



ISSN 2278 – 0211 (Online)

## Assessment of Perception of Diploma Nursing Students on Clinical Performance: Case of Nursing Training Institutions in Tanzania

**Richard Mabagara Kajogo**

Regional Nursing Officer, Department of Clinical Nursing,  
Shinyanga Regional Referral Hospital, Tanzania

**Dr. Stephen M Kibusi**

Dean, Department of Public Health, School of Nursing, Dodoma University, Tanzania

**Walter C Millanzi**

Assistant Lecturer, Department of Public Health, Dodoma University, Tanzania

**Dr. Gabriel J Mchonde**

Lecturer, Department of Internal Medicine, Dodoma University, Tanzania

**Dr. Cecilia Kapalata**

Lecturer, Department of Public Health, Dodoma University, Tanzania

### **Abstract:**

*Background: Clinical performance refers to the extent to which a student nurse delivers clinical services that are appropriately to each patient's condition. Its impact is not limited to grades but also to the extent a student nurse delivers quality and cost-effective clinical services that are appropriately to each patient's condition.*

*Objective: Current study intended to assess perception of diploma nursing students on clinical performance in Lake and central zone, Tanzania.*

*Method: Analytical cross-sectional study with quantitative research approach. The study involved 488 respondents who were systematically randomly selected. Respondents were selected from public and private Nursing training institutions in Tanzania which were randomly selected by stratified sampling method. Self-administered structured questionnaires were used as the main primary data collection tool while documentary review was for secondary data. Statistical package for service solution (SPSS v.23) was used for data entry, cleaning, processing and analysis.*

*Results: Study revealed that 59.9% of the respondents had appositive perception towards clinical performance grades and 71.3% respondents had a high clinical performance. The study also showed a statistically significant association of sex (AOR: 6.7, 95%CI: 1.6-4.7, p=0.008) and campus (AOR: 43.82, 95%CI: 34.21-54.4, p<0.001) with perception on clinical performance.*

*Conclusion: findings of the currents study are evident that despite of the unsatisfactory clinical learning environment, inadequate qualified clinical staffs and inadequate medical supplies and equipment, majority of nurse students had positive perception on clinical performance which concurred with good clinical performance. Some socio-demographic characteristics were observed to influence the levels of perception and clinical performance including accommodation status, sex, gender and area of residence.*

**Keywords:** Competence, nurse, performance, clinical, perception, nursing, education

### **1. Background Information**

Nursing education internationally and nationally has gone through many changes from what it was to what it is today. Nurses in clinical learning in health sectors comprise 60% of health professional (Foley & Foley, 2016). Since then, remarkable changes have taken place in nursing education. These various changes have been done to meet the need of the individuals, families, communities, other stockholder's and customers who are to be served within the country as well as outside the country (Bowie, 2010).

To achieve this mission, healthcare providers need to be well prepared especially on the aspect of clinical competencies which will enable them to clinically practice well. Nursing and Midwifery council still struggling to meet the need of customer (Okanga, Ogur, & Arudo, 2017). Determining student perception in clinical area is very mandatory for the improvement of the competence of Diploma Nursing students (Karabulut, 2015).

Clinical performance refers to the extent to which a student nurse delivers clinical services that are appropriately to each patient's condition; provide them safely, completely and in appropriate time frame; and achieves desired outcomes in the term of aspects of patient health and patient satisfaction that can be affected by clinical services (Msiska, Smith, Fawcett, & Munkhondya, 2015).

The importance of clinical performance in nursing education is undeniable in personal, professional and clinical skills development (Adv, 2015). Good clinical performance among nurse students has been proved to improve clinical competencies which enables them to deliver very acceptable, timely, appropriate, quality and cost-effective care to individuals.

Global trend of clinical competencies among nurse students has been in doubt as their clinical performances are at unsatisfactory state (Cheng, Tsai, Chang, & Liou, 2014; Nehrir, Vanaki, Mokhtari Nouri, Khademolhosseini, & Ebadi, 2016; Pahkala, Lukkarinen, & Kärriäinen, 2013). This is evident following some public complaints thrown against nursing practices which denotes there might be missing in preparing them.

Various studies (Cook & Polgar, 2015; Hunt, McGee, Gutteridge, & Hughes, 2012; Melnyk, Fineout-Overholt, Gallagher-Ford, & Kaplan, 2012) have studied the progressive gap between theory and practice in nursing and came up with a number of factors contributing to it including lack of qualified faculty, clinical mentors, instructors or preceptors (who are even not able to motivate, support and mentor nurse students to clinically learn effectively), inadequate medical supplies and equipment and limited time to practices.

Despite little has been demonstrated on the influence of individuals' socio-demographic traits on clinical performance but the available scholarly works reveals some of them including the psychological factors like perception contribute much on the extent nurse students practice in clinical settings (Natarajan, Mullira, & van der Colff, 2017). Previous study findings (Ibrahim, 2014; Jones, 2014) indicate that perception has posed a lot of confusion to the student nurses on connecting what they learnt in the classroom as they found to be very different from what is obtainable in the clinical areas. As a global strategic plan, clinical instructors training manuals are being produced, adapted and practiced in some countries as a means to have adequate skilled and qualified educators and clinical instructors. The solution has been proved to work in developed with few sub-Saharan African countries including Tanzania. Clinical settings are set to favor clinical teaching and learning among nurse students with adequate medical supplies and technological equipment and provision of enough time for them to practices.

Sub-Saharan African countries are also suffering from the burden of unsatisfactory clinical performance among nurse students. The trend has been reported to be attributed by inadequate clinical competencies exhibited by nurses as an indicator that there could be a problem in how they are being taught, how the clinical content is delivered, assessed or the ways nurse students perceive clinical practices. This is in regard with the presence of adequate and qualified clinical educators, clinical instructors' support and coaching to them and the availability medical supplies and technological equipment (Müller, 2010).

Findings from previous literatures (Bhattacharyya et al., 2010; Hatamleh & Sabeeb, 2015; Koy, 2015) have noted the above-mentioned factors to be among the contributing factors to poor clinical competencies and thus performance among nurse students particularly in developing countries. The trend is to an extent nurse student feel a progressive theory-practice gap which lead them fail to integrate well what are learnt in classroom and that of clinical settings. The gap is currently addressed by eliminating the perceived lack of experience and knowledgeable teachers to supervise and to teach the students in the clinical areas, increase the number of clinical procedures to be performed by nurse students supported and supervised by qualified clinical educators.

The strategies are observed to some extent work in some developing countries as few technological procedures which need technological experts, manuals and equipment are not practiced by students. Basing on this fact, nurse students still face a challenge of integrating what is learnt in the classroom into the clinical settings and therefore make them demotivated and develop negative attitude and perception towards clinical practices. This in turn lead them to have inadequate clinical competencies and eventually unsatisfactory clinical performance (Karabulut, 2015).

Tanzania as one among the developing country is also facing the challenge of unsatisfactory clinical performances resulted from inadequate clinical competencies among nurse students (TNMC, 2014). Available locally literatures indicate that the level of readiness and intrinsic motivation of nurse students to practice full in clinical settings is low due what is noted to be the ways they have been perceived, supported, mentored and coached for better clinical performances.

Nurse students still exhibit clinical traits that indicate they may either not positively motivated to practice in clinical settings or they get limited clinical support or what they have learnt in the classroom do not match with what is found in the clinical settings (ANA, 2010; UBC, 2015). Moreover, previous reported findings, reveals the perception that graduate nurses are under prepared for clinical practice which was influenced by a multiplicity of perceptions among nurse students themselves (Woods et al., 2015).

Among of the underlying perceptions which are developed early and up to date within the Diploma Nursing students that clinical teaching and learning are different disciplines (Okanga et al., 2017). Detection of clinical perception among nursing students is an important part due to the fact that perceptions influence the quality and quantity of clinical education in solving the patient's related problems (Prozesky R, 2015).

## 2. Methods

### 2.1. Study Area

The current study was conducted in Lake and Central zone particularly in Mwanza, Geita and Dodoma Region. All zone found in Tanzania were provided equal chance of being selected by using probability sampling techniques.

## 2.2. Study Design

This study employed an analytical cross-sectional design with quantitative research approach. This enabled to explore what was happening in nurse student's psychological stratum on clinical practices at a single point of time.

## 2.3. Study Population

Diploma nursing students this group was selected because it was one among the largest group produced in nursing profession and work in various health centres all over the country. Exploring their psychological perspectives on their clinical learning and practices is very important in order to address them effectively and timely to safeguard the health of people.

## 2.4. Inclusion Criteria

Second year diploma nursing students who gave informed consent and were available at the time of study. It was this group because they were already exposed to clinical settings for their clinical practices thus, they could give their views accurately basing to their experiences on the availability of medical supplies and equipment, clinical settings, teaching, coaching, mentoring and support.

## 2.5. Sampling Procedure

Simple random sampling by lottery method was employed to select two out of seven Tanzanian zones, regions and districts. Stratified sampling method was used to select Nursing training institutions because they had heterogeneous characteristics (government and faith-based -owned). Purposive sampling method was used select classes because the study intention was to assess second year diploma nursing students who had started clinical practices and were available during the study duration. The minimum sample of the respondents were selected by using systematic sampling method whereby  $k^{\text{th}}$  formula was employed in which the first respondent was randomly chosen followed by every tenth student till the number was reached according the calculated proportions per each training institution.

## 2.6. Sample Size

The minimum sample size of the current study was 488 of respondents

## 2.7. Data Collection Techniques

The researcher assistants were trained for one day before the study on research methods, ethical consideration and data collection tools. The respondents were explained about the study (its objectives, disadvantages and advantages as well as implications) before the commencement of the study.

## 2.8. Data Collection Tool

Instruments used for data collection were structured self-administered Questionnaires on assessing perception of diploma nursing students on clinical performance and documentary review to get previous clinical examination grades. Questionnaires consisted two parts, part one consisted of demographic characteristics of the respondents with 8 items, part two consisted 6 questions used for testing perception and make a total of 14 items which was answered.

## 2.9. Validity and Reliability

the tool was adopted and modified from Uchechukwu(2014) Moreover, the tools were also shared with experts, supervisors for corrections, inputs and deletion of destructive items. These were addressed accordingly to ensure clarity, adequacy and Comprehensiveness of the tools.

## 2.10. Reliability of Data

The current study employed a Pilot study among diploma nursing student was done in a selected sample of diploma nursing student nurses from different training institution other than the selected ones before commencing the actual data collection process. Questionnaires and documentary review were used to nurse students who had regular and acceptable attendance of classroom and clinical practice experience. Pre-test also aimed to test clarity and feasibility of items to subjects and to test needed time for filling the tools. Subjects who were involved in the pilot study were not included in the study sample.

## 2.11. Dependent Variable

The dependent variable in this study referred to clinical performance grades. These were obtained through documentary review of one clinical semester examination prior to the time of study. The grades ranged from 0 – 100% were included during the study.

## 2.12. Independent Variable

The independent variable in this study were student's perception on clinical performance. Nurse students' perspectives were assessed through developed questionnaires and schemes/categories were made for easy classification and understanding. A set of questions on perception were developed to get their responses.

### 2.13. Data Processing and Analysis

Data processing preceded the data analysis process by looking at the completeness and accuracy of the needed information from each subject's records. Cleaning and analysis were done by using the statistical package for service solution (SPSS version 23) computer software program. Descriptive analysis was done to analyse demographic characteristics of the respondents and the findings were presented in mean, median and mode, frequencies and proportions. To test for the extent to which variables associated with one another, binary and multivariate logistic regression was done with control of other factors. All these inferential analyses were done at 95% confidence interval (5 % significance level).

## 3. Result

### 3.1. Social Demographic Characteristics and Perception Level Among Diploma Nursing Students

Table 1 shows the distribution of demographic characteristics among diploma nursing students of eighty intuitions. In order to associate them with the outcome of interest under study. As it was revealed in table one, majority of the respondents were aged between 15-24 years of age (86.5%) followed by those aged between 25 – 35 years (13.5%). The distribution of respondents according to their gender, out of 488 respondents Female nurse students were found to be many (51.2%) as compared to males (48.8). Other participants' variables are indicated in Table 1 below.

Variable	Frequency	Percentage
	n	%
Age		
15-24 years	422	86.5
25-35 years	66	13.5
Sex		
Male	238	48.8
Female	250	51.2
Residence		
Urban	326	66.8
Rural	162	33.2
Accommodation status		
Off campus	170	34.8
On campus	318	65.2
Marital status		
Married	50	10.2
Single	438	89.8

Table 1: Social Demographic Characteristics of the Respondents (N = 488)

Source: Field Survey, 2018

### 3.2. Assessment of Perception of Diploma Nursing Students on Clinical Performance

The objective in this study was intended to assess the perception on clinical semester examination performance where the number of respondents were 488 who tested their perception towards clinical performance, where by the normal score were 3. The perception score was 15.44415, SD 8.08, mean score of perception (3.6+ 8.08) has higher than the perception scores 15.4415(95%; CI; 11.72-15.66, P<0.001 among 488,243 (41.1%) had low performance in clinical training compared to 244 (59.9%) who found to be in high perception as shown in figure 1 below

S/n	Item	Agree		Disagree		Total
		N	%	N	%	
1	Every student attended clinical experiences regularly as scheduled.	129	26.4	359	73.6	488(100%)
2	Every student attempted the clinical assignments/ texts given to them.	130	26.6	358	73.4	488(100%)
3	The students make use of the equipment in the school laboratory for clinical practice on their own.	132	27.0	356	73.0	488(100%)
4	Students do the following during clinical experiences: Self-assessment of their clinical performance.	130	26.6	358	73.4	488(100%)
5	Accepts corrections and ask their ward staff nurses questions during clinical experience.	131	26.8	357	73.2	488(100%)
6	Students use the nursing care procedures book during clinical experience a guide for practice.	129	26.4	359	73.6	488(100%)

Table 2: Item Used to Assess Perception of Diploma Nursing Students of Learning Environment (N = 488)

Source: Field Survey, 2018

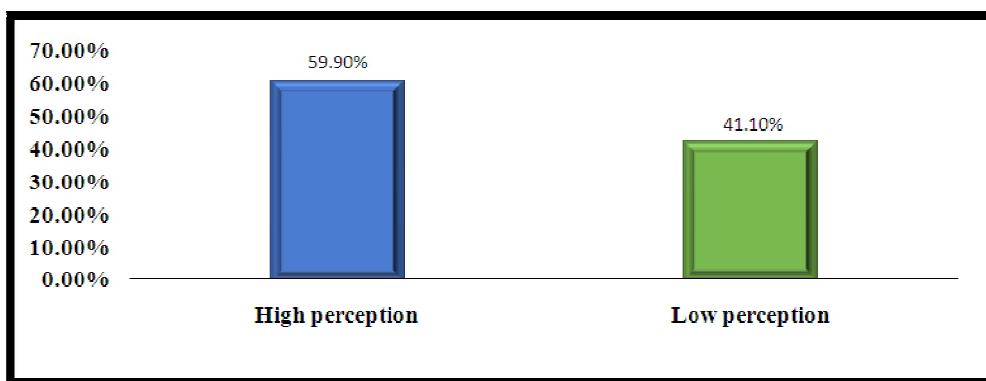


Figure 1: Perception Level of the Respondents on Clinical Performance (N=488)  
Source:Field Survey, 2018

3.3. Determination of the Clinical Performance Level of Diploma Nursing Students

The objective in this study was intended to determine the performance level of diploma nursing students on clinical final semester performance. The performance level mean score was 56.9721, SD 12.52247. Among 488 respondents, 139 (28.7%) had low performance in clinical training compared to 345 (71.3%) who found to be in higher performance levels shown in figure 3.2 below

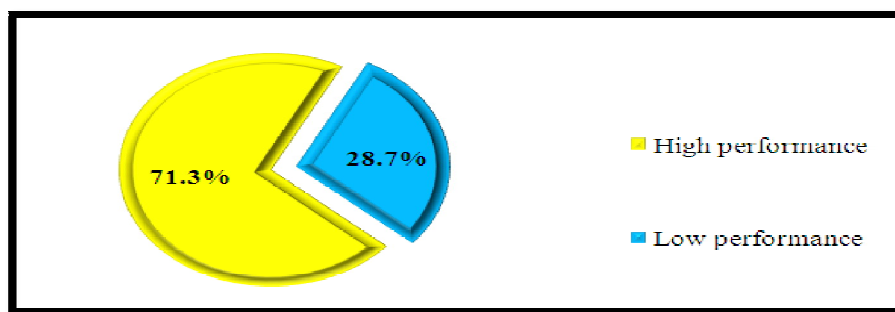


Figure 2: Clinical Performance Level of Diploma Nursing Students (N = 488)  
Source: Field Survey, 2018

3.4. Association between Social Demographic Factors with Clinical Performance

A chi-square was performed to determine the association between demographic characteristics and clinical performance Table 2 above, findings indicate that all demographic characteristics were showed to be associated with perception level as showed in table 3 below

Variable	Low Level Perception	High Level Perception	Chi- Square	P-Value
	N (%)	N (%)		
Age				
15-24 years	118 (71.1)	304 (94.4)	50.956	0.001
25-35 years	48 (28.9)	18 (5.6)		
Sex				
Male	122 (73.5)	116 (36.0)	61.548	0.001
Female	44 (26.5)	206 (64.0)		
Residence				
Urban	42 (25.3)	284 (88.2)	195.397	0.001
Rural	124 (74.7)	38 (11.8)		
Campus				
Off campus	127 (76.5)	43 (13.4)	192.434	0.001
On campus	39 (23.5)	279 (86.6)		
Marital status				
Married	42 (25.3)	8 (2.5)	62.008	0.001
Single	124 (74.7)	314 (97.5)		

Table 3: Association between Social Demographic Factors with Clinical Performance (N = 488)  
Source: Field Survey, 2018

### 3.5. Binary and Multivariate Logistic Regression on Demographic Characteristic Factors Influencing Clinical Performance

Table 4 shows unadjusted (OR) and adjusted odds ratios (AOR) for perception of diploma nursing students in relation to clinical performance. Most of the diploma nursing perception in relation to clinical performance were significant predictors for clinical performance. The uni-variate analyses, were done with the exception of clinical performance Sex ( $p=0.001$ ), Campus ( $p=0.001$ ) Residence ( $p=0.001$ ), and marital status ( $p=0.001$ ). Multivariate analysis was conducted using by all social demographic characteristics shown in Table 4.3 with the exception of age, resident and marital status as were not significantly associated with clinical performance in uni-variate analysis.

After adjusting for other variables, Age ( $p=0.869$ ) were no longer significantly associated with clinical performance. The results of the fitted model revealed that, the odds of Female nursing students tended to achieve high performance was almost 6.7 times than Male students (AOR=6.737, 95% CI= [1.630, 4.752]). This means that Female nursing students had the possibility of high performance in clinical. Moreover, the multivariate analysis showed that those who live in campus were 43.8 more to had greater high performance as compared to those of off campus (AOR=43.8, 95% CI= [34.2, 54.4]).

Variable	P value	OR	95% CI		AOR	95%CI		P value
			Low	Upp.		Low	Upp.	
Age 15-25 yrs. (Ref) 25-35 yrs.	0.001	0.113	0.061	0.208	0.866	0.158	0.02	0.869
Sex Female (ref) Male	0.001	10.120	6.387	16.034	6.737	1.630	4.752	0.008
Campus In campus (ref) Off campus	0.001	40.53	171.426	959.150	4.825	3.21	54.4	0.001
Residence Urban (Ref) Rural	0.001	0.010	0.005	0.019	0.008	0.01	0.066	0.001

Table 4: Binary Logistic Regression on Demographic Characteristic Factors Influencing Clinical Performance (N =488)  
Source: Field Survey, 2018

## 4. Discussion

### 4.1. Perception of Diploma Nursing Students in Relation to Clinical Performance

Studying perception among nurse students was the area of interest in the current study due to its long-term impact on nurse students' professionalism, career path and academic advancement. As revealed in chapter four above, majority of diploma nurse students perceived positively the trend of clinical practices that could enable them to perform well and thus have adequate clinical competencies. Their positive perception did not exclude the few who had negative perception as it impressed that, there was some clinical discrepancies which needed to be solved.

Among the contributing factors to the levels of perception on clinical performance among diploma nurse students included place of domicile, gender, age of the students and accommodation status. This gives a picture that some of students' socio-demographic characteristics had direct determination on the level's perception among them. A well accommodated training institution could promote perception level among diploma nurse students to perform well in clinical settings.

Positive perception of diploma nurse students in the current study was strongly associated with the clinical performance. It was revealed that majority of nurse students who had positive perception, had also attained high clinical performance. Perception mostly on Demographic characteristics were seen to influence the student either to achieve high or Low performance basing on their High or Low perception.

Findings of the current study were not new as some of previous studies observed different findings contrary to this study findings. Buhat-Mendoza et al (2014) whom noted that clinical performance in the collage setting is not positively related to perception of the students to enhance the clinical performance of Diploma Nursing students in the same way that perception reinforces performance.

However, Perception does not always reflect the competence of students in clinical setting. The study revealed that students lacked willingness to learn in the clinical area in order to take place and improving examination performance. The mismatch occurred due to the fact that the current study had a minimum sample which included only second year diploma nurse students and it studied few variables as compared to the previous studies.

Despite that, similar findings were observed in the study which was done in Malawi where students' interest and motivation were found to be paramount for clinical learning to take place and achieve to great performance examinations. Students were aware of their responsibility and perceived their clinical performance as an indicator of what they were practicing before clinical examination. students enthusiasm is essential for the facilitation of clinical learning that in turn influence clinical competencies and ultimately clinical performance(Warne et al., 2010).

Behaviors such as staying away from campus and very long distance from the clinical setting showed to have impact on clinical practices and thus competencies which lead into clinical performance. This has been discussed to lead nurse students into losing instant opportunities for clinical learning therefore hindering effective clinical competences and therefore clinical performance (Buhat-Mendoza et al., 2014)

It was evident that even though staff were willing to help nurse students once they are in clinical settings, some students were absent from the clinical area. In the face of the current study's findings and other previous literatures, students need to be in the clinical area in order to accomplish what is required of them. In such an environment where the clinical staff were not eager to teach, it takes students own initiative to learn in the clinical area despite the challenges. Lack of motivation and negative perception for clinical learning among nurse students can negatively affect acquisition of professional competencies for them to adequately perform well in the delivery of quality and cost-effective health services to individuals.

#### *4.2. Clinical Performance of Diploma Nursing Students*

Clinical performance among diploma nurse students is the key determinant of the type, quality and cost-effective care to patients/client. Findings of the current study noted higher clinical performance levels among diploma nurse students. The current study showed that students who perceived negatively towards their clinical performance had low clinical performance. This was evident due to the fact that minority of them who had negative perception had low clinical performance.

Results from this study indicated that perception has a greater influence for some collages while for others it has no association with clinical performance. When students are allocated to the clinical area for a shorter duration the performance may become low in clinical due to different in perception. As supported by Ahmed et al (2017) nursing student perception is essential therefore clinical performance is positively related and depending on it. They recommended that at least 50% of the total hours from nursing studies have to be completed with clinical mentor experiences, and students must be supervised during these practice sessions.

Moreover, they asserted that clinical placement is an interactive course work involving hands-on, direct care or service experience and evaluation of the student's skills. Therefore, consistent clinical support, mentoring and coaching could influence perception of diploma nurse students on clinical performance and thus clinical competencies (Msiska et al., 2015).

It is very important to consider clinical placement which should allow student nurses to combine intellectual, practical and communication skills, and develop competencies in the application of knowledge, skills, attitudes and values inherent in the nursing profession, however, not all practice settings are conducive to provide student nurses with positive clinical learning environments.

#### *4.3. Association between Theory Performances with Learning Environment among Nursing Student*

As it has been observed in chapter four above, the Diploma Nursing students who had high perception were more likely to attain high performance in their clinical examination compared to those who had Low perception. The status was attributed by consistent clinical supervision, well accommodation provided to students, their gender and age. A well accommodated training institution could favor positive perception on clinical performance and thus good provision of quality and cost-effective health services to individuals.

Furthermore, resident and marital status of nurse students had no any influence to clinical performance. Findings indicate that there was statistically evidence that student nursing who their perception is high performed well in their clinical settings. These findings matched with the study done by Karabulut (2015) on factors that influence academic success are different for every student; however, one of the major predictors for academic achievement for both male and female students is academic motivation.

Also defined Academic motivation as the production of the energy that is required for academic studies furthermore as an important key in the training field. Intelligence is not the only predictor of academic achievement and retention for Diploma Nursing students. To reach the specific goal in nursing education and to achieve of qualified education, academic motivation is important.

In the face of these findings, a student who is not high motivation is not ready for clinical learning. Motivation according to Karabulut (2015) were included classroom school environment which would help nursing student to perform better in theory as well clinical area. From the current study's findings and other literatures review on the topic of interest, it could be concluded that levels of perception and some socio-demographic characteristics of nurse students are very crucial on clinical performances determined by clinical competencies.

## **5. Conclusion**

Clinical Performance associated perception found statistical significantly associated with High or Low Performance in nursing studies, this study has been discussed in many studies before as potential risk of Low perception may also lead to low performance. Majority of the associated Perception issues associated with performance identified in this study are preventable. A concrete and coordinated efforts, are required to ensure an improvement in quality of clinical performance.

## 6. Recommendation

Researcher recommends that Tanzania Nursing and Midwifery Council (TNMC) should insist the teachers in nursing institutions to make effort on reducing the Low perception or negativity associated with clinical in order to reduce low Performance.

## 7. Acknowledgment

First and foremost, it is my pleasure to thank God who helped and protected me with good health to complete this research proposal or project. I wish to express my sincere appreciation to my supervisors, Dr. Stephen Kibusi, D Mchonde who supervisions gave me constructive comments, guidance, guidelines and encouragements, which helped the completion of this report.

Their maximum degree of help in this research proposal or project will never be forgotten in my life. My appreciations are also extended to Nursing Education Lecturer Dr Emmanuel Ndulila, and all staff and lecturers of Dodoma University. They provided me with useful information about theoretical cumulative grades and clinical performance /grading.

I also, wish to thank the University of Dodoma, College of Healthy and Aliened Sciences in particular for facilitating the successfulness completion of this academic research proposal. In a special way, thanks are also will be given to the Kahama Town Council for their permission to pursue this higher degree of MSc. NE (Masters of Science in Nursing Education). Furthermore, I am greatly indebted to my beloved Wife and our beloved kids for their patience, encouragement and enduring loneliness during my absence in pursuit of this level. I eventually, appreciate and acknowledge the friendship which will be provided by my fellow classmates MSc.NE (Nursing) students of 2016/2018 for their encouragements, assistance and cooperation during the preparation of this research proposal.

I humbly wish to dedicate this work to my lovely Wife Lydia Mabagara, for commitment and love which she has shown me and which have been a major driving force behind my education success. Finally, this work is dedicated to my lovely children Elia Mabagara, Happiness Mabagara and my young child Grace Mabagara and Boniphace Kagoma whose prayers and love lifted me up and relentlessly pushed me towards working hard and hence completing this dissertation

## 8. References

- i. Agu, G. U. (2014). Factors affecting clinical training of nursing students in selected nursing educational institutions in enugu and ebonyi states of nigeria. Ffecting, Factors Training, Clinical NursinAg, O F In, Students Nursing, Selected Enugu, Institutions I N States, Ebonyi.
- ii. Ahmed, H., Sebaee, A., Mahrous, E., Aziz, A., & Mohamed, N. T. (2017). Relationship between Nursing Students ' Clinical Placement Satisfaction , Academic Self-Efficacy and Achievement, 6(2), 101–112. <https://doi.org/10.9790/1959-060203101112>
- iii. ANA. (2010). Nursing: Scope and Standards of Practice. (M. (indexing). Steve A. Jent, Denton, TX (copyediting); Grammarians, Inc., Washington, DC: Kelly Saxton (proofreading); Eric Wurzbacher, Silver Spring & ©, Eds.) (2nd ed.). Nursesbooks.org. Retrieved from <http://www.nursingworld.org>
- iv. Bhattacharyya, O., Khor, S., McGahan, A., Dunne, D., Daar, A. S., & Singer, P. A. (2010). Innovative health service delivery models in low and middle income countries - what can we learn from the private sector? Health Research Policy and Systems / BioMed Central, 8(Lmic), 24. <https://doi.org/10.1186/1478-4505-8-24>
- v. Bowie, B. H. (2010). Clinical Performance Expectations, 35(2), 66–68.
- vi. Buhat-Mendoza, D. G., Mendoza, J. N. B., Tiana, C. T., & Fabella, E. L. (2014). Correlation of the academic and clinical performance of Libyan nursing students. Journal of Nursing Education and Practice, 4(11), 82–90. <https://doi.org/10.5430/jnep.v4n11p82>
- vii. Cheng, C., Tsai, H., Chang, C., & Liou, S. (2014). New Graduate Nurses' Clinical Competence, Clinical Stress, and Intention to Leave: A Longitudinal Study in Taiwan. The Scientific World Journal, 2014, 748389. <https://doi.org/10.1155/2014/748389>
- viii. Cook, A. M., & Polgar, J. M. (2015). Assistive Technology: Principles & Practices, 1–16, 41–48.
- ix. Foley, D. M., & Foley, D. M. (2016). Predicting Student Success : Factors Influencing NCLEX-RN ® Rates in an Urban University's Pre- Licensure Programs.
- x. Hatamleh, W., & Sabeeb, Z. A. (2015). Nursing Students Perceptions of an Objectives Structured Clinical Examination, 2(2), 52–56.
- xi. Hunt, L. A., McGee, P., Gutteridge, R., & Hughes, M. (2012). Assessment of student nurses in practice: A comparison of theoretical and practical assessment results in England. Nurse Education Today, 32(4), 351–355. <https://doi.org/10.1016/j.nedt.2011.05.010>
- xii. Ibrahim, L. K. (2014). Nursing Students ' Perception towards the Effectiveness of OSCE versus Traditional Method ( Case Study ) of Clinical Assessment, (August).
- xiii. Jones, B. E. (2014). Tanzanian Midwives' Perceptions of Their Professional Role, (December).
- xiv. Karabulut, N. (2015). ScienceDirect The relationship of clinical learning environment to nursing students ' academic motivation, 1(25100), 1–7. <https://doi.org/10.1016/j.kontakt.2015.01.003>
- xv. Koy, V. (2015). Perceptions of nursing students on effective clinical preceptors in Phnom Penh National Hospitals , Cambodia, 3(7), 1605–1610.
- xvi. Melnyk, B. M., Fineout-Overholt, E., Gallagher-Ford, L., & Kaplan, L. (2012). The state of evidence-based practice in US nurses: critical implications for nurse leaders and educators. The Journal of Nursing Administration, 42(9), 410–417. <https://doi.org/10.1097/NNA.0b013e3182664e0a>



- xvii. Msiska, G., Smith, P., Fawcett, T., & Munkhondya, T. M. (2015). Where Is the Grade Coming from ? Problems and Challenges in Evaluating the Clinical Performance of Nursing Students, (May), 470–481.
- xxviii. Müller, A. (2010). Reasons for students' poor clinical competencies in the Primary Health Care : Clinical nursing , diagnosis treatment and care programme, 15(1), 1–6. <https://doi.org/10.4102/hsag.v15i1.525>
- xix. Natarajan, J., Muliira, J. K., & van der Colff, J. (2017). Incidence and perception of nursing students' academic incivility in Oman. *BMC Nursing*, 16(1), 1–9. <https://doi.org/10.1186/s12912-017-0213-7>
- xx. Nehrir, B., Vanaki, Z., Mokhtari Nouri, J., Khademolhosseini, S. M., & Ebadi, A. (2016). Competency in Nursing Students: A Systematic Review. *International Journal of Travel Medicine and Global Health*, 4(1), 3–11. <https://doi.org/10.20286/ijtmgh-04013>
- xxi. Okanga, A. A., Ogur, J. O., & Arudo, J. (2017). Institutional Characteristics Influencing Bachelor of Science Nursing Student Performance in the Nursing Council of Kenya Licensure Examinations in Kenya, 4(1), 28–36. <https://doi.org/10.20448/journal.509.2017.41.28.36>
- xxii. Pahkala, T., Lukkarinen, H., & Kärriäinen, M. (2013). Clinical competence of nursing students. *Hoitotiede*, 25(1), 12–23 12p. Retrieved from <http://search.ebscohost.com/login.aspx?direct=true&db=ccm&AN=107991633&site=ehoslive%5Cnhttp://content.ebscohost.com/ContentServer.asp?T=P&P=AN&K=107991633&S=R&D=ccm&EbscoContent=dGJyMNLr40SepY4y9fwOLCmr06ep69SrQy4SrSWxWXS&ContentCustomer=dGJyMPGntUmxq>
- xxiii. Prozesky R. (2015). teaching.
- xxiv. TNMC. (2014). Scope of Practice for Nurses and Midwives in Tanzania. Retrieved from <http://www.tnmc.go.tz>
- xxv. UBC. (2015). Scope of Practice : Psychomotor Skills for BSN Students, (August).
- xxvi. Warne, T., Johansson, U. B., Papastavrou, E., Tichelaar, E., Tomietto, M., den Bossche, K. Van, ... Saarikoski, M. (2010). An exploration of the clinical learning experience of nursing students in nine European countries. *Nurse Education Today*, 30(8), 809–815. <https://doi.org/10.1016/j.nedt.2010.03.003>
- xxvii. Woods, C., West, C., Mills, J., Park, T., Southern, J., & Usher, K. (2015). Undergraduate student nurses' self-reported preparedness for practice. *Collegian*, 22(4), 359–368. <https://doi.org/10.1016/j.colegn.2014.05.003>