Live experience of nursing students with internship program: A phenomenological study

Mahdi Karimyar Jahromi[1], Marzieh Momennasab[2], Shahrzad Yektatalab[3], Nilofar Pasyar[3], Mozhgan Rivaz[2]

Abstract:

BACKGROUND AND AIM: The internship is a program for transition of nursing students to the clinical setting. This study was conducted to describe and interpret the experiences of nursing students from the internship program.

MATERIALS AND METHODS: This was an interpretative phenomenological study following Van Menen's approach in six steps. Twelve nursing students were selected from 12 different universities in Iran from April to August 2020. Data was collected through 15 in-depth interviews (three supplementary interviews) over the course of 25–90 min and verbatim transcriptions. Data were analyzed with MAXQDA version 10 software. The researcher used four Guba and Lincoln criteria to obtain a rigorous study.

RESULTS: In this study, three main themes and eight subthemes were extracted. The main themes included "professional identity development," "moving toward professional self-efficacy," and "developing coping strategies for workplace adversities." The subthemes were "promoting the cognition of profession," "acceptance among colleagues as a nurse," "accepting professional roles," "self-awareness of weaknesses in patient care," "self-reliance," "advancing clinical skills," "adopting effective coping strategies," and "avoiding tension in clinical settings."

CONCLUSION: Nursing internship students have experienced moving toward professionalization with professional identity and self-efficacy development, and they succeeded in clinical challenges by learning coping approaches.

Keywords:

Education, graduate, nursing, qualitative, research, student

[1]Department of Nursing, Student Research Committee, Shiraz University of Medical Sciences, Shiraz, Iran, [2]Department of Nursing, School of Nursing and Midwifery, Shiraz University of Medical Sciences, Shiraz, Iran, [3]Department of Nursing, Community Based Psychiatric Care Research Centre, Department of Mental Health and Psychiatric Nursing, School of Nursing and Midwifery, Shiraz University of Medical Sciences, Shiraz, Iran

Address for correspondence:
Dr. Marzieh Momennasab, School of Nursing and Midwifery, Nemazee sq. Zand St. Shiraz, Iran. E-mail: mnasab48@yahoo.com

Introduction

Internship is a strategic program to support nursing students in clinical setting, with the aim of facilitating role change in hospitals,[1] shaping basic skills,[2] and creating a clear understanding of the professional and clinical environment for students,[3,4] which is implemented in different forms.[5]

The internship program started in 1900s due to competition between hospitals for attracting nursing students and students' efforts to enter clinical environments.[6] This program was launched in 1982 in various clinical fields such as psychiatry nursing, as well as critical and geropalliative care,[7] which reduced challenges and stress and increased the sense of support in students in clinical settings.[8]

Although clinical learning is an important part of nursing education, some studies have shown that students are not able to gain sufficient experience in clinical settings.[4,9,10] Various investigations around the world have shown that clinical environments do not have suitable conditions for clinical education from the students' viewpoints.[11,12]

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Some studies in Iran have also reported the above-mentioned results. In this regard, a study conducted in Shiraz (Iran) showed that clinical education environments are not suitable from the perspective of nursing students.[13] In another work, final year nursing students in Tehran (Iran) believed that they did not have the necessary skills to provide effective and safe nursing care.[14] A study in Kurdistan (Iran) reported that nursing students had not acquired some essential capabilities.[15]

In Iran, after the clerkship program in 1992,[13] the national internship program for nursing students was developed in 2012 and implemented in September 2016. Based on this program, nursing students, similar to the nursing staff, spend a full shift in the hospital, getting trained under head nurses and staff supervision and benefiting from staff facilities such as nutrition and transportation.

Due to the infancy of this program in Iran, no qualitative study was found on the experiences and opinions of nursing students about the internship program.

Given the importance of reviewing students' experiences, as recipients of educational services, and the experiences of those who are directly involved in clinical education settings,[16] this study was conducted to describe and interpret the experiences of nursing students from the internship program.

Materials and Methods

Study design and setting
This qualitative study was conducted with an interpretive phenomenology study in Max Van Menen approach from April to August 2020. According to him, interpretive phenomenology provides a systematic approach to analyze and discover the phenomenon with in-depth understanding.[17]

The present study was performed in six steps as follows: In the first phase, "turning to a phenomenon,"[18] identifying the phenomenon and bracketing previous perceptions were done. In the second phase, "investigating experience,"[19] the proposed sampling was conducted. In the third phase, "reflection on the essential the mes, "each interview, rethink and analyzed to extract the main themes.[20] In the fourth stage, "the art of writing and rewriting," the phenomenological text was arranged, so that it reflected the voice of the participants. This was accomplished by identifying the researcher's assumptions, studying different phenomenological texts, and turning students' experiences into anecdotes. In the fifth stage, "maintaining a strong and oriented connection with the phenomenon," an attempt was made to clarify and describe the thematic statements and to maintain the connection between the text and the lived experiences. Finally, in the sixth stage, "balancing the research context," a coherent description of the different parts of the research was provided, considering its details and the overall context.[21,22]

Study participants and sampling
In this study, proposed sampling was used and 12 nursing students participated from 10 different universities in Iran (Bushehr, Kerman, Yazd, Isfahan, Shiraz, Khorramabad, Tehran, Fasa, Babol, and Semnan). Due to the absence of students in the colleges due to coronavirus disease 2019 (COVID-19), the researcher first introduced himself to the nursing colleges and after identifying the student, stated the goals and importance by telephone to get her/his trust. If the student wished to participate in the study, the right time and place were determined. Inclusion criteria were being an eighth semester BSc nursing student, presence in the internship program, willingness to participate in the study, and ability to present one's experiences.

Data collection tool and technique
In total, 15 in-depth interviews were conducted (three supplementary interviews) over the course of 25–90 min. The initial interview guideline [Table 1] was prepared according to the literature review and research team comments.

The interview location, college or hospital, was chosen based on the students' preference and taking into consideration their safety from getting infected with COVID-19. The interviews were recorded with the participants' permission and transcribed verbatim. Field notes were also taken.

Data were analyzed based on the advice of Van Manen with three approaches: "wholistic approach," "selection or highlight approach," and "detailed approach."[23,24] For this, the researcher went back in the direction of the research process and examined the whole context and the relationship of each detail with the whole context.[20] For data analysis, MAXQDA version 10 software was used.

To obtain a rigorous study, the researcher used the four Guba and Lincoln criteria, that is, credibility, transferability, dependability, and confirmability, which included long-term researcher engagement, peer and member checks, a complete description of data collection and analysis steps, interview recording,

Table 1: Questions of interview guideline
Please explain your day in the internship program

What do you think the internship program is/what does it mean?

How do you feel about the internship program?

What comes to mind when you think about internships?

and full description of the environment research and participants.[25]

Ethical consideration

To maintain the participants' independence, all participants were given the necessary information about the study and were assured that participating in the study would not affect their educational status. Subsequently, they voluntarily signed the consent form. Participants were given the option to end the interview if they wished. In order to protect the privacy of the participants, the interviews were conducted in a private place, and they were assured that only the researcher would be aware of their identity.[26,27]

Results

In total, 12 students (seven males and five females) ranging in age from 22 to 25 years (averaging 23.64 ± 0.7 years) were enrolled in this study. Table 2 shows the demographic characteristics of the students.

The data were categorized into three main themes and eight subthemes. The main themes included "professional identity development," "moving toward professional self-efficacy," and "developing coping strategies for workplace adversities." Table 3 shows the relevant themes and subthemes.

Table 2: Demographic characteristics of the participating students

Participants	Gender	Age (years)	GPA
P1	M	25	17
P2	F	21	15
P3	M	22	15
P4	F	22	15.5
P5	M	23	16.8
P6	M	21	18
P7	F	21	17.5
P8	M	22	19
P9	M	24	16
P10	M	21	18.5
P11	F	21	17
P12	F	21	16

F=Female, GPA=Grade point average, M=Male

Table 3: Themes and subthemes

Themes	Subthemes
Professional identity development	Promoting the cognition of profession
	Acceptance among colleagues as a nurse
	Accepting professional roles
Moving toward professional self-efficacy	Self-awareness of weaknesses in patient care
	Self-reliance
	Advancing clinical skills
Developing coping strategies for workplace adversities	Adopting effective coping strategies
	Avoiding tension in clinical settings

Professional identity development

This theme contained three subthemes: "promoting the cognition of profession," "acceptance among colleagues as a nurse," and "accepting professional roles."

The subtheme of "promoting the cognition of profession" was extracted from the experiences of "facing the clinical reality," "orientation with various tasks of nurses," "encountering the standards of wards," and "discovering a favorite field of work."

Regarding the experience of "facing the clinical reality," students became familiar with clinical nursing challenges, different shift routines, hospital rules and regulations, and the specific patients of each ward. They also gained a real understanding of workplace conditions and staff fatigue. In this regard, one of the students said:

I've just realized what it means when they say night-working, and what physical and mental strain it places on you. (P6)

We've just found out the problems of many nurses. I am gradually becoming aware of the conditions in wards. (P11)

Internship students were oriented to various tasks of nurses, including educational, research, management, support, and coordination activities, in addition to patient care. The students stated that before entering the internship, they did not think that the position of nurses was so privileged. A participant said:

I've found that taking IV line, suturing or NG or Foley insertion are the least of a nurse's tasks. Nurses must manage, coordinate, and train. They should be careful not to harm the patient and advocate him/her. (P1)

During the internship period, students encountered the special care standards of different wards through exposure to routines, nursing duties, and different patients in wards. One student said:

Working in the wards was different. For example, in the Emergency Room, you were walking from the beginning of the shift till the end. (P4)

In the heart wards, you had to be careful. We had to check the patient's blood pressure, heart rate, and chest pain before giving medication. (P10)

Discovering their favorite field of work by knowing their strengths and weaknesses in the clinical setting was another experience for the students. Most of students were able to understand their interests based on the conditions of the wards.

Now I know in which ward I should place myself. I've discovered my interests. (P1)

The subtheme of "accepted by colleagues as a nurse" was formed from experiences such as "supported by the staff," "effective interaction with nurses," "providing care under the nurses' supervision," and "facilitating the opinion of the staff to use the welfare facilities."

Regarding the experience of being "supported by the nursing staff," the nurses supported the students against the medical team, when they made a mistake while taking care of patients or when they were unable to do their tasks, and tried to solve the students' problems. One student described his experience as follows:

The medical intern treated me badly. One of the nursing staff shouted, 'Doctor, you are not allowed to disrespect our student'. (P6)

The head nurses supported us when we had a request or suggestion. (P1)

Students experienced effective interactions with the staff by actively participating in nursing handover, helping the staff when needed, and using the expertise of the experienced staff. These behaviors had led to the creation of an atmosphere of effective two-way interaction between the students and the staff. One student stated:

In handover, we could ask any questions from the head nurses or other staff members and were also informed about the patients' care plan. They explained what had been done or should be done. (P2)

Due to the lack of direct presence of faculty instructors in internship, students took care of and educated the patients under the supervision of the ward nurses and with their help. One of the participants stated:

Before providing the necessary training to patients, we consulted with the nurse to avoid mistakes. (P8)

The nurse supervised the work. That is, we did things with their permission. (P7)

The students used welfare facilities in the instructor's absence, had more interactions with the staff, and were accepted among colleagues. One of the students said:

During our rest time, we went to the break room with the staff and used the welfare facilities. (P9)

The subtheme of "accepting professional roles" included "responsibility in providing care," "multifaceted cognition of the patient under care," "responding to the educational needs of the patients and their families," and "patient care management." Students said:

We had to do the routine patient care. It was our responsibility. (P5)

We were fully aware of the patient's condition. When and why he was hospitalized, who visited him, what medicine he took, and what his plan was that day. (P12)

Moving toward professional self-efficacy

This theme was formed from three subthemes: "self-awareness of weaknesses in patient care," "self-reliance," and "advancing clinical skills."

Students became aware of their weaknesses in the internship program. They found that they had communication weaknesses, lacked knowledge and patient care skills, and there was a gap between their theoretical knowledge and clinical practice. One of the participants said:

I had a lot of trouble communicating. We did not know exactly how to deal with the patients and their families. (P4)

When the patient had VF, I always prayed that they wouldn't instruct me to do anything because I did not know what to do and could not help. (P11)

Some of the experiences of the gap between theoretical knowledge and clinical practice were the non-applicability of some theoretical content, the staff's low attention to the nursing standards and protocols, the inclination to routine, and the limited use of knowledge. One student said:

Many of the theories we studied in the three years of college were not applicable in clinical settings. (P3)

"Self-reliance" was a unique experience gained through providing care without instructors' supervision, by having direct communication with patients and staff and striving for independent learning. The students performed procedures themselves and according to their nursing examinations and diagnoses.

There were no instructors above me. I had to handle and follow up on problems on my own. (P7)

If we did not know something, we would look for the instructors and ask them. Or we would consult our books or pamphlets or finally the internet. (P10)

Another subtheme was "advancing clinical skills," which included "gaining experience," "imitating expert staff," "strengthening care skills," and "enhancing communication skills." The student's readiness to care was improved, and they did procedures more easily by mastering most of them.

We faced diseases that we had never seen or learned about before. It was a new experience for us. (P8)

One member of the nursing staff was very experienced. Whatever he wanted to do, I went with him immediately and tried to work like him. (P5)

We were learning patient care, and I believe I can do 80% of a nurse's tasks. (P9)

I learned how to deal with the staff, medical team, medical students, and patients over time. (P1)

Developing coping strategies for workplace adversity

This theme consisted of two subthemes, "adopting effective coping strategies" and "avoiding tension in the clinical setting." Although the internship program had positive and enjoyable experiences for the students, some of them faced challenges such as a lack of trust from some nurses and patients or the feeling of being abused. These unpleasant experiences enabled students to learn and use coping strategies.

"Trying to prove their abilities to the staff," "trying to gain the patient's trust," and "helping the staff to do things beyond their scientific and practical ability" were among the coping approaches used by the students.

Students in this study tried to show their abilities to the staff by being cautious in their actions, doing various tasks in the wards, and working alongside the staff to complete the tasks. One of the participants said:

I tried to do everything that they said. Even if it was hard to get an IV line or the patient's condition was poor. I wanted the staff to believe in me. (P3)

The first time we said we were students, the patients did not accept us. But as we approached them, took care of them, and guided them, they gradually started trusting us. (P8)

The theme of "avoiding tension in the clinical setting" consisted of "trying to persuade the staff not to ask them to do irrelevant work" and "coping with unreasonable staff expectations." The following were the participants' remarks on their experiences in this respect:

For example, I talked to them when they asked me to do the messenger's work. I said I am a nursing student, not a messenger. (P9)

Sometimes, when the nurses told us to do something and it was not our duty, we did not say or do it. (P11)

Discussion

The aim of this study was to understand the nursing students' experience of the internship program. One of the main themes extracted from the data was professional identity development, which was achieved by promoting the cognition of profession, acceptance among colleagues as a nurse, and acceptance of professional roles.

The findings of the study by Alharbi *et al*.[28] showed that undergraduate nursing students developed their professional identity by recognizing the nursing profession and sharing their views with clinical nurses. Pundits believe that promoting the cognition of the nursing profession has an important role in creating the professional identity of nursing students.[29] The professional identity development is one of the most basic needs of the nursing community, which has many positive consequences for the nursing profession.

"Acceptance among colleagues" was another subtheme. In the study by Limberg *et al*.,[30] having the opportunity to be properly recognized and accepted by the student was expressed as a factor in the development of professional identity in students. Moreover, performing various activities, such as training and supervision, affected their professional identity development, which was similar to the findings of the present study. According to the study of Ferguson *et al*.[31] and Mather *et al*.,[32] the support and acceptance of nursing students by nurses has a very important role in shaping their professional identity. It seems that the clinical nurses recognize the internship students as their own and interact with them like fellow nurses.

Participating in the internship program helped the students to accept their professional roles. In the study by Parvan *et al*.,[33] one of the experiences of nursing students was interference in roles. Other studies have emphasized the effect of the students' experience of accepting professional-related tasks on the development of their professional identity.[34,35] The presence of nursing students in wards provides opportunity for the formation of professional views and creates a sense of professional belonging.

Professional identity exists in the framework of social and cultural roles and is formed through interaction with individuals and elements related to a profession in a particular social culture. Improvement of the students' professional identity occurs as a result of the cognition of professional practices, interaction with professionals, and engagement in professional tasks.[36] In order to become nurses, nursing students need to develop professional skills, especially professional socialization, and consequently improve their professional identity. Acquiring a professional identity is the most fundamental aspect of becoming a professional[37] and enables students to engage in professional activities[38] and learn the skills, values, and behaviors necessary to play their professional role.[39,40]

Experts believe that promoting the professional identity of nursing students should start from the university's nursing education plans.[41] Therefore, it seems that the internship program has been able to help cultivate the professional identity of nursing students by improving students' cognition of their profession, acceptance among nurses, and acceptance of professional roles.

The second theme of this study was "moving toward professional self-efficacy." The internship program had led nursing students to professional self-efficacy. In the study by Parvan *et al*.,[33] one of the experiences of nursing students was "self-efficacy development." The study by George *et al*.[42] revealed that the nursing education program increased students' self-efficacy. Self-efficacy in educational environments is of particular importance. According to Bandura,[43] the main purpose of such environments is the proper growth and formation of self-efficacy related to the field of education. This theme resulted from the experiences of self-awareness of weaknesses in patient care, self-reliance, and advancement of clinical skills.

Participating in the internship program made students aware of their weaknesses in providing patient care independently. In the study by Edmonds,[44] one of the experiences of nursing students was self-recognition. In the study conducted by Peyrovi *et al*.,[45] the experience of nursing students in the clinical environment was "oriented to one's knowledge requirements," which was created by comparing previous knowledge with the knowledge required for clinical practice. In another study, recognizing the need for cognitive knowledge and practical skills was the experience of nursing students.[46] Chesser-Smyth[47] reported self-awareness as the experience of nursing students. Various studies have emphasized the importance of identifying the educational needs of students and their skill level as essential elements for promoting professional self-efficacy.[48]

Another experience of the participants was "moving toward professional self-efficacy." Rapoza *et al*.[49] reported that "feeling unsupported" and focusing on their abilities were the experiences of nursing students. Peyrovi *et al*.[45] found that nursing students had the experience of "finding oneself in the clinical milieu." In Iran, the clerkship program has a full-time coach, and the internship program seeks independence from the coach.

Regarding the subtheme of "advancing clinical skills," the absence of a coach and self-reliance has led to skill improvement. The findings of the study by Edmonds[44] showed that "mastering" patient care is one of the experiences expressed by nursing students.

In Ravanipour *et al*.'s[50] study, one of the experiences of nursing students was "increasing skill and accuracy in work." McCalla-Graham and De Gagne[51] stated that nursing students had experienced skill development. Student education is important in promoting student self-efficacy. Promoting professional self-efficacy starts with educating and preparing students for their future work.[52] The main factor in achieving professional self-efficacy in students is to improve the capabilities required for performing professional tasks in the future[53] in order to be able to ensure the necessary safety in patient care.[54]

Some students encountered negative events and unpleasant feelings such as abuse or exploitation and mistrust of the staff and patients. They learned and applied different coping approaches for such events. The theme of "developing coping strategies for workplace adversities" had two components, "adopting effective coping strategies" and "avoiding tension in the clinical setting."

Participants used several coping approaches depending on the situation, from problem-solving approaches to problem-focused mechanisms, including seeking instructor support, accountability, reminding and explaining their job descriptions to the head nurse, and emotion-focused mechanisms, such as continence, acceptance, and confrontation. In the study by Zead *et al*.,[55] the theme of "student coping" was one of the extracted themes and students used problem-oriented and emotional approaches and sought social support.

Some participants used the "avoiding tension in the clinical setting" strategy in the face of adversity, for example, by accepting the circumstances and engaging in extracurricular activities. In the study by Edmonds,[44] nursing students attempted to get along with staff as well as patients and their companions in clinical settings.

Clinical learning environment is a complex social entity.[56] Complex interpersonal relationships and challenges in the clinical environment are among the factors that make nursing students more anxious than those in other medical professions[57] and necessitate the use of suitable coping approaches.[58] Therefore, learning coping mechanisms and applying them correctly is crucial.[59]

Limitation and recommendation
The strength of this study was the selection of participants from different universities in Iran. One of the limitations of this study was related to the COVID-19 pandemic, which was tried to be solved by fully observing the health regulations during interviews. There was no other specific limitation, except the limitations related to qualitative studies, like generalizability.

Conclusions

According to the findings of this study, students had positive experiences in this program, including professional identity development and moving toward professional self-efficacy, in order to improve their professional capabilities and become ready to be in the real work environment and finally for the transition from a student to a professional nurse. However, there were some negative experiences as well and the students used different approaches to handle them, thus learning how to deal with adversity in the workplace. This study provided a deep insight into the experiences of nursing students in the internship program. The findings of this study show that students gain various experiences in the internship program and identifying these experiences is critical for this program's efficacy.

Nursing researchers can focus on "reviewing and developing a tool to measure the quality of the implementation of the internship program," "explaining the lived experience of working nurses and managers from the internship program," and "explaining the process of students' adaptation to the internship program."

Declaration of student consent

The authors certify that they have obtained all appropriate student consent forms. In the form, the student (s) has/have given his/her/their consent for his/her/their information to be reported in the journal. The student understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

Conflicts of interest

There are no conflicts of interest.

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