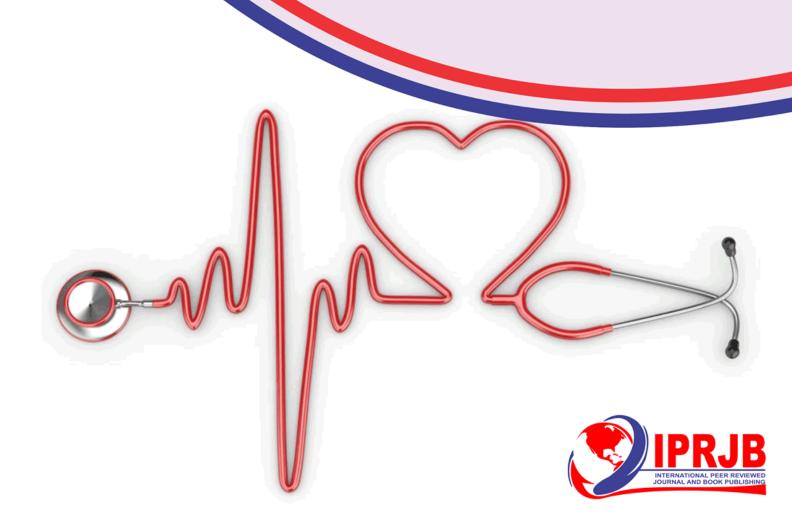# FACTORS THAT INFLUENCE PSYCHIATRIC CLINICAL LEARNING EXPERIENCE FOR DIPLOMA NURSING STUDENTS IN WESTERN KENYA

Ms Janet Okwero Wesonga, Dr Mary Kipmerewo and Dr Damaris Ochanda

FACTORS THAT INFLUENCE PSYCHIATRIC CLINICAL LEARNING EXPERIENCE FOR DIPLOMA NURSING STUDENTS IN WESTERN KENYA

[1]Ms Janet Okwero Wesonga,

Post Graduate Student: School of Nursing, Midwifery and Paramedical Sciences

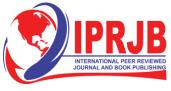Masinde Muliro University of Science and Technology

Corresponding Author's E-mail: wesongajanet@yahoo.com

[2]Dr Mary Kipmerewo

Senior Lecturer: School of Nursing, Midwifery and Paramedical Sciences

Masinde Muliro University of Science and Technology

[3]Dr Damaris Ochanda

Senior Lecturer: School of Nursing, Midwifery and Paramedical Sciences

Masinde Muliro University of Science and Technology

ABSTRACT

Purpose: This study investigated factors that influence psychiatric clinical learning for diploma nursing students in western Kenya.

Methodology: Cross-sectional research design was used with both qualitative and quantitative approaches in data collection. Study participants consisted of diploma nursing students on psychiatric clinical placement. Ten institutions that place their students at Kakamega County Referral Hospital for psychiatric experience were sampled. A total of 178 students, 10 lecturers and 3 psychiatric nurses participated in the study. Qualitative data was collected using interview guides; while quantitative data was collected using structured questionnaires. Descriptive statistics were used to analyse quantitative data while qualitative data was analysed thematically. The relationship between variables was set at a statistical significance of *p*-value < 0.05. Quantitative data was coded and entered the Statistical Package for Social Sciences version 25.0. Continuous variables were summarized using the Odds Ratio to measure the association between variables and presented in tables and figures to provide a pictorial description of the sample.

Findings: The results showed that most students were theoretically prepared to participate in psychiatric clinical learning (67.8% - **OR: 1.4**: 95% *p*=0.3). Also, it was supported by the students having a positive attitude (66.1% - **OR: 1.2**; *p*=0.5) and being motivated (64.5% - **OR: 1.5**; *p*=0.2) towards clinical placement. However, according to key informants' findings, most students were not well prepared in practical skills for clinical placement at the psychiatric unit, which was due to inadequate or lack of simulative laboratory for practice at the college level. Nursing students were well prepared theoretically to engage in psychiatric clinical learning placement at Kakamega County Referral Hospital. It also, established that positive attitude and motivation from the nursing students towards clinical placement at the psychiatric unit promoted clinical learning experience and performance thereafter. However, most of the psychiatric nursing students were not well prepared with practical skills to handle mentally-ill patients

Conclusion: This study revealed that Kenya Registered Community Health Nurse diploma students were well prepared theoretically to engage in psychiatric clinical learning placement*.*

Recommendation: Medical colleges in Kenya should emphasise skill-based training on human anatomy and behaviour through simulation. Trainers should be required to lead the nursing students through skill-based training. Medical college management should make available practical based resources to trainers and students to promote a skill-based learning approach.

Unique contribution to theory, practice and policy: Practical skills should be given priority at the college level when preparing students for clinical placement for a holistic clinical learning experience. Positive attitude and motivation from the nursing students towards clinical placement at the psychiatric unit promoted clinical learning experience and performance thereafter.

Keywords: *Psychiatry, Psychiatric nursing experience, Clinical learning, nursing students*

INTRODUCTION

Clinical learning experience for nursing students is an important component of nursing education program recognised globally (Rajeswaran, 2016). According to Webster (2016), a student should experience the real world of psychiatric nursing, and develop interpersonal relationships with other members of the health team through a clinical learning experience. People with mental illness are perceived to be dangerous, prone to violence, unpredictable, and to some degree responsible for their illness (Hoffner *et al.*, 2017). Therefore, students' attitudes towards people with mental illness reflect the ones held by the general public. These negative and stigmatizing attitudes seem to be more prevalent at the commencement of the psychiatric clinical learning experience with more positive attitudes seen at the end of the placement (Burns *et al.*, 2017; Fokuo *et al.*, 2017).

Studies show that nursing students are reluctant to attend clinical placement in mental health nursing due to the fear of working with people with mental illnesses. Negative attitudes acquired by these students are due to their perception of the experience being menial and boring (Edward *et al*., 2015; Lyons, 2016). Newstone (2014) states that students who are demotivated and frustrated during their placement in the psychiatric unit portray frustration. However, once in the program, a change of heart develops (Levett-Jones *et al.*,2018).

Jansen and Venter (2015) found that clinical learning experiences in psychiatric nursing were the bridges that prepared students for their professional role and provided opportunities for applying the knowledge, concepts and skills they had learned in the classroom. Therefore, psychiatric clinical learning experience provides real-life situations and allows the student to use cognitive, psychomotor and affective skills, which are vital for the development of the specific knowledge, problem-solving skills and values required in the nursing profession (Felton & Wright, 2017). Nicholson (2019) states that the preparations that students receive at the start of a psychiatric placement are a significant factor that can influence the overall experience. A student with relevant theoretical knowledge gone through the relevant simulation and prepared psychologically can adapt to the psychiatric clinical learning environment with ease.

In the clinical setting, students have optimal learning benefits if they are aware of the learning outcomes and understand the expectations regarding these outcomes (Turner & Harder, 2018). The students are expected to classify and formulate their expectations themselves. Achievements of the learning outcomes are highly depended upon students' efforts, curiosity and willingness to learn and attend new learning situations (Bastable, 2017; Levett-Jones *et al.*, 2018). In conclusion, Papastavrou *et al.* (2016) state that the students who are satisfied with the clinical placement are those who are well prepared and motivated.

Factors that impact the students' experience is an important first step in understanding what constitutes quality clinical placement in a mental illness setting (Levett-Jones *et al.,* 2018). Happell *et al*., (2018) pointed out that nursing students may hold a negative attitude towards mental disorders before the commencement of clinical placement in a mental health unit. This is because of the social stigma of mental illness, which the society is hesitant to talk about, as it causes some feeling of shame, guilt, and discrimination of such families or people living with mental illness (Venkatesh *et al.*, 2016). Yu *et al.* (2018) study about students' attitudes showed that before clinical placement students had a negative attitude and after the placement, students held positive attitudes about the experience and intended to work as mental health nurses in future. Lee, Clarke and Carson, (2018) found that nursing students at the clinical placement are motivated by the presence of qualified psychiatric nurses taking them through the clinical learning experience. Moreover, the autonomy of clinical instructors

plays a crucial role, which motivates the students at a clinical placement. This study analysed these factors to establish whether they influenced psychiatric clinical learning experience in Kakamega County Referral Hospital.

Statement of the Problem

An effective nursing program ensures that clinical learning is well structured to enable students to acquire essential critical skills to provide safe and quality nursing care to psychiatric patients (Jefferies *et al.*, 2018). The evaluation of nursing students was performed in Kakamega County Referral Hospital, using the XY evaluation form to award scores. Over time, the scores of psychiatric placements using the XY forms have been declining. This trend of low scores in Psychiatry has steadily decreased from 2014 (42%), 2015 (39%) and 2016 (38%) (KMTC, 2016). These results show a decline in psychiatric placement performance scores. The demand for mental health placements due to the increasing student numbers in nursing programs may lead to a decline in the quality of psychiatric learning experience. This study, therefore, sought to answer the following question, "what are the learner factors influencing clinical psychiatric learning experience for diploma nursing students?"

RESEARCH METHODOLOGY

A descriptive cross-sectional research design was used for this study. The design described the learner factors influencing the clinical learning experience for diploma nursing students during their psychiatric nursing experience. The study was carried out at Kakamega County Referral Hospital (level 5) in Kakamega County. The psychiatric unit was started in 1965 with a 25-bed capacity and the average number of admissions was 35-50 patients. Currently, the unit has a bed-capacity of 30 with 2 wings for male and female patients, with each wing having a 15-bed capacity. There were three stabilization rooms (strong rooms), a pantry room, toilets, and bathrooms separately for both male and female patients. The ward also had a nursing station and a records room (department). There were several stores used to keep drugs, stationery, linen, and toiletry facilities. This unit was on approximately half to three-quarters of an acre of land with a field for re-creative activities and a well-maintained garden having vegetables and bananas. The study targeted all diploma nursing students who were placed at the Kakamega County Referral Hospital Psychiatric Unit for psychiatric clinical learning experience during the third and final year of their basic training. What guided the choice of this category of the study population was that these students had undertaken their theory in psychiatric nursing; were undertaking or had undertaken their clinical learning placement in the psychiatric unit. The key informants were the psychiatric clinical instructors and the psychiatric lecturers from the participating colleges.

Ten diploma medical training colleges that took their students to the psychiatric unit of Kakamega County Referral Hospital participated in the study. Census sampling technique was employed whereby 178 participants (KCRH, 2019) were selected from the participating colleges to take part in the study. Quantitative data were collected using structured questionnaires from diploma nursing students, while interview guides were used on Psychiatric Nursing Lecturers and Psychiatric Nurses. Three research assistants were recruited and trained for two days and they assisted in data collection. All the nursing students in the clinical placement were given the structured questionnaires at the end of their psychiatric clinical placement of four weeks. The nursing lecturers and clinical instructors were interviewed after four weeks of student's clinical rotation. Scored XY form provided the

grades obtained by nursing students at the end of clinical rotation. This process went on for four months.

The researcher cleaned, coded and entered the data from questionnaires and scores from XY evaluation forms into the computer and analysed using the statistical SPSS version 25. Continuous variables were summarized using the Odds Ratio to measure the association between variables and presented in tables and figures to provide a pictorial description of the sample. Statistical significance was set at a p-value of < 0.05. Qualitative data collected through interview guides were analysed through content analysis using emerging themes and issues highlighted to generate a detailed report. Ethical clearance was obtained from Masinde Muliro University of Science and Technology; Institutional Ethics and Review Committee (IERC), Kakamega County Hospital Research Committee and National Commission for Science, Technology and Innovation (NACOSTI). The researcher had to maintain anonymity and confidentiality in order to protect the respondent's identities by keeping the information provided by the study participants confidential and not disclosing the names of the respondents but using code numbers instead. The study observed all the ethical principles of beneficence, respect for persons, informed consent, justice, confidentiality & anonymity and privacy

RESULTS

Socio-demographic characteristics of respondents

Table 1, presents the socio-demographic characteristics of the respondents. More than half of the students (57.3%) were female while 42.7% were male. Majority (79.2%) were aged between 20 - 24 years with an average age of 23 years. Most of the students were protestants 42.7%. About two-thirds (66.8%) of the students were in the third year while 30.9% were in the fourth year. Most of the students came from Kakamega KMTC (28.6%) and Mukumu Mission (24.6%).

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Table 1: Socio-demographic characteristics of respondents

Variables	Categories	N	%
Gender	Male	76	42.7
	Female	102	57.3
	Total	**178**	**100.0**
Age Group (Years)	20 – 24	141	79.2
	25 – 29	36	20.2
	>30	1	0.6
	Total	**178**	**100**
Mean ag ± SD (Range)	23.0±2.0 (20.0 – 30.0) - 30.0)		
Religion	Protestant	76	42.7
	Catholic	66	37.1
	Muslim	7	3.9
	Other	29	16.3
	Total	**178**	**100.0**
Current year of training	Year 3	123	69.1
	Year 4	55	30.9
	Total	**178**	**100.0**
Training Institution	KMTC Kakamega	50	28.1
	KMTC Bungoma	13	7.3
	KMTC Vihiga	13	7.3
	KMTC Webuye	13	7.3
	KMTC Kapenguria	13	7.3
	KMTC Bondo	13	7.3
	Mukumu Mission School of Nursing	30	16.9
	Kapsowar Mission School of Nursing	9	5.1
	Nzoia Nursing School	15	8.4
	Matibabu Nursing School	9	5.1
	Total	**178**	**100.0**

Learner factors influencing psychiatric clinical learning experience

Table 2 presents the learner factors influencing psychiatric clinical learning experiences for diploma nursing students. All students were of the view that they were well prepared for

clinical placement. Some of the reasons given to support this included: having learnt theory in class before placement 105 (59%), they already were aware of psychiatric clinical conditions 37 (20.8%) and that they had their set objectives to be covered during clinical placement 20 (11.2%). Positive attitude 118 (66.3%) and motivation 165 (92.7%) also influenced their clinical learning experience. Moreover, students observed that they were motivated because they were going to put theory into practice while working with mentally-ill patients.

Table 2: Learner factors influencing psychiatric clinical learning

LEARNER FACTOR	CATEGORIES	FREQ	%
Preparation for psychiatric clinical placement	Yes	178	100
	Total	**178**	**100**
Reasons for being well prepared	Learnt theory in class before placement	105	59
	Already aware of psychiatric conditions	37	20.8
	Had own objectives to be covered during the placement	20	11.2
	School provides objectives to be undertaken throughout the placement	9	5.1
	Undertook group discussions before placement	7	3.9
	Total	**178**	**100**
Attitude	Yes	118	66.3
	No	60	33.7
	Total	**178**	**100**
Motivation (Intrinsic)	Yes	165	92.7
	No	13	7.3
	Total	**178**	**100**
If motivated, why	Opportunity to put theory into practice	68	43
	Ample first-time interaction with the mentally-ill patients	53	33.6
	Able to achieve set clinical learning objectives	37	23.4
	Total	**158**	**100**
If not motivated, why	Minimal or lack of practical experiences at the institution level	13	100
	Total	**13**	**100**

[FREQ = Frequency; % = Percentage]

These findings are supported by results from key informant interviews as stated by key informant 1. *"attitude and motivation are some of the factors that facilitate the psychiatric clinical learning experience for the students"* (KII$_1$). About student preparation for psychiatric clinical placement, the majority of the key informants indicated that students were usually well prepared theoretically; however, they were not well prepared practically to deal with mentally-ill patients. Concerning pre-clinical preparation, key informants suggested the need for improvement at the institutional level to prepare students holistically (theory and practical skills) before clinical placement (KII$_{11,12,13}$).

Bivariate analysis of learner factors influencing psychiatric clinical learning

Bivariate analysis of the odds ratio to determine the learner factors associated with psychiatric clinical learning is presented in Table 3. Students at the psychiatric clinical placement stated that they were well prepared to undertake the clinical experience. This was corroborated with the Odds Ratio of (**OR: 1.4**; $p = 0.3$). Also, it was supported by the students having a positive attitude (**OR: 1.2**; $p=0.5$) and being motivated (**OR: 1.5**; $p=0.2$) towards clinical placement. Though insignificant outcome, Odd ratios from the three variables showed an increasing association of the student preparation, attitude and motivation to clinical performance.

Table 3: Learner factors influencing psychiatric clinical learning

Variables	Cat.	Freq.	Clinical Performance		OR	95%CI	p-Value
			Pass (%)	Fail (%)			
Preparation	Yes	178	67.8	32.2	1.4	0.7 – 2.6	0.3
Attitude	Yes	118	66.1	33.9	1.2	0.6 – 2.4	0.5
	No	60	61.3	38.7			
Motivation	Yes	165	64.5	46.2	1.5	0.8 – 2.9	0.2
	No	13	53.8	35.5			

[Key: Abbreviations: Cat. = Category; Freq. = Frequency; OR = Odds Ratio; CI = Confidence Interval]

DISCUSSION

Preparation for psychiatric clinical placement

The study found that all the diploma nursing student were well prepared for clinical placement. Their preparation before the clinical learning experience was largely theoretical. This finding was in line with findings from Martin *et al.* (2015) which stipulates that clinical instructors expect students' preparedness before entering the psychiatric clinical placement, which causes changes in the student's confidence level and competence in the psychiatric clinical setting. The majority of the students obtained a pass on preparation for psychiatric placement. It was posited that the students' interests in clinical learning experience were some of the factors that promoted their preparation before a clinical learning experience.

A psychiatric unit is an intense unit that requires proper preparation by the nursing students before placement. Gray & Dies (2014) and Thyer & Bazely (2014) posited that working in an unresponsive, unappreciative, and uncommunicative environment causes high levels of stress, leading to poor performance. The psychiatric units are associated with shame, guilt and discrimination; thus, students must be aware of what to expect when working with mentally-ill patients. Preparation of the students to undertake clinical learning is the apex of nursing practice. This helps to equip the learners with important skills required while performing their clinical endeavours. The curriculum is well designed to equip learners with theoretical knowledge and practical skills. However, this study had a contrary observation regarding practical skills preparation before clinical placement; most of the students on clinical placement were not sufficiently endowed with practical skills hence were not ready to handle and care for mentally-ill patients. Flott and Linden (2016) noted that exposing learners to practical experiences optimally improves their skills and confidence. Furthermore, Webster (2016) posits that well-prepared nursing students have confidence, able to dispense their duties and advance their psychiatric clinical learning experience. Prepared students are able to circumvent anxiety and fear; they become good communicators with the mentally-ill patients, the outcome that is supported by Morrissey and Higgins (2019).

Attitude of the learners on psychiatric clinical placement

There was a perception by psychiatric nursing students just like the rest of the people that mentally-ill individuals were dangerous because they were prone to violence due to their unpredictable behaviours as also affirmed by Hoffner *et al.* (2017). Most of the psychiatric nursing students at the beginning of the clinical placement had a negative attitude towards mentally-ill patients in this study. These findings were supported by similar studies by Burn *et al.* (2017) and Fokuo *et al.* (2017). However, at the end of the clinical placement, most of them developed a positive attitude. Pre-clinical preparation about attitude was achieved at the institutional level, which made the students set goals for psychiatric clinical placement. The students' attitude influenced their clinical learning experience and performance altogether. Besides, it was permissible for students to have mixed attitudes especially before psychiatric clinical placement; they developed a negative attitude towards mentally-ill patients, which changed with time as they progressed in their psychiatric clinical learning experience. This was supported by Happel *et al.* (2018) and Yu *et al.* (2018) studies on a similar topic.

Motivation for psychiatric clinical placement

Motivation is a factor influenced by an individual. During clinical placement, most nursing students were motivated because of various reasons some of them being that they were able to achieve their set goals in the psychiatric clinical learning experience. Motivated students at a psychiatric clinical placement have better performance. According to the study by Lee, Clarke and Carson (2018), qualified clinical instructors (psychiatric nurses) motivate students by being role model thus enhancing their clinical performance and promote their clinical learning experience.

CONCLUSION

This study revealed that Kenya Registered Community Health Nurse diploma students were well prepared theoretically to engage in psychiatric clinical learning placement. It also, established that positive attitude and motivation from the nursing students towards clinical placement at the psychiatric unit promoted clinical learning experience and performance thereafter. However, most of the psychiatric nursing students were not well prepared with practical skills to handle mentally-ill patients.

RECOMMENDATION

Practical skills are important for psychiatric nursing students, which most students were not well prepared with, therefore, it must be given priority at the college level when preparing students for clinical placement. Medical colleges in Kenya should emphasise skill-based training on human anatomy and behaviour through simulation. Trainers should be required to lead the nursing students through skill-based training. Medical college management should make available practical based resources to trainers and students to promote the skill-based learning approach.

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