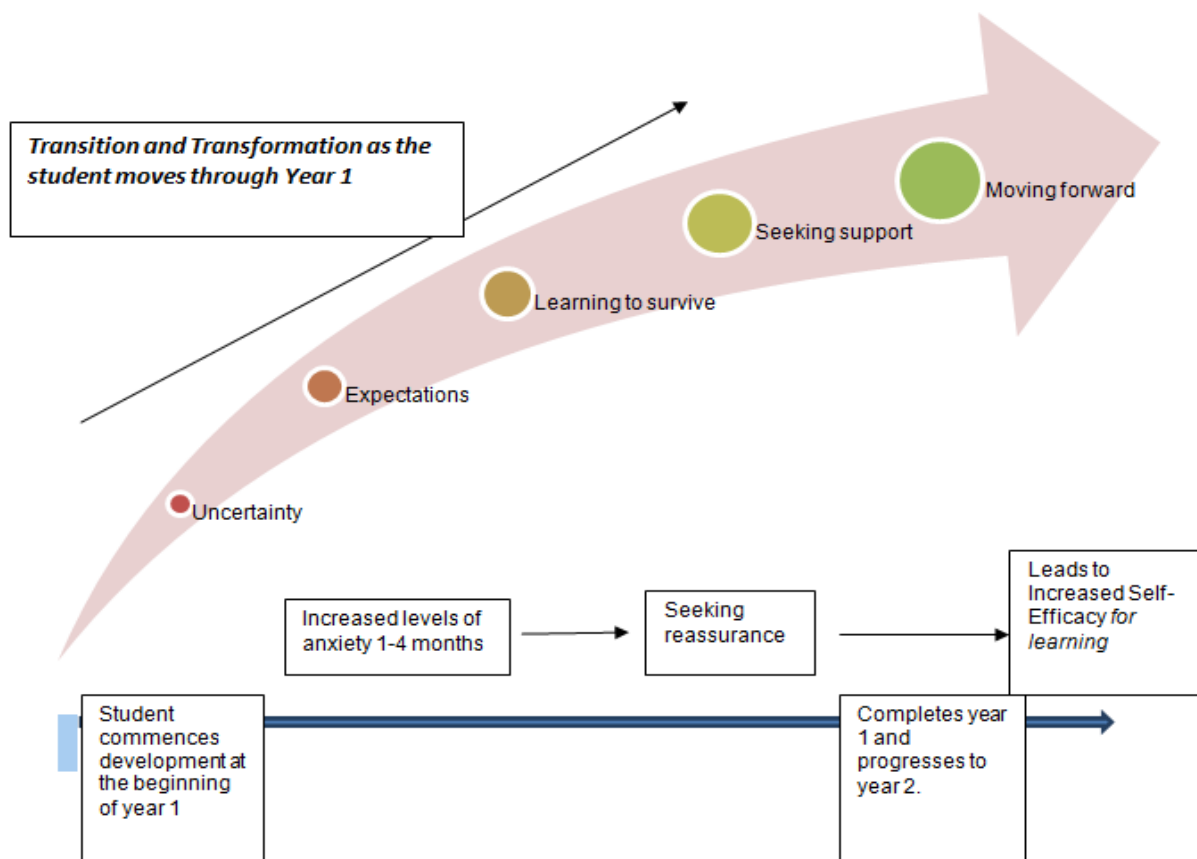
The adaptation curve is a graphical representation of the relationship between the themes identified in lived experience of the students studied and their transition through the first year of the degree programme. The initial slope of the curve upwards is significant in that the first one to four months of the transition into the programme there are increased levels of anxiety and uncertainty relating to the process of transition and adjustment as they start on the process of professional transformation into graduate nurses. Between four and eight months most illustrated greater self-efficacy beginning to demonstrate their survival strategies to mitigate stress. The stress and coping approach derives from early psychological models of the impact of life events (Lazarus and Folkman 1985). Available and accessible support in both University and on placement was needed to mitigate transition stress, enabling transformation and success as a student nurse. Tutors and mentors who were empathetic, caring and respectful, positively role modelling nursing values and behaviour facilitated student support, engagement and empowerment.

Findings suggested that with positive supportive experience, the students developed resilience, beginning to feel more confident and competent. Students expected and valued positive constructive feedback from tutors and mentors. Other research has shown feedback is a powerful tool in the promotion of learning (Webb and Shakespeare 2008). In this study, feedback was also a key component in the development of student self-efficacy.

A growing sense of a community also aided the development of students' resilience. Acknowledging that peers faced the same challenges, grew students' self-confidence over the first year; they recognised their journey was not unique. Initially the majority relied on family support until there was more established peer support network at University. This fits with theory of communities of practice (Gobi 2010). In year one the students were beginning to align their professional identity to the community of practice of student nurses, via for example social networking. Maintaining contact through networks is an important mechanism for identity stability within professional groups (Machin et al 2012). Within the study sample, there was no difference between the perceived lived experiences of students across the nursing fields of adult, mental health, learning disability and child. Their identity as a legitimate graduate nurse within their chosen field arguably comes later as they have more experience learning alongside them (Gobi 2010). In year one, coping with the academic and practice demands of degree had primacy for the students. Cross-field education and social opportunities, including housing allocation may help nurse educators to foster this sense of student nurse community and peer support as a foundation for building resilience as independent, self-efficacious learners. The development of this self-efficacy was essential to enable the students

to move forward confidently, maintaining self-motivation towards their career aspirations of graduate status and registration as a nurse fit for purpose.

Limitations of the research

This research was located within an interpretive paradigm and as such is not intended to be generalisable in a probability sense beyond the study context and participant. However, the UK Nursing and Midwifery Council standards for pre-registration nurse education (NMC 2010) are adhered to throughout all approved provider HEIs. This similarity in programme context is likely to increases the transferability of the findings to the experience of other student nurses and be of use to others in the field nurse education. Although significant amounts of data were collected from 10 participants, a broader sample may have introduced more variation in the findings. However as a phenomenological study focused on one group of individuals the outcome was a robust in depth understanding of their lived experience in context. Finally, it is over two years since the final data collected was analysed. However study results remain in keeping with the current context of HE and current published research. Future studies will capture the ongoing experiences of students as the HE nursing context changes.

CONCLUSIONS

This study has provided important insights into the first year learning journey experiences of a group of undergraduate student nurses. Key to their lived experience is their developing sense of selfreliance and self-efficacy, enabled through support, feedback and identity development in a transformative process towards becoming a nurse. This included engagement with and internalisation of norms, values and identity of the nursing profession, first as student nurses; and an active pursuit of learning driven by motivation to succeed for the benefit of themselves and others. These findings provide a unique is insight into how this group of students coped with their transition into university and dealt with day-to-day challenges presented. The overarching commonality across and within each theme is the ability of all the students to develop their own skills of coping to deal with the demands of academic life and the practice setting. It is evident though that an integrated partnership approach between university, practice staff and the student reinforces the student's belief in being able to succeed. The development of self-efficacy within the first year experience of student nurses is an important aspect to the learning process and meeting the needs of the students. By application of Bandura's framework, the potential to develop a more questioning approach may surface. Utilising the sources of self-efficacy can improve student effort, persistence, goal setting and performance on specific tasks. However, despite identified study limitations, this

study has shown that a key role of nurse educators and mentors in practice should be the active promotion of student self-awareness, deepening their learning to increase their self-belief and self-efficacy. Positive feedback from nurse educators, a growing sense of nursing community and motivation to succeed facilitates this. By actively engaging nursing students in a positive year one journey, empowering them to develop greater learner autonomy as student nurses is key to successful transition on their journey to becoming graduate professional nurses.

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