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Factors Affecting the Belongingness Sense of Undergraduate Nursing Students towards Clinical Setting: A Qualitative Study

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ABSTRACT

Introduction: One of the most important needs of the students to work reliably in the clinical setting is the feeling of belongingness. Understanding and recognizing such a distinguishing feature among students can reduce their stress and tension. The current research aimed at studying the experiences of belongingness among nursing students in clinical settings.

Methods: In this conventional content analysis study, 12 nursing students were selected from Lorestan University of Medical Sciences by purposive method. In-depth interviews were employed to collect data. All interviews were recorded and transcribed for analyses. Data collection and analysis were carried out at the same time.

Results: The nature of belongingness with respect to clinical setting was expressed and classified in five themes and 11 subthemes. Five concepts (themes), which constituted the nature of nursing students' experiences, were as follows: moving in the direction of evolvement, attention to human and ethical values, professional integrity, achieving inner satisfaction, and the environment conformity with learner.

Conclusion: The issue of belongingness and its promotion are of utmost importance. The clinical staff, including head nurses and nurses, must perform their roles properly in providing supportive and facilitative clinical environment, positive and constructive interactions, and professional development contexts for students, so that they feel being accepted and valued.

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Introduction

Belongingness as an ambiguous concept,¹ has been defined from different perspectives in social sciences and psychology disciplines. In the educational textbooks, belongingness has been referred to as one of the most important needs of students for displaying proper performance in learning environments,²⁻⁴ and in the field of clinical education, the concept of belongingness is defined as a deeply personal and contextually mediated experience that evolves in response to the degree to which an

individual feels: (a) secure, accepted, valued and respected by a defined group, (b) connected with the group, and (c) that his/her values are in harmony with group's professional values.⁵

Belongingness is often viewed as an effective factor in the prediction of stress, satisfaction with clinical setting, self-esteem and self-directed learning,⁶ and finally valuable and unique element of motivation.⁷ The Students who experience a sense of belongingness in the educational settings are more active and motivated in educational activities^{8,9} whereas

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failing to have strong sense of belongingness is known to strongly affect students' learning by the impact it exerts on their functional ability and learning motivation.⁶

In fact, the higher-level needs of students may not be so important as long as the basic needs of students for physical and psychological security, as well as a sense of belongingness are met. That is to say, there would hardly be any place or opportunity to pay attention to such higher needs.¹⁰ Lack of sense of belongingness can lead to problems such as low self-esteem and satisfaction, anxiety,^{5,11-13} depression,^{5,11-14} high levels of stress^{5,13,14} and increased tension in clinical practice.¹¹

According to one of the nursing studies' results, professional belongingness is one of the important aspects of the students' clinical practice experience.¹⁵ Professional belongingness has been extracted as an important research category in Khademian and Sharif qualitative study, using students' clinical diaries analysis. The aim of their research was to explain the first clinical experiences of nursing students. From the students' perspective, acceptance by the nursing team, nurses and others as a group or professional members was mentioned as an important part of their clinical experience.¹⁵

During the recent decades, other investigations have been carried out, using various methodologies with different aims and on different populations. In some studies, the development of students' sense of belongingness in clinical settings has been studied.¹⁶⁻¹⁷ Sedgwick and Young studied the involvement of the students' sense of belongingness during the preceptorship using ethnography methodology. The results of a descriptive study, reported by Dabirifard *et al.*, found the belongingness level of Shahid Sadoughi University of Medical Sciences undergraduate nursing students to be at an average level.¹⁸

There have also been other studies whose primary objectives were to examine the factors influencing the students' belongingness.^{2,19}

Resop Reilly and Fitzpatrick, studied the relationship between belongingness and stress in doctor of nursing practice students.²⁰ In another study, the nurses' perception of belongingness was studied through the phenomenological method.²¹ Studies have been conducted in recent years indicate growing attention of nursing researches to this important subject; however, the belongingness experience is a deeply individualized experience and depends on the context.

Although this concept has been extensively investigated in nursing education across the globe, it has not prompted quite as many studies in Iran, and the few ones in this field have mainly been of quantitative¹⁸ or methodological types.²² However, using mere quantitative approaches may lead to unreal or insufficient data about factors affecting nursing students' sense of belongingness as the participants will have to fill in pre-designed questionnaires, while using a qualitative approach and conducting in-depth interviews with them can provide a complete understanding of their views about this concept, so a mixed-methods study seems most appropriate. Moreover, education has always been the focus of mixed-methods researches,²³ so an attempt has been made to address this important issue, using a mixed-methods approach. This approach can lead to more accurate data about belongingness by developing research scope and reviewing different aspects of the research²⁴ even though belongingness is admittedly a complex human phenomenon and understanding its dimensions from the nursing students' viewpoints is challenging. In response to these challenges, using different perspectives, different ways of knowing and understanding the phenomenon is necessary.² According to Sale *et al.*, mixed-methods researches are useful in some research areas, especially nursing, because phenomenon complexity requires data from different perspectives.²⁴ Thus, this study was conducted with the aim of exploring and explaining the experiences of nursing students with this concept in the

clinical setting.

Materials and methods

This study is part of a mixed-method research. In the qualitative section, conventional content analysis was used due to the limited literature about the phenomenon. After obtaining informed consent and giving an explanation about the study and its objectives, 12 junior and senior nursing students were selected from Lorestan University of Medical Sciences through purposive sampling with maximum variation approach (in terms of age, sex, marital status, education level and housing).

In-depth, semi-structured interviews were used for data gathering. The interview guideline included some questions such as: "What does "belongingness to clinical setting" mean to you?" "Can you tell us your experiences when you felt a sense of belongingness?" "Can you tell us your experiences when you did not feel the sense of belongingness?" Probing questions was also used such as: "could you please explain it more? Please continue with describing an objective experience of yours".

All interviews were conducted by one interviewer (the second author). The interviews lasted 25 to 90 minutes and were performed from February to December in 2013.

Based on the participants' request, the interviews were conducted in the clinical education department of Shohadaye Ashayer hospital (in Khoramabad city) where the internship was held. All interviews were tape-recorded and transcribed for further analyses.

Data saturation was reached after 14 interviews. Two of the participants were interviewed more than once. Two authors (the first and the second ones) analyzed all the interviews, and a consensus was reached with regard to the initial codes, categories, and themes. Data collection and analysis was carried out at the same time by the five-step Lundman & Graneheim method.^{25,26}

The transcribed interviews were reviewed several times. The initial codes were extracted, integrated and were classified on the basis of similarities and constant comparison, and

finally the concept and content lies within the data were extracted.²⁶ All codes were assessed, analyzed and classified by the research team until appropriate codes, categories, and themes emerged. Data credibility was achieved through activities such as member checking, allocating enough time for data collection, prolonged engagement and conducting the interviews at the participants' preferred locations. Confirm ability was obtained through sending interview transcriptions in addition codes and emerged categories for external checking and reviewing during the analysis process. Dependability was achieved through transcribing the interviews as soon as possible and providing the same opportunity for all participants.²⁷ Clear description of the context, participants' characteristics, data gathering methods, analysis process and presenting findings with participants' quotes were provided to increase data transferability.²⁶

Results

Participants in the study were 22 to 28 years old and included 8 female and 4 male students. Ten of them were single and 2 married. With regard to residence, 7 resided in the campus dormitories and 5 out of campus. Seven reported a background of part time jobs. Close relatives of 2 participants were nurses. A total of 788 initial codes were extracted. The nature of belongingness to the clinical environment was classified and described under 5 themes and 11 subthemes (Table 1).

1. Moving Towards Evolvment

1-1. Obtaining professional competence

This category had subcategories of achieving professional competence, independence in the performance, having confidence, good performance and accountability. In their descriptions, nursing students emphasized the need for personal and professional evolvment. Some stressed on achieving professional competence. The following quotes explain why they laid so much emphasis on such a subject:

Table 1. Themes and subthemes extracted from the analysis of the interviews

Themes
Subthemes
Moving towards evolvment
Obtaining professional competence
Evolvment of professional identity
Attention to human and ethical values
Preserving human dignity
Commitment to moral and religious principles
Professional integrity
Having a sense of sociality
Convergence
Achieving inner satisfaction
Achieving self-gratification
Having enthusiasm
Environment conformity with learner
Adapting to the environment
Safe and reassuring environment
Colleagues conformity

"Among the factors that affect my feeling of belongingness to the environment is you have to be pretty good at both theory and practice, and that you have the necessary self-confidence that you know how to handle things here and there. Many students have really picked up the knack of things. But they are so different; some students do not even have a good enough theoretical background, but are good at practice. This would make them stand out of the crowd. Well, those who, besides practice, have strong theoretical knowledge, are so much accepted."(P11)

Some of the students emphasized on the independence in action and wanted to have independent performance:

"In the outpatient emergency ward we worked independently. No one interfered with our job. We had the feeling of acceptability, independence, or at least the feeling that we can do something useful."(P9)

1-2. Evolvment of professional identity

The second category of moving towards evolvment theme was "evolvment of professional identity". A number of students had difficulty in accepting their professional identity. They were uncertain in accepting nursing as a profession.

Rejection of nursing profession was expressed with expressions such as unsuitable social base, vagueness in job description, misconception of nursing profession by the society, and so on. With regard to the feeling of non-belonging to the environment, a participant pointed to the non-conformity of her abilities with the nursing profession and said:

"What makes me feel that I do not belong to this environment is this, it cannot meet my psychological needs. I know my talents and when I try to adapt them to the nursing profession, I see that nursing does not satisfy me, nor does it fulfill my needs."(P1)

In view of most students, transfer of theoretical knowledge to practice does not take place in their field. They pointed to the significance of practice which is based on theory as prerequisites of a professional performance, as well as a of feeling of belongingness which would emerge afterwards. Also, they recounted their previous experiences of being mocked by the staff in the medical ward when they had tried to implement theory in practice:

"If you were to go and work with a group ... and you were supposed to act in accordance with

what you have studied, you would run into conflicts with the nurses already in the ward. You say you are bound to act according to what you have studied, and you want to act likewise when dealing with the patients, too the staff, however, take you away and do not do let you do what you want. On such occasions, you find it really hard to get along with these people.”(P1)

It was important for the students to know their job description. The following example describes the vagueness of professional duties from the point of view of one of the participants:

“My job description is important to me. That is what exactly I am supposed to do. I think if you asked nurses what your responsibilities are, you would get quite different answers. You inevitably get confused; you don’t even know what your exact what your job is.” (P6)

Some students referred to the viewpoint of nurses and or the view of the society toward the nursing profession as influential factors affecting sense of belongingness. In their opinion, the society does not have a proper understanding of the nursing profession. The students stressed on this issue, using expressions such as “the low status of nurses with regard to solving problems,” and “asking a nurse to do what secretaries normally do.”

Also, the students emphasized on the transparency of their professional identity. The students’ statements in this regard were as follows:

“It would have been much better, if the students recognized the philosophy of this discipline. Actually, the nursing students compare themselves with the students of medicine. They say that medical students study heart diseases, but they interpret ECG (Electrocardiogram), what about us then? If we had worked on the nature of this discipline (nursing), our sense of belongingness could be better.”(P3)

2. Attention to Human and Ethical Values

2-1. Preserving human dignity

One of the effective elements of clinical education philosophy in the field of belongingness is the need for creating an atmosphere of dignity and mutual respect.

The students emphasized on this issue by referring to the need for mutual and genuine respect, feeling of being worthy, no taking advantage of students, and the need for fairness. One of the participants had this to say on the matter:

“Well, the mutual respect we receive from our colleagues and patient’s companions affects our feelings of belongingness... Certainly with regard to the environment that you are in, you’d like everything to run smoothly in your environment, and you really would like to work in such an environment. However, when you see that others do not respect you, you feel fed up with that environment, and certainly your sense of belongingness fades away.”(P6)

Also, all students refer to the feeling of worthiness. The following example describes this issue:

“If I feel that I am valuable for the environment and my colleagues, or the patients, you can be sure that I, too, would have that feeling of belongingness.”(P9)

Some of the participants attributed the absence of sense of belongingness to the abuse of the students by their colleagues. One of the participants referred to this issue and said:

“You go to the ward and they ask you to do all work. On one occasion, the nurse was going to take an ECG. She wanted me to drag the trolley and take it where she wanted and connect it.”(P11)

Also, the statements of the participants indicated that they want fairness. One of them believed that the staff discriminated between nursing students and medical students and despite similarity of the two professions, the staff often misbehaved toward the nursing students:

“The head nurse in the Internal Medicine Ward was very bad tempered. When we entered that ward, we were a group of 5, not even uttering a word and were very quiet. However, when the medical interns arrived, and made a lot of noise, the head nurse did not say a word to them.” (P9)

2-2. Commitment to moral and religious principles

The sub-categories of ethics-based

performance and gender-based care constitute the "commitment to moral and religious principles" theme. Many participants including both male and female students emphasized the observance of moral and religious issues. According to them, the sense of belonging and ethics were two intertwined and interdependent issues. A unique feature of some cultures, especially Islamic culture, is to provide medical care based on gender. With regard to providing such care, a 5th semester male nursing student stated:

"In some of the medical wards whose patients were female, when I went to those wards, I did not feel a strong sense of belongingness." (P5)

A 5th semester female nursing student, referring to the absence of belongingness sense to male medical wards, stated:

"For example, the orthopedic ward in which most patients are male, I do not like to work in this ward at all. Taking vital signs by using gloves is difficult for me." (P10)

3. Professional integrity

To establish and maintain professional integrity was among the expectations of all students.

3-1. Having a sense of sociality

Some students emphasized "becoming us". In this respect, one of the participants (a seventh semester female student) said:

"For example, a group that I belong to, I mean we all say the same thing in the group, and we all do the same work." (P3)

They emphasized on mutual support and acceptance by pointing to issues such as "we are all one group", "we belong to one family." Participant No. 9 by describing her situation in Urology Ward stated the mutual acquaintance between herself and the environment as the reason of belongingness to that ward:

"But here, I have a feeling, a positive feeling. This positive feeling or belongingness is very important to me. I prefer to be in my own ward, because I am used to them, and they with me." (P9)

Many participants in describing their feeling of belongingness to the environment used expressions such as "being a member of a team" or "being a part of the medical ward." In other words, they pointed to the feeling of sociality.

All students emphasized on the importance of comprehensive acceptance. From their point of view, members of a health team should be receptive toward students. When the students enter the clinical setting, they expect to be accepted and in the meantime, they should be receptive toward the clinical environment, too. As participant 3 noted:

"Belongingness should be mutual, not only should I consider myself a part of them, but they should also accept me, and consider me a part of the team". But it does not work out in this way (P3)

The participants in this study believed that adopting a negative view toward the students and not accepting him or her as an efficient source are serious obstacles in the way of their feeling of belongingness to the environment. The following quote describes this issue:

"When medical staff come across the nursing students, they generally don't treat them as respectable students. Instead, they often look at them as a bunch of surplus forces that have come there and are burden on them." (An eighth semester male student remarked). (P1)

3-2. Convergence

From the point of view of some students, the cordiality between them and the clinical personnel was important. In their belief, by reducing the distance between them and consequently formation of close relations, the feeling of being part of the group would be formed, and conversely, the gap between them and the clinical personnel strengthens the feeling that they are disconnected from the nursing personnel and do not belong to them.

"The sincerity, which exists between the student and the medical ward, is very important. The fact that you go to the other side of the nursing station is important. Well, when I go to the

other side of the nursing station, I feel that I am part of the personnel, however, when you are on this side, I feel that I am detached from them. They are different from us. We are not like them.”(P11)

4. Achieving Inner Satisfaction

This theme has subthemes of “achieving self-gratification” and ‘having enthusiasm”.

4-1. Achieving self-gratification

When the participants talked about belongingness, their descriptions were indicative of their seeking satisfaction and as a consequence developing the feeling of belongingness. Self-gratification is achieved when the students get satisfied and experience a productive and efficient presence in the clinical arena. Among other factors that may pave the way for the students to achieve inner satisfaction one might refer to enthusiasm resulting from professional motivation, a willingness to be present at work, and an attachment to the environment. The opinions of the participants all seemed to pointing to the importance of having a “feeling of satisfaction”. The following statement explains this issue:

“I feel i belong when I care for my patients well, and my patients are pleased and grateful. They become so kind with me, and I say a simple smile will do.”(P8)

Communication based on the patient’s needs also indicates that students seek satisfaction. In this regard, they pointed out to the issue that a feeling of belongingness develops after appearing on the patient’s side and showing empathy toward the patient. In this regard, a participant stated:

“I have the highest sense of belongingness when I am present at the bedside of the patient and I can establish a good verbal, sympathetic, etc. ... communication with my patients.”(P7)

All students underscored the need for efficient presence. In this regard, one of the participants said:

“What belongingness means is now that we are already part of a group, we must be able to accomplish certain things by our presence, and

that our presence should make a difference to the system and group.”(P6)

Most of the students mentioned the effect of motivation on the feeling of belongingness:

“Belongingness to the internship means that a nursing student has a distinct and good feeling toward it, i.e. he or she enters the work environment with full motivation. As one’s motivation declines, so does their feeling of belongingness.”(P4)

4-2. Having enthusiasm

Many students describing their experiences about the sense of belongingness towards the clinical setting emphasized having enthusiasm, motivation and interest in the workplace. Attending at work willingly and attachment to the work environment were among subcategories of the “having enthusiasm” category. In this regard, a nursing student said:

“Belongingness toward internship means that the student enters the internship with enthusiasm and motivation. There, the student really enjoys working in internship at the assigned hour.”(P4)

Another student considered belongingness to the environment as the outcome of having an interest in that ward, and said:

“To whatever ward I go, the cardiology ward for instance, I feel that I belong to that ward. Generally, I feel that I belong to the cardiology ward. Perhaps, because I am more interested in that ward, my feeling of belongingness is toward the cardiology ward.”(P5)

Also, in view of the students, a context that provides learning humane and ethical aspects of the work place is an environment leading to the feeling of belongingness. The following quote explains this subject:

“Belongingness toward clinical setting means that we have a feeling that in here we can learn new and good things and increase our experiences. Then, you feel a sense of belongingness.”(P4)

5. Environment Conformity with Learner

The last theme about the experiences of students' belongingness to the clinical setting was "environmental conformity with

learners". In the line of achieving belongingness, an urgent need was felt to strengthen the compatibility of the students with the environment, to establish a favorable and safe clinical atmosphere, and to improve interpersonal interactions. This theme covers 3 subthemes: "adapting to the environment", "safe and reassuring environment", and "colleague's conformity".

5-1. Adapting to the environment

A number of nursing students referred to the knowledge of the environment as a pre-requisite for belongingness. In this respect, a student remarked:

"A student feels a sense of belongingness toward a particular medical environment or ward when he or she has sufficient knowledge of that environment, when you get the routine process in that ward."(P9)

5-2. Safe and reassuring environment

From the students' perspective, a reassuring atmosphere is of high importance. One of the students remarked:

"I feel I belong when there is safety and tranquility. Say, when you go to a ward, feel secure that they are not going to hurt you ... your patient does not want to irritate you, or behave badly toward you". (P10)

5-3. Colleagues' conformity

The social network of colleagues was also considered important. The students believed that their peers affect their feeling of belongingness. In this regard, a student said:

"I like to work in this ward, but my classmates cause me not to do any work. For example, they mock me, and lower my interests."(P6)

The clinical staff were also deemed important. Some of the nursing students referred to the role model the personnel set and considered them as a model for teaching professional commitment.

A student said: *"When I see how respectfully the personnel treat the patients, tidy up the patient's bed, establish rapport with the patient, I say to myself, I wish I could act likewise, and I*

really feel that if one day I joined this ward, it would be my duty to be like them, as well. The more you see good behavior, the stronger your sense of belonging to the environment would grow."(P7)

The role of the head nurse was also considered a key factor. In this respect, one of the participants believed:

"In a clinical setting the head nurse has the final say". (P3)

Another student referred to the prominent role of the instructor:

"I am talking about training. I stress the role of the instructor during training. I don't have anything to do with the personnel."(P5)

Discussion

The first theme derived from the statements of the nursing students was "moving in the direction of evolvment". All students emphasized the need for professionalism.

Professionalism as one of the basic concepts of nursing²⁸ was discussed as an important factor in belongingness of the students to the environment. Also, based on the experiences of the participants, belongingness has a significant role in the development of professional identity.

Evolvment of professional identity as one of the important concerns of nursing education²⁹ has played a prominent role in conducting different functions in clinical performance.³⁰ It consists of different factors,²⁹ and in the present study, the participants acknowledged the significance of belongingness as one of the important pillars for professional identity. The status and professional worthiness were also considered important. Also in the Levett-Jones study, the perceptions with regard to nursing, were discussed as one of the individual factors affecting belongingness.²

The students believed that their perception of nursing affects the clinical environment and the strategies used for their acceptance. Although, in the present study, others' perceptions (nurses, patients, and in general, the society) with regard to nursing appeared to be equally important.

The second theme underlined by the students is attention to human and ethical values. The students emphasized the need for mutual respect in its real sense, the students feeling worthy, the staff refraining from abusing the students and being fair in their conducts. Whereas, to improve learning, the presence of a friendly clinical environment is necessary and the students should be treated fairly, and colleagues should not have unreasonable and improper or excessive expectations from them.³¹ Mistreatment of the students was considered an obstacle in the way of a sense of belongingness. Confirming this was a study conducted by Levett-Jones, in which the students pointed out recounted occasions when too many responsibilities had been assigned to them.² Likewise, in Kim's research, students' dissatisfaction was reported as a result of opportunistic attitude of the colleagues.³²

According to Buant et al., nurses and students should show sympathy toward each other. The environment should be strengthened with regard to psychology. Nurses should support the students and treat them with respect while observing the students' dignity.³³ An atmosphere of learning accompanied by respect toward the students reinforces the in-depth approach toward learning. In general, the studies conducted in the field of nursing students' perception of the clinical setting indicate that nurses should welcome the nursing students and treat them with respect.³⁴ Also, based on the experiences of the participants, the feeling of worthiness affects the students' feeling of belongingness to the clinical environment.

One of the important themes also emphasized by the participants in the Levett-Jones research was the theme of "having a worthy and credible role", which is consistent with the findings of the present study.²

Ethical conduct and providing gender-based care was also a new concept which is significant in the nursing students'

experiences on the feeling of belongingness is considered as one of the principles of nursing care; while in other studies professional ethics has been mentioned as one of the important elements of professionalism.³⁵ In the present study, it is referred to as one of the concepts related to belongingness. In Iran, the law mandating the compatibility of the patient-staff gender for performing medical examination, hospitalization, treatment, and diagnostic examinations and services has been ratified. This issue not only belongs to Islamic countries, but also, in a way, to western countries or a country like Japan where an option is provided for the patient to choose the gender of his or her physician and nurse. Therefore, the compatibility of medical affairs with religious standards was discussed as one of the important dimensions of belongingness. The findings of several studies which are in line with those of our study, indicate that one of the challenges faced by Iranian female students is the challenge of caring for strangers (patients of the opposite sex).^{15,36} The results of the learning experiences by male students facing female patients in obstetrics and gynecology wards indicated that the clinics and maternity hospital were two environments which put male students at the position of having to deal with the problem related to the patients. The main theme of that study was "facing with the females' resistance".³⁶

The other aspect of nursing students' belongingness to the clinical environment was professional integrity.

This theme, besides its implication to socialization of the students, directly indicates the importance of acceptance of the students. In fact, entering a team and taking up responsibilities as a nurse is another concept that has significance in students' experiences of belongingness. Based on their statements, being accepted by their colleagues is considered important. According to Levett-Jones students need to be accepted as a member of the group.²

They need to be approved by members of the nursing team.³⁷ In another study, being accepted as a member of the care community is one of the expectations of the participants.³⁸ The category of “being a member of a group” which was found in this study was similar to the theme in the Levett-Jones study.² Findings of McCoy *et al.*, showed that for a sense of belongingness, it is essential to treat student like a member of the nursing team.¹⁰

Levett-Jones, states that the students’ main motivation in the early days of any traineeship was to find their place in the environment, to become acquainted with the routine procedure and the clinical staff, with the aim of belonging to the nursing team and subsequently the stage of integration into that environment or the feeling that they have become members of the nursing team. All of these activities help students to solidify their knowledge and skills by welcoming the new learning opportunities.³⁶

“To become ‘we’”, and “mutual support” of individuals for each other, were also among important sub-categories of the present study. We can refer to the theme “challenge and support” as one of the themes in the qualitative research of Levett-Jones which was consistent with the mentioned category.² By support, we provide a reassuring and safe environment in a way that students would have a feeling of security, worthiness, and acceptance.

Another important experience of the students was “conformity with the environment.” The students’ experiences were indicative of the significance of understanding the environment. When, the students enter a new environment, their efforts are directed toward acquaintance with that environment. According to Levett-Jones and Lathlean, paving the way for comprehensive, and in the meantime brief, acquaintance of the student with the medical wards is necessary in the initial days.³⁹

Also, the participants emphasized the importance of the clinical atmosphere and the quality of interpersonal relations. The results of another research showed that the students’ belongingness is affected by various elements such as interpersonal interactions and the atmosphere of the clinical environment, which explains the results of the present research.¹⁶

One of the issues, referred to in this review, was the students’ need to have security in the environment. In other studies, similar findings are observed. As the interviews with students conducted by Levett-Jones supported the findings of the present study.⁴⁰ Levett-Jones and Lathlean, after conducting a qualitative research set forth a five-level framework of safety and security, belongingness and feeling accepted, positive self-concept, learning, and competence. Based on this framework, if the students’ needs with regard to physical and psychological safety are not met, the needs of higher levels are of lesser importance.³ According to McCoy *et al.*, when the students’ needs for safety at work environment are met, they will be able to reach other levels of their needs.¹⁰

The quality of interpersonal interactions is another issue related to belongingness, which was consistent with the results of the research by Sedgwick and Young, and Levett-Jones.^{16,40} In fact, the feeling of belongingness of the students is influenced by the quality of interpersonal interactions of the students with their nursing colleagues and the strength of acceptance and support that is being expressed by nurses. If nurses respect the students and welcome them, the students’ sense of belongingness will be facilitated.¹⁰

In the present study, the social network of nurses and their support was considered important. In the research by Karimi *et al.*, which was conducted with the aim of examining the role of hidden curriculum on the professional socialization of the students, “being affected by different sources,” including clinical educators,

nurses, doctors, peers and patients, was one of the main themes of the study.³⁵ Buant et al., citing Chang wrote: "The relations between the students, peers, educators, nurses, and other members of the health care team in providing a positive and supportive environment are of great significance."^{33,41}

The interpersonal relationship between students and nurses, alone has the most important effect on the students' feeling of belongingness.^{16,40} Findings of studies conducted by McCoy et al., also indicated that the relations between students and the personnel were important for belongingness.¹⁰

In clinical environments, nurses are often the role models who can have positive and negative effects on other people's behavior and attitude.³⁴ Students are also after suitable models to adopt their values, insights, and behaviors.⁴² When the students in the company of experienced nurses observe their behavior and performance, it can help their acceptance of nursing profession and reinforce their feeling of belongingness.²⁸ Also, the recent research has focused extensively on the role of nursing educators.³³ In clinical learning process, the role of clinical educator is always emphasized and of great importance. According to the statements of the participants, their peers are also effective on the subject of belongingness.

The result of other studies confirms the current study and the significant role of the nursing students' peers in the learning issue. In the research conducted by Karimi et al., the students' peers have been mentioned as one of the sources of the students' learning through the hidden curriculum.³⁵ Directors of clinical wards are also important. The head nurses who welcome and support the students, strengthen the students' perception of being accepted as members of the nursing team and affects the perception of personnel toward the students.⁴⁰

In this study, "achieving inner satisfaction" was looked at from two aspects of "reaching self-satisfaction" and "having enthusiasm". The richness of the clinical arena and optimal use of learning opportunities by students were among the issues that provided satisfaction for the participants. Findings by Peyravi et al., with regard to the learning experiences of nursing and medical students also confirmed the findings of the current study.

According to the students, the clinical environment was full of new experiences; being useful and learning helpful things were among positive and attractive experiences of the students. Having enthusiasm was another subtheme of the above-mentioned theme.⁴³ Levett-Jones et al., in their study about the consequences of belongingness found the "enjoyment from work or clinical internship" theme. In this study, many students provided examples with regard to the feeling of happiness and joy in the clinical environment as the result of having felt a sense of belongingness.² Based on the students' experiences, one of the primary sources of enjoyment was their interest in the clinical environment, in a way that many of them express interest and attachment to the environment as the prerequisite for belongingness to the environment.

Conclusion

The present study presents this insight to the clinical personnel that the subject of belongingness and its promotion is of great significance. Also, it enables them to perform their key role in creating a supportive and facilitative clinical environment, having positive interactions, and providing grounds for students' socialization, so that the students would have a feeling of worthiness.

Furthermore, the results of the current study can be important for nursing directors too, because identifying and explaining the nursing students'

experiences and appreciating the true meaning of this word can affect the ability of nursing directors for promoting the students' feeling of belongingness to the clinical environment and consequently the execution of strategies relevant to this experience to prevent them from changing their academic course and weakening the students' motivation as well as preventing nurses from leaving their profession early in their career and reducing the present statistics on nurses abandoning their profession.

In the end, it is suggested that researchers pay attention to the belongingness promotion strategies as an important and key issue in clinical nursing education. Also limiting interviews to nursing students was the limitation of present study, while conducting interviews with other people, for example, clinical staff and nursing instructors can provide us deeper insights about this phenomenon.

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Ethical issues

None to be declared.

Conflict of interest

The authors declare no conflict of interest in this study.

References

1. Nolan LC. Dimensions of aging and belonging for the older person and the

effects of ageism. *Journal of Public Law* 2011; 25 (2): 317-39.

2. Levett-Jones T. Belongingness: a pivotal precursor to optimizing the learning of nursing students in the clinical environment [dissertation]. Australia: School of Nursing and Midwifery, University of Newcastle; 2007.
3. Levett-Jones T, Lathlean J. Belongingness: a prerequisite for nursing students' clinical nursing. *Nurse Education in Practice* 2008; 8 (2): 103-11. doi: [10.1016/j.nepr.2007.04.003](https://doi.org/10.1016/j.nepr.2007.04.003)
4. Gray MA, Conlon M, Blue T. CAMHS hub and spoke practice placement demonstration project. Final project report for NHS education for Scotland [Internet]. 2011 [cited 2015 Jun 08]. Edinburgh: Edinburgh Napier University. Available from: http://www.nes.scot.nhs.uk/media/510818/edinburgh_napier_university_final_report.pdf
5. Levett-Jones T, Lathlean J, Maguire J, McMillan M. Belongingness: a critique of the concept and implication for nursing education. *Nurse Education Today* 2007; 27 (3): 210-18. doi: [10.1016/j.nedt.2006.05.001](https://doi.org/10.1016/j.nedt.2006.05.001).
6. Kim M, Park SY. Factors affecting the self-directed learning of students at clinical practice course for advanced practice nurse. *Asian Nurs Res (Korean Soc Nurs Sci)* 2011; 5 (1): 48-51. doi: [10.1016/S1976-1317\(11\)60013-3](https://doi.org/10.1016/S1976-1317(11)60013-3).
7. Thompson H. The need to belong and student grades: is there a correlation? [Internet], [master's thesis]. New York: The College at Brockport, State University of New York College; 2007. Available from: http://digitalcommons.brockport.edu/cgi/viewcontent.cgi?article=1104&context=edc_theses
8. Osterman KF. Students' need for belonging in the school community. *Review of Educational Research* 2000; 70 (3): 323-67. doi: [10.3102/00346543070003323](https://doi.org/10.3102/00346543070003323).
9. Furrer C, Skinner E. Sense of relatedness

- as a factor in children's academic engagement and performance. *Journal of Educational Psychology* 2003; 95 (1): 148-62. doi: [10.1037/0022-0663.95.1.148](https://doi.org/10.1037/0022-0663.95.1.148).
10. McCoy MA, Levett-Jones T, Pitt V. Development and psychometric testing of the ascent to competence scale. *Nurse Educ Today* 2013; 33 (1): 15-23. doi: [10.1016/j.nedt.2011.11.003](https://doi.org/10.1016/j.nedt.2011.11.003).
 11. McLaren S1, Gomez R, Bailey M, Van Der Horst RK. The association of depression and sense of belonging with suicidal ideation among older adults: applicability of resiliency models. *Suicide Life Threat Behav* 2007; 37 (1): 89-102. doi: [10.1521/suli.2007.37.1.89](https://doi.org/10.1521/suli.2007.37.1.89)
 12. Temperato J. Belongingness, school sense of community, and loneliness: predictors of institutional mission and values [master's thesis]. Chicago, IL: College of Liberal Arts & Social Sciences, DePaul University; 2010.
 13. Malone GP, Pillow DR, Osman A. The general belongingness scale (GBS): assessing achieve belongingness. *Personality and Individual Differences* 2012; 52 (3): 311-16. doi: [10.1016/j.paid.2011.10.027](https://doi.org/10.1016/j.paid.2011.10.027).
 14. Choenarom C, Williams RA, Hagerty BM. The role of sense of belonging and social support on stress and depression in individuals with depression. *Archives of Psychiatric Nursing* 2005; 19 (1): 18-29. doi: [10.1016/j.apnu.2004.11.003](https://doi.org/10.1016/j.apnu.2004.11.003).
 15. Khademian Z, Sharif F. Nursing students' initial clinical experiences. *Iranian Journal of Nursing Research* 2012; 7 (26): 23-33. (Persian)
 16. Sedgwick MG, Yonge O. 'We're it', 'we're a team', 'we're family' means a sense of belonging. *The International Electronic Journal of Rural and Remote Health* 2008; 8: 1-12.
 17. Kern A, Montgomery Ph, Mossey Sh, Bailey P. Undergraduate nursing students' belongingness in clinical learning environments: Constructivist grounded theory. *J Nurs Educ Pract* 2013; 4 (3): 133. doi: [10.5430/jnep.v4n3p133](https://doi.org/10.5430/jnep.v4n3p133).
 18. Dabirifard M, Hasanvand S, Salmani N. Evaluation level of clinical belongingness in bachelor nursing students. *Education Strategies in Medical Sciences* 2016; 9 (1): 90-6.
 19. Sedgwick MG, Rougeau J. Points of tension: a qualitative descriptive study of significant events that influence undergraduate nursing students' sense of belonging. *Rural and Remote Health* 2010; 10 (4), 1-2.
 20. Reilly JE, Fitzpatrick JJ. Perceived stress and sense of belonging in doctor of nursing practice students. *Journal of Professional Nursing* 2009; 25 (2): 81-6. doi: [10.1016/j.profnurs.2008.10.002](https://doi.org/10.1016/j.profnurs.2008.10.002).
 21. Paton Sh. Exploring belongingness in nursing practice: a phenomenological study [dissertation]. Arizona: University of Phoenix.
 22. Ashktorab T, Hasanvand S, Seyedfatemi NF, Levett-Jones T, Pournia Y. Psychometric testing of the Persian version of the belongingness scale-clinical placement experience. *Nurse Education Today* 2015; 35 (3): 439-43. doi: [10.1016/j.nedt.2014.11.006](https://doi.org/10.1016/j.nedt.2014.11.006).
 23. De Lisle J. The benefits and challenges of mixing methods and methodologies: Lessons learnt from implementing qualitatively led mixed methods research designs in Trinidad and Tobago. *Caribbean Curriculum* 2011; 18 (1): 87-120.
 24. Pool R, Montgomery CM, Morar NS, Mweemba O, Ssali A, Gafos M, Lees S, Stadler J, Crook A, Nunn A, Hayes R. A mixed methods and triangulation model for increasing the accuracy of adherence and sexual behavior data: the microbicides development programme. *PloS One* 2010; 5 (7): e11600. doi: [10.1371/journal.pone.0011600](https://doi.org/10.1371/journal.pone.0011600)
 25. Sale JE, Lohfeld LH, Brazil K. Revisiting the quantitative-qualitative debate: Implications for mixed-methods research.

- Quality and Quantity 2002; 36 (1): 43-53. doi: [10.1023/A:1014301607592](https://doi.org/10.1023/A:1014301607592).
26. Graneheim UH, Lundman B. Qualitative content analysis in nursing research: concepts, procedures and measures to achieve trustworthiness. *Nurse Education Today* 2004; 24 (2): 105-12. doi: [10.1016/j.nedt.2003.10.001](https://doi.org/10.1016/j.nedt.2003.10.001).
27. Polit DF, Beck ChT. *Nursing research: generating and assessing evidence for nursing practice*. 9th ed. Philadelphia: Lippincott Williams & Wilkins; 2012.
28. Zarshenas L, Sharif F, Molazem Z, Khayyer M, Zare N, Ebadi A. Professional socialization in nursing: a qualitative content analysis. *Iran J Nurs Midwifery Res* 2014; 19 (4): 432-36.
29. Shahidi LH, Vahidi M, Mahram B, Areshtanab HN, Zarghi N. Professional identity development in nursing students: Eisner's evaluation model. *Research and Development in Medical Education* 2014; 3 (1): 37-43. doi: [10.5681/rdme.2014.009](https://doi.org/10.5681/rdme.2014.009).
30. Cook TH, Gilmer MJ, Bess CJ. Beginning students' definitions of nursing: an inductive framework of professional identity. *Journal of Nursing Education* 2003; 42 (7): 311-7.
31. Nelwatti, McKenna L, Plummer V. Indonesian student nurses' perceptions of stress in clinical learning: a phenomenological study. *J Nurs Educ Pract* 2013; 3 (5): 56-65.
32. Kim M. Experience of belongingness at apprentice course for advanced practice nurse: learning-connected process. *Korean Journal of Adult Nursing* 2010; 22 (4): 395-407.
33. Buante SM, Gabato MG, Galla MR, Maneje S, Paje JC, Pradia LD, Paclijan RR. Experiences of student nurses' interaction with the staff nurses during clinical duty. *Advancing Nursing Research* 2012; 4 (1).
34. Hathorn D, Machtmes K, Tillman K. The lived experience of nurses working with student nurses in the clinical environment. *The Qualitative Report* 2009; 14 (2): 227-44.
35. Karimi Z, Ashktorab T, Mohammadi E, Abedi HA. Using the hidden curriculum to teach professionalism in nursing students. *Iran Red Crescent Med J* 2014; 16 (3): 1-7.
36. Cotter D, Turner MJ, McAuliffe FM, Higgins MF. Medical students learning experiences of the labour ward: a qualitative research study. *European Eur J Obstet Gynecol Reprod Biol* 2016; 206: 204-7.
37. Caka EM, Lekalakala-Mokgele S. The South African military nursing college pupil enrolled nurses' experiences of the clinical learning environment. *Health SA Gesond Heid* 2013; 18 (1): 1-11. doi: [10.4102/hsag.v18i1.611](https://doi.org/10.4102/hsag.v18i1.611).
38. Papastavrour E, Dimitriadou M, Tsangari H, Andreou Ch. Nursing students' satisfaction of the clinical learning environment: a research study. *BMC Nursing* 2016; 15: 44. doi: [10.1186/s12912-016-0164-4](https://doi.org/10.1186/s12912-016-0164-4).
39. Levett-Jones T, Lathlean J. Don't rock the boat: nursing students' experiences of conformity and compliance. *Nurse Education Today* 2009; 29 (3): 342-349. doi: [10.1016/j.nedt.2008.10.009](https://doi.org/10.1016/j.nedt.2008.10.009).
40. Levett-Jones T, Lathlean J, Higgins I, McMillan M. Staff- student relationships and their impact on nursing students' belongingness and learning. *Journal of Advanced Nursing* 2009; 65 (2): 316-24. doi: [10.1111/j.1365-2648.2008.04865.x](https://doi.org/10.1111/j.1365-2648.2008.04865.x).
41. Chang HH, Chuang Sh. Social capital and individual motivations on knowledge sharing: participant involvement as a moderator. *Information & Management* 2011; 48 (1): 9-18. doi: [10.1016/j.im.2010.11.001](https://doi.org/10.1016/j.im.2010.11.001)
42. Altiok HO, Üstün B. Meaning of professionalism in nursing students. *American International Journal of Social Science* 2014; 3 (6): 48-60.
43. Peyravi H, Yadavar-Nikravesh M, Oskouie SF. Clinical experience of nursing students: a qualitative research

[dissertation]. Tehran: Iran University of

Medical Sciences; 2005. (Persian)