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From student nurse to nurse professional

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8

CHAPTER

General Discussion

INTRODUCTION

The development of the professional identity of both students and novice nurses was taken as the starting point of this thesis. In the careers literature, professional identity is described as one's professional self-concept, based on attributes, beliefs, values, motives and experiences (Ibarra, 1999; Arthur, 2008). Developmental psychologists place the concept of identity in a wider context. Recent theories of identity development in general, emphasize the interactional character of identity, meaning that it emerges in the interaction between the individual and the context (Bosma & Kunnen, 2001; Schwartz, Donnellan, Ravert, Luyckx & Zamboanga, 2013). Moreover, professional identity cannot be dissociated from one's personal identity, which develops over time.

Both Erikson (1959) and Marcia (1966) described identity development from a psychosocial point of view. Erikson distinguishes eight stages of psychosocial development that an individual should pass through from infancy to late adulthood and maturity. In the fifth stage, adolescence, issues related to identity versus role confusion are determinative. In the sixth stage, early adulthood, issues related to intimacy versus isolation are crucial. In both phases friends, peers and role models become increasingly important (Erikson, 1959).

Arnett (2014) uses the term 'emerging adulthood', which encompasses late adolescence and early adulthood (approximately 18–26). One of the characteristics of emerging adulthood is the exploration of possible educational directions and different occupational futures. In emerging adults, both school and work are determinative for the development of personal identity. Over the course of college years and their first job experiences, young people's self-concept and psychological well-being improve and they gain a more distinct identity. They seek shared activities and, even more importantly, shared beliefs and values (Arnett, 2014). Marcia (1966) conceptualized identity development as consisting of two main processes: exploring different alternatives (the process of exploration) and committing to a particular identity alternative (commitment). The concept of commitment refers to the presence of goals, values and beliefs, among other factors, that provide meaning to life (Kunnen & Metz, 2013). Once people have established their identities, they are ready to make long-term commitments to others (Erikson, 1959).

Both nursing students and novice nurses are in the phase of emerging adulthood, a period of exploration and identity development which includes their professional identity. In the nursing literature, professional identity is defined as 'the values and beliefs held by the nurse that guide her/his thinking, actions and interaction with the patient' (Fagermoen, 1997, p. 435). In other words, professional identity refers to what it means to be and act as a nurse in relation to the work environment. Work experiences, not only with patients, but also with colleagues, supervisors and other healthcare professionals, are essential for their identity formation (Gregg & Magilvy, 2001). The construction of a successful professional identity is often related to job satisfaction, career success and commitment (Clarke, Brown & Hailey, 2009; Clements, Kinman, Legetter, Teoh & Guppy, 2015; Hall, Zhu & Yan, 2002). Moreover, professional identity develops over time and throughout an educational programme or a professional career. Thus, student nurses

develop their identity during their educational programme and during clinical placements (Brown, Stevens & Kermodé, 2012; Walker et al., 2014). Novice nurses transition from being a nursing student to a professional practising nurse. This transition is often described as the struggle for a new professional self and a new professional identity (Arrowsmith, Lau-Walker, Norman & Maben, 2016; Bjorkstrom, Athlin & Johansson, 2008). Striving for this new identity is often linked to experiences in the clinical setting, where young nurses are confronted with new challenges and responsibilities (Bjerknes & Bjork, 2012; Duchscher, 2009; Leong & Crossman, 2015).

This thesis first discussed the public image of nursing and its association with nurses' self-concept and professional identity development based on a literature review ([Chapter 2](#)). Following this, professional identity development in student nurses was examined in a longitudinal study: first, a cross-sectional study was performed to explore students' perceptions of nursing at the beginning of their education ([Chapter 3](#)); second, we examined if, when and why these perceptions change over time ([Chapter 4](#)); and, finally, we performed a qualitative study to determine factors that affect students' decisions to leave or complete the educational programme ([Chapter 5](#)). The professional identity development of novice nurses was then examined in two additional studies: first, a longitudinal diary study was conducted to gain a greater understanding of novices' first lived experiences in a clinical setting ([Chapter 6](#)) and, subsequently, we performed a multilevel study to explore the impact of work experiences on their commitment to the profession ([Chapter 7](#)). This final chapter reflects on the main findings of the studies described in this thesis and discusses the methodological issues. We will finalize this chapter by considering the implications for education and practice, making recommendations for future research, before some concluding remarks.

MAIN FINDINGS

Students

Nursing students demonstrate a wide range of pre-existing perceptions of nursing. They choose nursing for various reasons, such as a strong desire to become a nurse, wanting to care for people, and job opportunities (McLaughlin, Moutray & Moore, 2010; Wilkes, Cowin & Johnson, 2015). It appears that student nurses begin their training programme with a fairly well-formed sense of nursing, although previous research has also shown that there is a noticeable gap between students' expectations and the reality of education and the clinical learning environment (Magnusson & Amundson, 2003; Papathanasiou, Tsaras & Sarafis, 2014). Unrealistic expectations of nursing may be an obstacle to identifying with the profession, and thus may lead to dissatisfaction and voluntary withdrawal from the programme (Brodie et al., 2004; O'Donnell, 2011).

Perceptions of nursing

In this thesis, the perceptions of Dutch nursing students enrolled in a Bachelor's of Nursing programme were examined. At the beginning of their four-year programme, we measured newly enrolled students' orientations and attitudes towards nursing to gain insight into their perceptions of their future career ([Chapter 3](#)). The results of our study showed that, in general, students' perceptions were mainly positive, and the caring and

empathetic aspects of nursing were especially highly appreciated. Moreover, perceptions of the professional competences required of nurses, the professional roles nurses fulfil and the career opportunities the profession has to offer were highly valued. With regard to issues related to family and personal life, only a minority of the students (14%) seemed to experience problems with finding a balance between their studies and private life at this stage of their educational programme.

Previous research has shown that personal and environmental characteristics predict students' perceptions of nursing, especially gender, preliminary training and healthcare work experience (Cowin & Johnson, 2011; Miers, Rickaby & Pollard, 2007). This is in close agreement with our findings, which revealed that students with some experience of nursing in a healthcare setting, who had chosen nursing as first-choice programme and who aimed to make a career in nursing were far more positive towards nursing than their counterparts. These important characteristics should be kept in mind when recruiting and assessing new students.

Changing perceptions

We found that beginning students' perceptions of nursing were mainly positive, especially with regard to the caring aspect, as well as competences and professional roles. Positive perceptions may be indicators for study success, as a positive attitude is seen as a prerequisite for effective learning and has also been linked to satisfaction and study motivation (Vanhanen & Janhonen, 2000a, 2000b). However, almost 45% of our students dropped out during the first two years of the programme. Therefore, we explored what happened to students' perceptions of nursing during these first two years (Chapter 4). Did their perceptions of nursing change, and, if so, when and why did these changes occur? Moreover, did these changes affect their motivation to complete the programme?

We found that students' perceptions changed significantly during the first two years of training. In general, students' scores on questions related to knowledge, skills and the professional roles of nurses, such as 'Nurses participate in the development of healthcare policies' and 'Nurses integrate health teaching into their practice' increased over time, while scores on questions related to empathic behaviours, such as 'Nurses protect patients in the healthcare system' and 'Nurses value time at the bedside caring for patients', decreased. Exposure to the process of nurse education and clinical placements seemed to shift students' focus from being idealistic, altruistic and empathic to being knowledgeable, with a focus on competences, skills and role development. As they advance in their training programme and complete their first clinical placements, students obviously discover that nursing is a profession with high practical and academic demands. The most striking change concerned students' perceptions of empathy.

The results of our study showed that the empathetic aspect of nursing was considered far less important at the end of their second year of training. Apparently, students no longer perceived issues that were related to protecting and standing up for patients to be an essential part of nursing. A possible explanation might be that hospital care is becoming increasingly medicalized, leaving little time for the empathetic side of nursing. We also found that finding a balance between studies and private life became more important, with the strongest change after six months of training. Apparently, as they

progress in their training, students discover that the demands of the educational programme and clinical placements were harder to reconcile with their private life than expected.

Career choice, attrition and retention

In agreement with the findings of previous studies about career choice (Crick, Perkin-ton & Davies, 2014; McLaughlin et al., 2010), we found that the main reasons students decide to become nurses are the caring aspect of the profession, having role models in their environment and the great variety of jobs the profession has to offer (Chapter 5). Most participants had sought a career that involved caring and having contact with people ('You must feel the need to help people ... you must feel empathic'). Direct experience of the profession – due to having friends or family members who were nurses – was perceived as a great source of influence on choosing a nursing career ('My aunt is a nurse and two of my three cousins are studying nursing. It really runs in the family'). Nursing was also perceived as a career which offered job security, job opportunities and a variety of jobs ('I chose this programme because I can always find a job in healthcare'). All in all, it seems that students start their nursing education with clear and well-formed expectations and perceptions of their future profession.

Concerning attrition, we found that students who considered withdrawing attributed this to problems with the programme, the theory-practice gap and clinical placements. Feelings of dissatisfaction with the education programme were associated with the quality of the programme and a lack of support from teaching staff. The perceived theory-practice gap caused a lot of stress and feelings of unpreparedness for clinical practice. A consistent issue was the students' concerns about lacking the knowledge to deliver good care. Poor-quality clinical placements were mostly related to not being able to complete learning goals and the feeling of not being welcomed in the team. Students expressed feelings of disappointment after they were exposed to the clinical environment. Perceived lack of practical and emotional support from colleagues and mentors was by far the most important reason for attrition. This accords with other research in this field which has suggested that student nurses need feelings of belongingness during clinical placements and they need support from their mentors (Jack et al., 2017; Materne, Henderson & Eaton, 2017).

Despite these considerations regarding withdrawal, intrinsic and extrinsic motivations seemed to be strong enough to cause them to decide to stay in the programme. Intrinsic factors, such as a strong desire to become a nurse, wanting a nursing diploma and perseverance were of decisive importance. Support from family, friends, tutors and school staff were the most important extrinsic factors that motivated them to remain in the programme. Satisfaction with the programme and perceived support from teaching staff kept them motivated to complete their degree. Clinical placements were especially valued when they perceived enthusiasm and support from their mentors and their team. Working in a friendly and supportive team and being welcomed proved to be more important than the patient group or clinical field. These findings are in accordance with previous studies which found that clinical placement experiences in a favourable environment play a role in creating and enhancing identification with the profession, and in retaining students (Lamont, Brunero & Woods, 2015; Materne et al., 2017).

Identification with the profession is also defined as a key predictor of commitment (Stinglhamber et al., 2015).

In summary, we found that the first two years of education are important for nursing students' identity development, and are also decisive for their commitment and motivation to complete their programmes. Students' decisions to continue or withdraw are strongly related to both classroom and clinical placement experiences. The role of teaching staff and mentors is invaluable in motivating students during their education and placements.

Novice nurses

When novice nurses start working in clinical practice, they enter a period of transition to a new role and professional identity. This new professional identity emerges mainly from work experience, interactions with patients and cooperation with colleagues, supervisors and physicians. Identity develops through these interactions and confrontations with challenging events in the work environment. Novice nurses are usually in 'emerging' adulthood, a stage of life where they have to balance the demands of work and personal life. They are confronted by ongoing professional and emotional developmental processes. Previous studies have reported that support and guidance from more experienced nurses and supervisors was invaluable in teaching them how to deal with emotionally stressful events (Howarth, Holland & Grant, 2006; Jewell, 2013). In addition, the need to feel accepted in the team was found to be an important condition for an effective transition from student to professional nurse (Howarth et al., 2006; Kelly & Courts, 2007). Professional identity in nursing is often related to job satisfaction, motivation, commitment and retention (Cowin, Craven, Johnson & Marsh, 2006; Neilson & Jones, 2012), which, in turn, are associated with support from and collaboration with inter-professional peers and supervisors (Andrew, 2012; Clements et al., 2015).

First experiences in the clinical setting

The results of our diary study, in which novice nurses described their first lived experiences in a clinical setting, demonstrated that the relationships with patients, colleagues, supervisors and physicians were highly important (Chapter 6). We found that negative relational experiences lead to low job satisfaction and less well-being. Many nurses reported frustrating work relationships with physicians. They reported feeling ignored and belittled and complained of not being treated like professionals. Moreover, they had negative confrontations with patients, experiencing harsh criticism, insults and humiliating remarks. Situations where novice nurses perceived a lack of support from colleagues and supervisors and where they experienced bullying and intimidation turned out to be crucial to their sense of well-being and enjoyment of their work. These negative experiences were mostly due to high work pressure and low staffing.

In contrast, positive relational experiences led to increased self-confidence, well-being and work pleasure. Our results showed that Interpersonal moments with patients, especially being able to do something for them, had a positive impact on job satisfaction and work motivation. Good working relationships with other nurses, feeling welcomed in the team, and feeling supported by the team and supervisors also contributed to enjoying work. These positive relationships outweighed the negative ones. Some nurses reported

that good relationships with their colleagues and supervisors were crucial for their well-being and job satisfaction, and were even more important than the patient group they were working with. Supportive relationships were found to play an important role in enhancing their self-esteem, professional performance and feelings of fitting into the profession.

Issues related to the work environment, such as high work pressure, high complexity of care and unrealistic demands, were also frequently described. These experiences were associated with feelings of dissatisfaction, exhaustion and not being able to provide adequate patient care. In addition, confronting existential events were accompanied by strong emotions and a sense of losing control of feelings. The nurses reported feeling unprepared to deal with end-of-life care and they expressed their feelings of hopelessness and emotional distress. One of the strategies to deal with these stressful existential situations was to share their experiences with colleagues and supervisors.

In contrast to the above-mentioned negative experiences, we found that many nurses experienced challenging situations which they were nevertheless able to manage. Being responsible for a large number of patients and succeeding in delivering good-quality care increased positive perceptions of personal competence. A common thread running through the diaries was the need for and satisfaction with continuing professional development. Having educational opportunities and opportunities for career development were described as being essential for their personal and professional growth.

In summary, this study showed that the transition from student nurse to professional staff nurse is a challenging process involving many existentially confronting and stressful situations. Novice nurses have to deal with many challenging and demanding experiences in their daily practice. Positive work experiences, primarily support from colleagues and supervisors, seemed indispensable to guide them through this period of transition from student to nurse professional.

Emotional state and commitment

The study reported on in [Chapter 7](#) focused on the effects of work experience on novice nurses' emotions and commitment to the profession. The results showed that relational experiences, existentially confronting events and working in complex care situations had a strong impact on their emotional state and commitment. Positive emotions and the level of commitment suffer the most from lack of support from colleagues, supervisors and physicians, perceived lack of competence and experiences characterized by complexity of care. Perceived lack of support increased the nurses' negative emotions and had a strong effect on positive emotions and commitment, while perceived positive feedback and support had a strong effect on nurses' positive emotions and commitment. We also found that when an individual nurse perceived more support, their level of commitment increased, indicating that changes in level of commitment are positively related to changes in perceived support. These results are in line with previous studies (Chen, Yang, Gao, Liu & De Gieter, 2015; Ruiller & Van der Heijden, 2016), which found that personal workplace support was strongly and positively related to nurses' affective commitment and that interpersonal exchanges in the daily work situation are crucial.

The perceived lack of competence of novice nurses is often associated with feelings of failure and being unable to link their theoretical knowledge to actual experiences in the clinical setting (Bjerknes & Bjork, 2012; Clark & Holmes, 2007; Duchscher & Cowin, 2004). These experiences also increased negative emotions and decreased positive emotions and the nurses level of commitment. In addition, complex care situations turned out to have a direct negative effect on nurses' emotional state and commitment.

We found that relational experiences with patients did not appear to affect their commitment, although they were significantly related to both positive and negative emotions. The same applied to existential events, such as the sudden death of a young patient. These experiences reduced positive emotions and increased negative emotions, but they did not affect commitment to the profession. As nurses, especially in hospital settings, provide care for patients who are suffering from severe and life-threatening illnesses, it is inevitable that nurse-patient relationships are permeated with emotions. These findings correlate well with the literature (Heffernan, Quin Griffin, McNulty & Fitzpatrick, 2010; Santos, Chambel & Castanheira, 2015).

In summary, we found that despite the negative experiences, none of these novice nurses gave up or expressed feelings of long-standing exhaustion or burn-out. All of them seemed to manage to deal with challenging work situations. However, perceived support from colleagues and supervisors seemed indispensable to remaining committed. Thus, the presence and support of colleagues and supervisors are indispensable to ensuring novice nurses remain motivated to continue in the profession.

Public image, identity development and commitment

The results of the studies that were discussed in [Chapter 2](#) revealed that, despite the professionalization of nurse education and practice, the image of nursing is still diverse and incongruous, and is predominantly based on misconceptions and stereotypes. Nursing is still mainly portrayed as a female profession, which involves having a subordinate position and playing a supportive role to physicians. The literature showed that this public image is closely linked to nurses' self-concept, professional identity development and commitment to the profession (Gregg & Magilvy, 2001; Takase, Kershaw & Burt, 2002). Commitment can be considered as an intrinsic aspect of being a nurse. The importance of commitment in managing the demands of education and practice has been highlighted in previous research (Clements et al., 2015; Panaccio & Vandenberghe, 2009).

In this thesis, we found that the public image of nursing was not an issue for students and novice nurses. Some students mentioned it indirectly in the interviews, but they did not seem to have any problems with a distorted image or low professional status. Novice nurses only mentioned problems with their professional status in cooperation with physicians. The diaries revealed that the majority of the nurses felt belittled by physicians, and complained of not being treated as professionals. Negative experiences with patients were related to verbal harassment and criticism, never to problems with image or their professional status. One explanation for this could be that these students and nurses had already chosen the profession, and therefore had already incorporated, often unconsciously, issues related to public image.

METHODOLOGICAL CONSIDERATIONS

Research design

The strength of this thesis is its longitudinal nature and the combination of different methodologies and approaches. The **literature review**, which was fundamental for our discussion paper (**Chapter 2**), provided an overview of factors that were related to the image and professional identity of nurses. The main outcomes of this review provided the starting point for the follow-up studies among students and nurses.

In the **cross-sectional study** we were able to explore student nurses' orientation and attitudes towards their future profession (**Chapter 3**). The **quantitative and qualitative follow-up studies** provided more insight into students' changing perceptions and their commitment to nursing (**Chapters 4 and 5**). Longitudinal data on students' perceptions of nursing are very scarce, therefore, the results of our study added value to the body of knowledge concerning nursing students' perceptions of nursing and their professional identity development. The transition from student to nurse has been described in various studies, but as far as we know, this is the first **diary study** that provides insight into novice nurses clinical experiences on a longitudinal basis (**Chapter 6**). To analyse which work experiences were related to emotional states and commitment, a repeated-measures within-subjects design was applied. The results of this follow-up **multilevel study** enhances our understanding of which work experiences have the greatest influence on the level of commitment of novice nurses (**Chapter 7**).

Strengths and limitations

The results of the studies included in this thesis should be interpreted with their strengths and limitations in mind. While these strengths and limitations were described in detail in the separate chapters of the thesis, a short synopsis of the main issues is presented below.

With regard to the studies of nursing students, one strength was the large sample size and high response rate (88%) at the first time point, which implies high representativeness and good generalizability. The longitudinal character, with four time points within a two-year period covering the same cohort of students, can also be considered a strength. By using a prospective design, we were able to explore students' perceptions of nursing at the beginning of the programme and throughout the first two years of their education. The strength of the qualitative follow-up study is that we not only included students who continued, but also interviewed students who withdrew from the programme.

Regarding the studies of novice nurses, one strength was the character of the data collection, with unstructured written diaries that focused on novice nurses' 'lived experiences'. Other strengths were the longitudinal design, the number of diaries that were collected ($n = 580$) and the mixed method approach, whereby, after completing the diaries, the nurses also completed a short survey measuring their emotional state and level of commitment to the profession.

In addition to these positive aspects, however, there are also some limitations. When we started this research, the Nursing Attitude Questionnaire (NAQ) was considered to be reliable and valid (Bolan & Grainger, 2009; Grainger & Bolan, 2006; Toth, Dobratz & Boni, 1998). However, during the research we discovered its limitations: no factor analysis had been performed to test its construct validity. Therefore, we reduced the NAQ items to a smaller number of coherent subscales and tested the factorial structure of the reduced instrument. The reliability of the subscales ranged from good to acceptable, implying that the validity and reliability of the revised instrument needs further psychometric testing.

Another limitation of that study was that only 123 students completed the survey each time, which might suggest that the perceptions captured in it are not representative of the whole study group. Moreover, the qualitative follow-up study, only included two students who had withdrawn from the programme. This was mainly due to the fact that students who dropped out were so disappointed that they were not willing to participate. Moreover, it was difficult to contact these students. Regarding nurses, conducting the research among eighteen novices in only one hospital can be considered a limitation.

IMPLICATIONS FOR EDUCATION AND CLINICAL PRACTICE

This thesis expands our knowledge of the reasons why students and nurses complete their educational programme and remain in the profession, respectively. In addition, factors that are related to these issues are discussed; for example, preparedness for practice and the importance of support and good relationships with peers and supervisors. With the growing shortage of and the increasing demand for well-educated nurses, policymakers and nurse managers must be informed about factors that contribute to students' and nurses' professional identity development, their commitment to the profession and their intention to remain in it.

Education

Universities of applied sciences in the Netherlands play a pivotal role in preparing student nurses for clinical practice by teaching them the competences that are needed for a successful transition. Despite these efforts, student nurses often feel unprepared during clinical placements, which sometimes leads to disappointment and attrition from the programme. Therefore, based on our findings, as described in Chapters 3, 4 and 5, we would like to make the following recommendations:

- 1) Knowledge of student perceptions of nursing from the very beginning may be vital to study success. One way to investigate this is to assess students before they begin their programme. Recruitment and selection interviews between teachers or experienced nurses and potential students may assist in better understanding early commitment to the profession.
- 2) We found that having some experience of nursing, indicating nursing as

the first choice of study and a desire to make a career in nursing were predictors of positive orientation and attitude towards nursing (Chapter 3). These issues could be discussed in the selection interviews.

- 3) Students will be better prepared for complex care situations if they are provided with opportunities to interact with professional nurses at an early stage in the education programme.
- 4) Better preparation of students for clinical practice can be attained by inviting experienced nurses to explain what the nursing profession actually entails.
- 5) To be aware of the occurrence of problems during clinical placements, teaching staff and mentors need to cooperate more closely and discuss the problems with the students, which will also assist in keeping them motivated.
- 6) Study success will be enhanced if teachers and mentors pay more attention to the individual perceptions and problems of first and second-year students, both in the classroom and during clinical placements.
- 7) Study success also depends on the competences of teachers. Therefore, it is crucial that they have recent experiences in clinical practice.
- 8) There is insufficient information about the reasons for drop-out. Exit interviews with all students who have withdrawn, or intend to withdraw, could provide important information about what could be done to help them remain in the programme.

Clinical practice

This thesis showed that novice nurses are confronted with complex and challenging workplace situations, which cause feelings of uncertainty, decreased job satisfaction and decreased commitment to the profession. The perceived support from their colleagues, supervisors and physicians is essential to help them deal with the high demands of clinical practice. The following recommendations, based on our findings as described in Chapters 6 and 7, are intended to enhance novice nurses' transition from student to professional staff nurse:

- 1) Experienced nurses, supervisors and physicians must take into account that novice nurses struggle with a gap between their theoretical knowledge and practical skills. More attention to this theory-practice gap may help novice nurses to grow in their profession and develop a strong professional identity and affective commitment.
- 2) It is essential that novice nurses are given the opportunity to discuss their experiences with their colleagues and supervisors and express their emotions, in order to deal with complex and existentially confronting workplace situations.

- 3) Novice nurses must be supported by colleagues and supervisors at the beginning of their working careers, with the aim of increasing work pleasure, job satisfaction, self-confidence and commitment to the profession. This could, for example, be achieved by implementing moments for peer intervision and informal supervision on a structural basis.
- 4) Intervision and supervision must be primarily focused on positive experiences, after which omissions and errors can be addressed.
- 5) To address disrespectful behaviour from patients, colleagues and physicians, there is a strong need for empowerment among novice nurses. One possibility would be to offer them courses in these areas.

In summary, in anticipation of nursing shortages, it is essential to retain students and nurses by preparing them well for the profession and ensuring a work environment that enhances professional development, satisfaction and commitment to the profession. Individual guidance, both at university and in practice, is necessary to achieve this. Offering praise or, in passing, asking students and young nurses how they are doing, does not take much time. In the long term, paying attention will be worth it because more people will remain in the profession. In addition, to increase recruitment and retention of students and nurses, policymakers, nursing organizations, nursing management, staff nurses, mentors and teachers should work in greater cooperation to achieve this.

FUTURE RESEARCH

Globally, the shortage of well-trained nurses and high turnover rates have become issues of importance. Hospitals and other healthcare institutions in the Netherlands are also struggling with deficiencies in nursing numbers. Therefore, future studies on the recruitment and retention of nursing students and newly graduated nurses should focus on gaining a deeper understanding of what motivates them to remain in an educational programme and/or the profession.

- 1) With regard to the recruitment of students and nurses, research on the image of nursing among secondary school students may provide important insights into the reasoning behind their potential career choice.
- 2) To discover what impedes students' identity development and, subsequently, their motivation to remain in a programme, an intervention study could be implemented that especially focuses on support. We suggest that teachers and mentors, individually or together, plan interviews with the students in the intervention group every three months during the first two years to discuss the students' emotional and cognitive needs. Every six months, the intervention group and a control group should complete questionnaires to explore whether there are differences in their perceptions of nursing.

- 3) Another option that might appeal more to young people would be sending them an App on a weekly or fortnightly basis to explore their needs.
- 4) The Nursing Orientation Tool and the Nursing Attitude Questionnaire, both of which we used in our studies, could be used for this purpose. However, to gain a more complete picture of students' perceptions of nursing in relation to commitment, it is advisable to develop and validate a suitable instrument. To obtain a good picture of the course of study, this research might also be done throughout the four-year study programme.
- 5) To gain information about how novice nurses' identity development is shaped after their first two years in practice, it is recommended that a follow-up study with the same cohort of nurses be performed.
- 6) To better guide young nurses in their transition process, it is essential to understand when they need support from daily mentors or supervisors. A monthly questionnaire that measures novice nurses' emotions and commitment could be used to assess when support is needed. Exceptional scores could be used as an indicator for supervisors to intervene.
- 7) Based on the experiences that emerged from the diaries, a questionnaire could be developed to explore which experiences predict retention, attrition or even burn-out among nurses. This questionnaire could be used in hospitals and other healthcare settings on a national or international level. In this way, policymakers, managers, educators will be provided with essential information that can assist them to increase nurse retention.
- 8) Besides recruitment and retention, it is recommendable to focus also on nurses' job satisfaction, well-being and opportunities to develop in their career, because these issues are strongly related to commitment.
- 9) Patients could also provide indispensable information about the care they received and perceived during their stay in the hospital. We suggest the development of a questionnaire or the use of an existing validated instrument to measure patient satisfaction with different aspects of nursing care. This may also make them aware of the work and responsibilities nurses have.
- 10) In terms of the Dutch discussion of different nursing levels, such as level 4 (in Dutch MBO) and level 6 (in Dutch HBO), it is advisable to explore issues related to perceptions, attitudes and image. Mutual respect and understanding may contribute to work pleasure and, ultimately, to commitment to the profession and the organization.

CONCLUDING REMARKS

This thesis showed that both students' and nurses' professional identity development is a diverse and continuing process, and is intertwined with many environmental characteristics. Challenging and existentially confronting experiences in clinical practice are strongly related to their well-being, job satisfaction and commitment to the profession. A variety of intrinsic (perseverance and a strong desire to become a nurse) and extrinsic (support from family, friends, colleagues) motivations contribute to students and nurses remaining in the profession. In particular, support in the clinical environment is crucial because a sense of belonging and the feeling of being accepted as part of a team has proved to be critical to the professional identification process and commitment of both students and novice nurses. Team spirit seems to be the essence of being a nurse. Together Each Achieves More!

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