

Determining The Self-Regulated Learning Status Of Nursing Students Regarding Clinical Nursing Practices

Hemşirelik Öğrencilerinin Klinik Hemşirelik Uygulamalarına Yönelik Öz Düzenlemeli Öğrenme Durumlarının Belirlenmesi

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ABSTRACT

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Self-regulated learning is an important issue to be addressed for clinical nursing practices of nursing students who will be the future healthcare workers. The objective of this descriptive study was to determine the self-regulated learning status of the nursing students regarding clinical nursing practices. The Student's Introductory Information Form and the "Self-Regulated Learning Scale for Clinical Nursing Practices (SRLSCNP)" were used in data collection. In study 76.6% of the participants were female. When the age groups of the students were evaluated, 61.7% were in the 19-21 age range. A total of, 34.0% were 3rd graders, and 77.0% of them had elementary family structure, and 96.8% had than 1 sibling. When the income levels of the families were evaluated, the income level of 68.1% was equal to the expenses. It was determined that nursing students had good self-regulated learning levels regarding the clinical nursing practices. It was found that the mean learning strategy score of the students was higher than the motivational sub-dimension. It was also found that the scale mean score was affected by the grade of the students and their willingness status of coming to the department. In line with these results, nursing students should be supported to improving and maintaining self-regulated learning situations.

Keywords: *self-regulated learning, nursing, student*

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ÖZET

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Öz düzenlemeli öğrenme, geleceğin sağlık çalışanları olacak hemşirelik öğrencilerinin klinik hemşirelik uygulamaları için ele alınması gereken önemli bir konudur. Tanımlayıcı nitelikte olan bu araştırmanın amacı, hemşirelik öğrencilerinin klinik hemşirelik uygulamalarına ilişkin öz düzenlemeli öğrenme durumlarını belirlemektir. Veri toplamada araştırmacılar tarafından hazırlanan öğrenci tanıtıcı bilgi formu ve "Klinik Hemşirelik Uygulamalarına Yönelik Öz Düzenlemeli Öğrenme Ölçeği" kullanıldı. Araştırmaya katılan öğrencilerin %76,6'sını kadındır. Öğrencilerin yaş gruplarına bakıldığında %61,7'si 19-21 yaş aralığında olduğu belirlendi, Öğrencilerin %34,0'ünü 3.sınıf, %77,0'si çekirdek aile yapısına sahip ve %96,8'sinin 1 den fazla kardeşi bulunmaktadır. Ailelerin gelir düzeyine bakıldığında %68,1'inin gelir düzeyi gider düzeyine eşittir. Araştırmada hemşirelik öğrencilerinin klinik hemşirelik uygulamalarına yönelik öz düzenlemeli öğrenme durumlarının iyi düzeyde olduğu belirlendi. Öğrencilerin öğrenme stratejisi puan ortalamasının motivasyon alt boyutuna göre daha yüksek olduğu bulundu. Ayrıca ölçek ortalama puanının öğrencilerin notlarından ve bölüme gelme istekliliklerinden etkilendiği görüldü. Bu sonuçlar doğrultusunda, hemşirelik öğrencilerinin öz düzenlemeli öğrenme durumlarını iyileştirmesi ve sürdürmesi desteklenmelidir.

Anahtar Kelimeler: *öz düzenlemeli öğrenme,, hemşirelik, öğrenci*

Atf
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INTRODUCTION

There is a one-way information transfer in the traditional learning models. In this model, all the information required by the student is presented in a one-way manner (Kihlstrom, 2015). However, according to Albert Bandura's self-regulated learning theory, students have the ability to organize their own learning processes (Bandura, 1977). It is emphasized in today's educational understanding that the student should take an active role in his/her education. The use of student-centered learning models is preferred for lifelong learners and students who are responsible for their own learning. Self-regulation is an important part of the active learning process of students (İlgaz & Gul, 2014; řenol, 2018). Taking responsibility for own behaviors of an individual, rewarding or punishing himself/herself is defined as self-regulation. In self-regulated learning, the individual controls his/her own learning (Duruhan, 2004). Self-regulated learning is an active and constructive process in which the student determines his/her own autonomy and goals of learning, controlling his/her own motivation, knowledge, and behaviors (Pintrich, 2004). Self-regulated learning provides students with awareness on their strengths and weaknesses, who, then control their motivation and satisfaction with learning (González et al., 2013).

It is expected that nursing students have high self-regulated learning ability levels to meet the increasing demands in line with rapid growth and developments in the healthcare sector (Chen et al., 2019). It is required that students who will be the nurses of the future check their own learning when they step into their professional roles. For this reason, nursing students are required to learn new skills with continuous training, transferring these skills to the clinical center with self-regulated learning (American Nurses Association, 2010); and have self-assessment and self-regulated learning skills together with professional skills (Delanie, 2018). Self-regulated learning expresses the motivational orientation and learning strategies students employ to achieve the goals expected from them (Pintrich, 1995). It is reported that nursing students must have adequate confidence and motivation to take active roles in the healthcare system. It is stated that students will acquire the required confidence and motivation with self-regulated learning (Toode, Routasalo & Suominen, 2011); and that nursing students who have low self-regulation skills have problems in adapting to difficult tasks (Salamonson et al., 2016).

Although traditional methods are dominant in nursing education, the importance of self-regulated learning is emphasized more and more in existing nursing programs. The changes in the healthcare system, the constantly updated information, and increased complexity in clinical applications have forced nurses to continue their professional development through continuous learning methods (Sun et al., 2014; Keçeci, 2017). For this reason, the use of different teaching techniques, such as e-learning, interactive training, and student-centered education is

recommended to improve the self-regulated learning skills of nursing students (Gaupp, Fabry & K rner, 2018; Keeci, 2017). Since it is difficult for nurses who are unable to direct their own learning to adapt to the changes in healthcare field, the educators in nursing need to adapt themselves to the concept of self-regulated learning (Őenol, 2018). For this reason, self-regulated learning is an important issue to be addressed for clinical nursing practices of nursing students who will be the future healthcare workers.

This study was planned to determine the self-regulated learning status of the nursing students regarding clinical nursing practices.

METHOD

Study Design

The study was planned with a descriptive design, and was conducted with nursing department students on 9-13 March 2020, at a university's health high school. A total of 336 nursing students studying at the 2nd, 3rd, and 4th grades were included in the study. The study included 235 students who were at the school on the day of the data collection and who volunteered to participate in the study as the sampling without conducting any sampling methods. Since the 1st students did not go into clinical practice during the fall semester and because their time of clinical practice during the spring semester was not sufficient, they were excluded from the study. The participation rate was 69.9% in the study.

Data collection

The study data were collected with face-to-face interviews with students. To collect the data, verbal permission was obtained from the teachers who taught the courses, and forms were applied before the course. Verbal permission was obtained from the students who participated in the study. The data collection forms were distributed to the students, and they filled the forms on their own. The data collection forms took about 10 minutes to fill. The student information form that was prepared by the researchers in line with the literature for this study, and the "Self-Regulated Learning Scale for Clinical Nursing Practices", whose validity and reliability study for Turkish was conducted by Őenol (2018) were used in the study.

The Student Information Form. The form includes about grade, age, gender, family structure, number of siblings, income status, coming the department with his/her own wish, residence, clinical practice duration of student, distribution of clinical practice places.

Self-Regulated Learning Scale for Clinical Nursing Practices. The scale that was used in the study was developed in 2017 by Satoko Iyama and Hitomi Maeda (Iyama & Maeda, 2018). The Turkish validity and reliability of the scale was conducted by Őenol (2018). It was reported

that the scale is valid and reliable for nursing students (řenol, 2018). The scale consisted of 16 items. The sub-dimensions of the scale are two "Motivation" and "Learning Strategies". The lowest score that can be received from the scale is 16, and the highest score is 80. It is stated that as the score from the scale increases, the use of self-regulated learning approach of the student also increases (řenol, 2018). The Cronbach Alpha Coefficient of the study was calculated as .85 for the total scale score in the original study; .78 for motivation sub-dimension, and .81 for the sub-dimension of learning strategies (řenol, 2018). It was reported that the scale is valid and reliable for nursing students (řenol, 2018). In the study the Cronbach Alpha Coefficient was calculated as .81 for the total scale score, 67 for motivation sub-dimension and .82 for for the sub-dimension of learning strategies.

Data Analysis

The data were evaluated with the SPSS 20.0 Statistics Program. Numbers, percentages, averages and standard deviation were used in the descriptive statistics. The Independent Sample t-test was used in paired group comparisons of the variables showing normal distribution, One-Way Analysis of Variance (One-Way ANOVA) was used in group comparisons with normal distribution, and Mann Whitney U-test was used with Bonferroni Correction for sub-group comparisons in variables that appeared to be significant. $P < 0.05$ was accepted to be significant.

Ethical Considerations

Written permission was received from the ethics committee of the university scientific research (2020/ 69456409-199-E.7326) and from the school board for the study. The students were informed that the information they gave after providing oral permission would only be used for scientific purposes, and that they could leave the study at any time.

RESULTS

The results of the descriptive characteristics of the students who participated in the study are given in Table 1.

Table 1

Descriptive Characteristics of Participant Students (n=235)

Variables	n	%
Gender		
Female	180	76.6
Male	55	23.4
Age Group		
19-21	145	61.7
22-24	73	31.1
25 and above	17	7.2
Grade		

2. Grade	78	33.2
3. Grade	80	34.0
4. Grade	77	32.8
Family Structure		
Elementary Family	181	77.0
Extended Family	43	18.3
Separated Family	11	4.7
Number of Siblings		
1	9	3.8
2	73	31.1
3	71	30.2
4 and above	82	34.9
Income Status		
Income status is more than expenses	45	19.1
Income status equals expenses	160	68.1
Income status less than expenses	30	12.8
Coming the Department With His/Her Own Wish		
Yes	183	77.9
No	52	22.1
Residence		
With family	22	9.4
Dormitory/Hostel	145	61.7
With relatives	4	1.7
With friends at home	57	24.3
Other	7	3.0
Clinical Practice Duration of Student		
1 semester	8	3.4
2 semesters	56	23.8
3 semesters	62	26.4
4 semesters	78	33.2
5 semesters	22	9.4
6 semesters	9	3.8
Distribution of Clinical Practice Places		
Internal diseases clinics	234	99.6
Surgery clinics	229	97.4
Obstetrics and gynecology clinics	159	67.7
Children's health and diseases clinics	141	60.0
Psychological health and psychiatric disease clinics	86	36.6

In this respect, 76.6% of the participants were female. When the age groups of the students were evaluated, 61.7% were in the 19-21 age range. A total of, 34.0% were 3rd graders, and 77.0% of them had elementary family structure, and 96.8% had than 1 sibling. When the income levels of the families were evaluated, the income level of 68.1% was equal to the expenses. In the study, 77% of the students came to the department voluntarily. When where the students lived was evaluated, 61.7% lived in dormitories or hostels. When the clinical practice durations of the students were evaluated, 83.4% of the students practiced clinically in the 2-4-year interval. When clinical practice locations were examined, 99.6% performed their applications in internal diseases clinics. When clinical practice duration of student was evaluated, 33% of them have applied clinical practice for 4 semesters (Table 1).

Table 2 shows the mean scores students received from the Self-Regulated Learning Scale and its sub-dimensions for Clinical Nursing Practices.

Table 2

Mean Scores in Self-Regulated Learning Scale and Sub-Dimensions on Clinical Nursing Practices (n=235)

	Min	Max	X (\pm SD)	Cronbach's Alpha
Motivation	11	35	26.64 (\pm 3.96)	0.675
Learning Strategies	20	45	36.71 (\pm 4.31)	0.820
Total	35	80	63.35 (\pm 7.03)	0.815

Students received the lowest 35 and the highest 80 from the Self-Regulated Learning Scale for Clinical Nursing Practices. The mean scale score was 63.35 (\pm 7.03). When the mean sub-dimension scores were evaluated, it was seen that the highest mean score was in Learning Strategies sub-dimension (Table 2).

Table 3 shows the comparison of the mean Self-Regulated Learning Scale scores for Clinical Nursing Practices according to the introductive characteristics of the students.

Table 3

Comparison of Mean Scores of the Students in Self-Regulated Learning Scale Regarding Clinical Nursing Practices according to Their Descriptive Characteristics (n=235)

Characteristics	X (\pm SD)	Test value and p
Gender		
Female	63.76(\pm 6.89)	t=1.619
Male	62.01(\pm 7.39)	0.107
Coming to the Department Willingly		
Yes	64.16(\pm 6.50)	t=3.369
No	60.5(\pm 8.09)	0.001
Grade		
2. Grade	62.56(\pm 7.69)	F=4.130
3. Grade	65.16(\pm 6.20)	0.017
4. Grade	62.28(\pm 6.86)	
Age		
19-21	63.28(\pm 7.19)	F= 0.503
22-24	64.08(\pm 6.43)	0.225
25 and above	30.82(\pm 7.93)	
Clinical Practice Duration of Student		
2 years	63.14(\pm 7.74)	
3 years	64.69(\pm 6.66)	
4 years	62.14(\pm 6.50)	F=1.704
5 years and above	64.19(\pm 7.28)	0.167

No statistically significant differences were detected between the mean scale scores based on the gender of the students ($p < 0.05$). In the study, mean scale scores of students who coming to the department willingly was statistically significant higher than the others ($p < 0.05$).

When the grades of the students were evaluated, statistically significant differences were detected between the mean scale score according to the grades ($p<0.05$). It was found that the difference stemmed from the mean scale scores of the students in the 4th grade. The average scale score of 4th grade nursing students was lower than the 2nd and 3rd grades. No statistically significant differences were found between the mean scale scores based on the age groups of the students and the duration of clinical practice ($p<0.05$) (Table 3)

DISCUSSION

This study showed the results regarding the self-regulated learning status of 2nd, 3rd, and 4th grade nursing students for clinical nursing practices.

It was determined in the study that the mean self-regulated learning scale scores of nursing students in clinical nursing practices were above the average. Similarly, Chen et al. found in their study that nursing students had high levels of self-regulated learning status (Chen et al, 2019). Another study found that techniques such as explanation, summarizing, analogy creation, and note-taking were the most frequently used learning strategies of students by establishing internal links between new and previous information (Keçeci, 2017). In the study conducted by Sağırlı and Azapağası (2009), it was found that students preferred learning strategies included meta-cognitive self-regulated learning (Sağırlı & Azapağası, 2009). It is considered that this might have been caused by the changes in the healthcare system, increased complexity in clinical applications, and the fact that nursing students improve themselves and direct their own learning so that they do not face challenges.

In the study, considering the number of items, it is seen that the averages of the students are similarly above the average in learning strategies and motivation sub-dimensions.

A similar study reported that 3rd grade nursing students were highly motivated (Keçeci, 2017). It is emphasized in the literature that motivation is the basis of self-regulation; and it is also stated that highly motivated students can continue their self-regulated learning by accepting their responsibilities (Vavrova et al., 2012). Another study emphasized that motivation is very effective in establishing and maintaining desired behaviors in self-regulated learning (Zumbrunn et al., 2011). For this reason, the motivations of students should be increased in the development of self-regulated learning status.

A statistically significant difference was detected between the mean scale scores based on the willingness of the students to choose their departments. In a study conducted with health education students, it was found that students who loved their schools used different learning strategies more frequently, including self-regulated learning. In the same study, significant differences were detected between self-regulated learning status of students who loved school

and those who did not (Keçeci, 2017). There were not many sources in the literature regarding this finding; however, the fact that individuals control, observe and choose the department they want by making preferences according to their standards is the basis of self-regulated learning. For this reason, it was considered that the mean scale scores of the students who preferred the nursing department willingly were higher.

When the grades in which the students were at were evaluated, it was determined that the average scale score of 4th grade nursing students was lower than the other grades. In a study that was conducted with nursing students, it was reported that the academic motivation levels of the students were lower than in other grades (Karabulut et al., 2015). In the study conducted by Keçeci (2017), it was also found that 3rd grade nursing students used different learning strategies more frequently (Keçeci, 2017). It was estimated that this finding might have been caused by the anxiety of the exam that 4th graders have to take after graduation so that they can start work as civil servants. According to the study results, senior-grade nursing students should be supported to improve their self-regulated learning status.

Study Strength

The limited number of studies on the determination of self-regulated learning situations of nursing students constitute the strength of the study.

Limitations

The limitations of the study are to be conducted with a limited number of nursing students of a university and in a single center. The results of study cannot be generalized to the universe.

Conclusions and Recommendations

It was found in the study that nursing students had good self-regulated learning status regarding clinical nursing practices. It was also determined that students' learning strategy scores were higher than the motivational sub-dimension scores, and students who came to school voluntarily had better self-regulated learning status. Also, students' self-regulated learning status decreased when they were at final grade. In line with these results, nursing students should be supported to improving and maintaining self-regulated learning situations. Nursing students' motivations should be increased to develop self-regulated learning status. However, it is also recommended that students be supported to improve self-regulated learning by identifying internal and external motivational sources, which will increase self-regulated learning status when they are at final year. In pandemic processes, such as Covid-19, which brings with it mandatory restrictions on clinical practice trainings, it is recommended to make plans to support self-regulated learning in the education of students.

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Conflict of interest

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GENİŐLETİLMİŐ ÖZET

GiriŐ

Günümüz eğitim anlayıŐı içinde öđrencinin de kendi eğitimine aktif olarak rol alması gerektiđi vurgulanmaktadır. YaŐam boyu öđrenen ve kendi öđrenmesinden sorumlu olan öđrenciler için öđrenci merkezli öđrenme modellerinin kullanımı tercih edilmektedir. Öz düzenleme öđrencilerin aktif öđrenme sürecinin önemli bir parçasıdır. Bireyin kendi davranıŐlarının sorumluluđunu alarak, kendini ödüllendirmesi ya da cezalandırması öz düzenleme olarak tanımlanmaktadır. Öz düzenlemeli öđrenmede, kiŐi kendi öđrenmelerini kendisi kontrol etmektedir. Öz düzenlemeli öđrenme öđrencinin kendi otonomisi ile öđrenme hedeflerini belirlediđi, kendi motivasyon, bilgi ve davranıŐlarını kontrol ettikleri aktif ve yapıcı bir süreçtir. Geleceđin hemŐiresi olacak öđrencilerin mesleki rollerine adım atarken kendi öđrenmelerini kontrol etmeleri istenmektedir. Bu nedenle öđrenci hemŐirelerin sürekli eğitim yoluyla yeni beceriler öđrenmeleri ve bu öđrendikleri becerileri öz düzenlemeli öđrenme yöntemiyle klinik ortama aktarmaları gerekmektedir. Öz düzenlemeli öđrenme öđrencilerin kendilerinden beklenen hedeflere ulaŐmada kullandıkları motivasyonel yönelimleri ve öđrenme stratejilerini ifade etmektedir. Öz düzenleme becerisi düşük olan öđrenci hemŐirelerin zorlu görevlere uyum sađlamada sorun yaŐadıkları belirtilmektedir.

HemŐirelik eğitiminde geleneksel yöntemler ađırlıklı olsa da, mevcut hemŐirelik programlarında öz düzenlemeli öđrenmenin önemi daha çok vurgulanmaktadır. Sađlık bakım sistemindeki deđiŐiklikler, bilgilerin sürekli güncellenmesi ve klinik uygulamalardaki karmaŐıklıđın artması, hemŐirelerin sürekli öđrenme yöntemleriyle mesleki geliŐimlerini devam ettirmelerini zorunlu kılmıŐtır. Bu nedenle hemŐirelik öđrencilerinin öz düzenlemeli öđrenme becerilerinin geliŐtirilmesi için e-öđrenme, interaktif eğitim ve öđrenci merkezli eğitim gibi farklı öđretim tekniklerinin kullanılması önerilmektedir. Kendi öđrenmelerini yönlendiremeyen hemŐirelerin sađlık alanındaki deđiŐikliklere adapte olmaları güç olduđundan, hemŐire eğitimcilerinin de kendilerini öz düzenlemeli öđrenme kavramına alıŐtırmaları gerekmektedir. Bu nedenle, geleceđin sađlık çalıŐanı olacak hemŐirelik öđrencilerinin klinik hemŐirelik uygulamalarına yönelik öz düzenlemeli öđrenme durumları, ele alınması gereken önemli bir konudur. Bu çalıŐma hemŐirelik öđrencilerinin klinik hemŐirelik uygulamalarına yönelik öz düzenlemeli öđrenme durumlarının belirlenmesi amacıyla planlanmıŐtır.

Yöntem

Tanımlayıcı türdeki bu araŐtırma 9-13 Mart 2020 tarihleri arasında bir üniversitenin sađlık yüksekokulu hemŐirelik bölümü öđrencileri ile yürütülmüŐtür. AraŐtırmanın evrenini 2., 3.

ve 4. sınıflarında eğitim gören toplam 336 hemşirelik öğrencisi oluşturmuştur. Araştırmada herhangi bir örnekleme yöntemine gidilmeyerek örnekleme çalışmaya katılmaya gönüllü olan ve veri toplama gününde okulda bulunan 235 öğrenci dahil edildi. Birinci sınıf öğrencileri güz döneminde klinik uygulamaya çıkmadıklarından ve bahar dönemindeki klinik uygulamaya çıkma süreleri yeterli düzeyde olmadığından çalışma kapsamı dışında bırakılmışlardır. Araştırma verileri öğrencilerle yüz yüze görüşme yöntemiyle toplandı. Veri toplamak için derse giren hocalardan sözel izin alınarak, dersin öncesinde formlar uygulandı. Veri toplama formları öğrencilere dağıtılarak kendi kendine doldurmaları sağlandı. Bu araştırma için öğrenci tanıtıcı bilgi formu ve Şenol (2018) tarafından Türkçe geçerlik ve güvenilirliği yapılan "Klinik Hemşirelik Uygulamalarına Yönelik Öz Düzenlemeli Öğrenme Ölçeği" kullanıldı. Araştırmada tanımlayıcı istatistiklerden sayı, yüzde, ortalama ve standart sapmadan yararlanıldı. Normal dağılım gösteren değişkenlerin 2 grup karşılaştırmalarında bağımsız örneklem t testi, normal dağılım gösteren 3 ve daha fazla grup karşılaştırmalarında tek yönlü varyans analizi (OneWay ANOVA), anlamlı çıkan değişkenlerde alt grup karşılaştırmaları için Bonferonni düzeltmeli Mann Whitney U testi kullanıldı. Anlamlılık düzeyi $p < 0,05$ kabul edildi.

Bulgular

Araştırmaya katılan öğrencilerin %76,6'sını kadın öğrenciler, %23,4'ünü ise erkek öğrenciler oluşturmaktadır. Öğrencilerin yaş gruplarına bakıldığında %61,7'si 19-21 yaş aralığında, %34,0'ünü 3.sınıf, %77,0'si çekirdek aile yapısına sahip ve %96,8'sinin 1 den fazla kardeşi bulunmaktadır. Ailelerin gelir düzeyine bakıldığında %68,1'inin gelir düzeyi gider düzeyine eşittir. Öğrencilerin %61,7'si yurttan veya pansiyonda yaşamakta ve %77,9'u hemşirelik bölümünü kendi isteğiyle tercih etmiştir. Öğrencilerin klinik uygulama sürelerine bakıldığında %83,4'ü 2-4 yıl aralığında klinik uygulamaya çıkmıştır. Klinik uygulama yerleri incelendiğinde ise %99,6'sı Dahili kliniklerde uygulamalarını gerçekleştirmiştir. Öğrenciler klinik hemşirelik uygulamalarına yönelik öz düzenlemeli öğrenme ölçeğinden en düşük 35, en yüksek 80 puan almışlardır. Ölçek puan ortalaması da 63,35 ($\pm 7,03$) olarak bulunmuştur. Alt boyut puan ortalamalarına bakıldığında en yüksek ortalama puan öğrenme stratejileri alt boyutunda olduğu görülmektedir. Öğrencilerin cinsiyetine göre ölçek puan ortalaması arasında istatistiksel açıdan anlamlı bir fark bulunmamıştır ($p < 0,05$). Öğrencilerin hemşirelik bölümünü kendi isteği ile seçme durumuna göre ölçek puan ortalaması arasında istatistiksel olarak anlamlı bir fark bulunmuştur ($p > 0,05$). Araştırmada 4. sınıf hemşirelik öğrencilerinin ölçek puan ortalamasının 2. ve 3. sınıflardan daha düşük olduğu görülmüştür. Öğrencilerin yaş grupları ve klinik uygulama sürelerine göre ölçek puan ortalamaları arasında istatistiksel olarak anlamlı bir fark olmadığı bulunmuştur ($p < 0,05$).

Tartıřma ve Sonu

Arařtırmada hemřirelik ğrencilerin klinik hemřirelik uygulamalarına ynelik z dzenlemeli ğrenme lęi puan ortalamasının iyi dzeyde olduęu belirlendi. Yapılan benzer alıřmalarda ğrencilerin z dzenlemeli ğrenme durumlarının yksek olduęu ve yeni bilgiler ile nceki bilgiler arasında dahili baęlantılar kurarak, aıklama, zetleme, analoji oluřturma ve not alma gibi tekniklerin ğrencilerin en sık kullandığı ğrenme yntemleri olduęu grld. Arařtırmada ğrencilerin lek alt boyut puan ortalamalarına bakıldıęında ğrenme stratejileri alt boyut puan ortalamasının motivasyon alt boyutuna gre daha yksek olduęu grlmektedir. Motivasyonu yksek olan ğrencilerin kendi sorumluluklarını kabul ederek z dzenlemeli ğrenmelerini srdrebildięi belirtilmektedir. ğrencilerin hemřirelik blmn kendi isteęi ile seme durumuna gre lek puan ortalaması arasında istatistiksel olarak anlamlı bir fark bulunmuřtur. Yapılan bir alıřmada okulunu seven ğrencilerin z dzenlemeli ğrenmenin de aralarında olduęu farklı ğrenme stratejilerini daha sık kullandığı belirlenmiřtir. ğrencilerin buldukları sınıflara bakıldıęında ise 4.sınıf hemřirelik ğrencilerinin lek puan ortalamasının dięer sınıflara gre dřk olduęu grlmřtir. Yapılan benzer alıřmalarda 4.sınıf ğrencilerin dięer sınıflara gre akademik motivasyonlarının dřk olduęu ve 3.sınıf hemřirelik ğrencilerinin farklı ğrenme stratejilerini daha sık kullandığı belirlenmiřtir.

Arařtırmada hemřirelik ğrencilerin klinik hemřirelik uygulamalarına ynelik z dzenlemeli ğrenme durumlarının iyi dzeyde olduęu grld. ğrencilerin ğrenme stratejileri puanlarının motivasyon alt boyutuna gre daha yksek belirlenirken, okula kendi isteęi ile gelen ğrencilerin z dzenlemeli ğrenme durumlarının daha iyi olduęu grld. alıřmada ğrencilerin son sınıfa geldiklerinde z dzenlemeli ğrenme durumlarının azaldığı belirlendi. Bu sonular doęrultusunda hemřirelik ğrencilerinin z dzenlemeli ğrenme durumlarının geliřtirilmesi ve srdrlmesi iin desteklemesi gerekmektedir. z dzenlemeli ğrenme durumunun geliřtirilmesi iin ğrencilerin motivasyonları arttırılmalıdır. Bununla birlikte son sınıfa gelince azalan z dzenlemeli ğrenme durumunu arttırmayı saęlayacak i ve dıř motivasyon kaynakları belirlenerek, ğrencilerin z dzenlemeli ğrenmenin geliřtirilmesi iin desteklenmesi nerilmektedir.