Factors Affecting Learning Atmosphere among Pediatric Nursing Students at Technical Institutes of Nursing

Zeinab Magdy Mahmoud Ahmed*, Iman Ibrahim Abd Al Moniem**, Madiha Amin Morsy***

*B .SC, Nursing, ** Professor of Pediatric Nursing, *** Eminent Professor of Pediatric Nursing Pediatric Nursing Department –Faculty of Nursing, Ain Shams University.

Abstract

Background: Learning is an active personal process. The student is the one who experiences the learning. Teachers cannot provide the experience; they can provide only the opportunity for the experience. The central activity of the teacher in the clinical setting is Clinical teaching is to plan to provide activities that will facilities learning Aim of study: To assess factors affecting learning atmosphere among pediatric nursing student at Technical Institutes of Nursing. Research design: A descriptive design was used to conduct this study. Research settings: The study was conducted at four Technical Institutes of Nursing selected randomly from Giza and Cairo governorate. Subject: One hundred and twenty pediatric nursing students enrolled in academic year (2017/2018) at Technical Institutes of Nursing in the previously mentioned settings. Tool of data collection: Questionnaire sheet, Student evaluation of institute for being a media for learning, Job Stressor to assess the student stressor during training in the clinical area and likert like type rating scale to assess stressors related to nature of nursing profession related to evaluation process and an observation check list to assess media of learning in institute. **Results**: Revealed that more than half of studied students believe that the instructor did not had selfconfident, student not respect instructor knowledge, instructor not help to improve student skills leads to not feel confident due to increase knowledge and skills, instructor not do revision after clinical finish, evaluation steps not fair and instructor not close to students were factors affecting learning atmosphere. Conclusion: study could concluded that the media of learning and their clinical instructor nature of the nursing profession, evaluation process, different types of patient and nature of work were factors affecting learning atmosphere. Recommendation: it recommended that overcome factors affecting learning atmosphere among pediatric nursing student for facilitate learning through recruitment of adequate number of qualified teachers and prepare of experienced teachers.

Keywords: Learning Atmosphere, Pediatric Nursing Students, Technical Institutes of Nursing

Introduction:

Learning is the processes by which novices become experts. The learning process help educators promote subjects optimal learning. Educator knows a novice solves a particular problem in a domain, compared with the way an expert thinks, then learning traced to changes that occur in mental processes in moving from novice to expert (*Bruer*, 2015).

Learning can be defined as a change in behavior as a result of experience. This can be physical and overt, or it may involve complex intellectual or attitudinal changes which affect behavior in more subtle ways. The teacher guides, supports, stimulates, and facilities learning by designing appropriate activities in appropriate setting and allows the student toexperiencethatlearning(Suhda, 2013; Delay, 2010& Gaberson et al., 2014).

Learning is an active personal process. The student is the one who experiences the learning .Teachers cannot provide the experience; they can provide only the opportunity for the experience. The

central activity of the teacher in the clinical setting is Clinical teaching is to plan to provide activities that will facilities learning (Saladinet al., 2010).

Learning atmosphere refers to the whole range of components and activities in which learning happens. It is characterized by respect for learner abilities, also it enhances learner's ability to reason and restructure existing knowledge. For learning to occur it must be stimulating and disciplined in the pursuit of new knowledge. Sensitivity and caring about learner's needs, in which it does not mean compromising on acceptable quality of performance, but it means considering strategies directed toward helping learners to attain desired goals (Sankaranararyananet al., 2012).

Atmosphere should be effective on the learning process for nursing students in the clinical area. However, learning in clinical environment has several benefits, but it can be challenging, unpredictable, stressful, and constantly contributing to the learning of these experiences can waste a great deal of time and energy, impose heavy financial burden on educational systems, cause mental, familial and educational problems for students, and compromise the quality of patient care (*Becky*, 2014).

Learning depends on several factors, but a crucial step is the engagement of the learner. This is affected by their motivation and perception of relevance. These, in turn, can be affected by learners' previous experiences and preferred learning styles and by the context and environment in which the learning is taking place The learners need professional person that will recognize their need for academic and professional safety which will use all possible opportunities to guide them to become safe and competent professionals (Saladinet al., 2010&Becky, 2014).

Effective learning atmosphere requires good communication collaboration between students and teachers. Nursing students are responsible for their own learning and must take every opportunity to become competent and confident. The students are often faced with challenges during the courses of clinical learning, which make them feel vulnerable. The quality of clinical training provided by nursing educators and the support received arethe most important influencing factors on nursing students' learning (Francis, 2011&Hoozer, 2016).

Significance of the study:

In higher education, learning in the clinical environment of health care the students plays a significant part. The greatest challenges for culturally and a linguistically diverse healthcare students were found in clinical placements, where differences in language and culture have been shown to cause learning obstacles for students. There has been no systematic review conducted to examine culturally and linguistically diverse healthcare students' experiences of their learning in the clinical environment. So it is important to assess the

learning atmosphere that facilitates learning and assess learning type among pediatric nursing students during class teaching and clinical setting to deal grow weak children. This could facilitate learning atmosphere among pediatric nursing students at technical institutes ofnursing.

Aim of the Study:

Assess factors affecting learning atmosphere among pediatric nursing student at Technical Institutes of Nursing.

Research question:

What are the factors affecting learning atmosphere among pediatric nursing student at Technical Institutes of Nursing?

Subjects and Methods:

Subjects and methods of this study were portrayed under the four main designs as follows:

- Technical design
- Operational design
- Administrative design
- Statistical design

Technical Design:

Technical design included the research design of the study, settings of the study, subjects, as well as tools of data collection.

Research design:

A descriptive design was used to conduct this study.

Research Settings:

The study was conducted at four Technical Institutes of Nursing 3 institutes in El Giza Governorate namely; Om El Masryeen Hospital, El Omrania Hospital and Bolak El Dakroor Hospital. 1 institute in Cairo Governorate calledEl DemerdashHospital(Ain shams university).

Research Subject:

A purposive sample of 120 pediatric nursing students Enrolled in academic year (2017/2018) in third and fifth educational year, 30 students from each institute at Technical Institutes of Nursing at the previously mentioned settings.

Tools of data collection

Data collected through used the following **tools:**

I. A structured Interviewing Sheet:

This tool was designed by the researcher and written in simple Arabic language based on scientific literature review to gather data the following parts:

- **Part** (1): Characteristic of the studied students such as sex, age, race, and duration of study.
- II. Student evaluation of the learning atmosphere in the institute for being a media for learning it was adopted from (Grander&Suplee,2010). Student evaluation of the learning atmosphere in the institute for being a media for learning will be adopted from, it consists of 10 items concerning the learning atmosphere to facilitate learning process by the clinical instructor, the ten items professional competence. professional growth, providing feedback, communication, problem solving, teaching skills, organization, role model, appreciation of diversity and caring, understanding and empathy.

❖ Scoring system

The responses to items in a 5-point Likert ranging from (5) strongly

agree, (4) agree, (3) ssometimes, (2) disagree, and (1) strongly disagree. The score of items were summed-up and the total divided by number of the items, giving a mean score of the part. These scores were converted into a percent score was classified as the following:

- Score from 28 < 67 referred to poor learning atmosphere.
- Score from 68 ≤ 120 referred to good learning atmosphere.

III. Job Stressor: it was adopted from (Ghalial, 2013) to assess the student stressor during training in the clinical area include 24 statement fall into four main dimensions which are psychological (3 items) includes Depression without reasons, Sleep order distress & Not able to go work, Physical (4 items) include Easily fatigue, Palpitation, Muscle convulsions &Low back pain during work, social (8 items) includes Nervousness due to college lateness Dealing with college only at work, Anxiety during dealing with doctors " Avoid dealing with ill patients, Anxiety due visitors number. to Become nervousness due to visiting time, Leaders not respect opinions &Hesitate relationship with direct leader, and nature of work(9 items) includes Not enough time , Not interest with nursing, Do mission out of nursing specialty, Social relation affected with working nature, Not enough time for rest &Work nature need risk. The tool Likertlike type rating scale.

❖ Scoring system

The response to items in a 3-point Likert ranging from (1) always, (2) sometimes and (3)rarely; the score of items was summed-up and the total divided by number of the items, giving a mean score of the part. These scores were converted into a percent score was classified as the following:

- Score from 24 -48 referred to mild stress level
- Score from 49-60 referred to moderate stress level
- Score from 61 ≤ 72referred to high stress level.

II. Job Stressor: it was adopted from (Sankaranararyanan, B., 2012) to assess the student stressor during training in the clinical area include 24 statement fall into four main dimensions which are psychological (3 items), Physical (4 items), social (8 items), and nature of work. The tool likert like type rating scale.

❖ Scoring system

The response to items in a 3-point Likert ranging from (1) always, (2) sometimes and (3)rarely; the score of items was summed-up and the total divided by number of the items, giving a mean score of the part. These scores were converted into a percent score was classified as the following:

- Score from 15 -26 referred to low stress level.
- Score from 27 ≤ 45 referred to high stress level.

IV.An observation check list was adopted from Gini (2017) observation sheet to assess Characteristics of learning Atmosphere according to physical and environmental structure component of the institute.

Validity and Reliability:

To achieve the criteria of trustworthiness of the tool of data collection in the study, the tools were tested and evaluated for their face and content validity, by panel of expect from different academic categories (Professors of Pediatric nursing at the Faculty of Nursing Ain Shams University, and Psychologist from Banha

University). To ascertain relevance, clarity, and completeness of the tool, experts' elicited responses that were either agree or disagree for the face and content validity. The items in which 85% or more of the experts have agreed were included in the proposed tool. The required corrections and modifications were done. Reliability Test retest and done through by using the cronbach's alpha test the result was statistically (0.81).

Operation Design:

The operational design for this study consisted of three phases, namely preparatory phase, pilot study, and fieldwork.

Preparatory Phase:

This phase included reviewing of literature related to student knowledge about learning and learning atmosphere. This served to develop the study tools for data collection. During this phase, the researcher also visited the selected place to get acquainted with the personnel and the study settings. Development of the tools was under supervisors' guidance and experts' opinions were considered.

Ethical consideration:

The research approval was obtained from Scientific Research Ethical Committee in Faculty Of Nursing at Ain Shams University before starting the study, the researcher was clarified the objective and aim of the study to the student nurses included in the study and was assured maintaining anonymity and confidentiality of the subject data and Student nurses were informed that they were allowed to choose to participate or not in the study.

Pilot study was carried out on 12 nursing students those represented 10% in order to test the applicability of the constructed tools and the clarity. The pilot has also served to estimate the time needed for each subject to fill in the questions. According to the results of the pilot, some corrections and omissions of items were performed as needed. The pilot participants were not included in the main study sample.

Fieldwork:

The actual field of work started from the beginning the academic year 2017/2018 over 6 months......

The researcher first met with the pediatric nursing students in the previously mentioned setting, explained the purpose of the study after introducing herself. The nursing students were assured that information collected would be treated confidentially, and it would be used only for the purpose of the research. Then, individual interviewing was done after obtaining nursing students consent to participate.

The researcher was explaining the aim of the study to pediatric nursing distributing students before questionnaire and how to fill in this questionnaire. This tool were distributed for the pediatric students after passing 1 week in the clinical area and end course of curriculum in class room. The students answerd the questionnaire on their own pace. Data collection were arranged to be at the post conference in all clinical area. Observation was done intermittently through 1 hour/session/area. The study was conducted for 2 days / week over 6 months period. The researcher was available 2 days to gather the data for the study purpose.

Pilot Study:

Administrative design:

Approval was obtained through an issued letter from the Dean of Faculty of Nursing, Ain Shams University to directors of the previously mentioned settings. The researcher was met the institute director and explained the purpose and the methods of the data collection.

Statistical analysis:

Data collected from the studied sample was revised, coded and entered using. PC. Computerized data entry and statistical analysis were fulfilled using the Statistical Package for Social Sciences (SPSS) version 20.Data were presented using descriptive statistics in the form of frequencies, percentages. Chi-square test(X²) used for comparisons between qualitative variables and correlation cofficiency was used to test correlation between variables.

Results:

Table (1): Shows that, 59.2 % of the studied students were between age 17-20 years old, with mean17.4±2.2, 42.5% of them were had three brothers, , 54.2% of them were live with family, 31.7% of them were join nursing as formatting desire, 90.0% of them were not fail in study, 85.0% of them were not fail in pediatric.

Table (2): Shows that, 40.8% and 47.5% of the studied students were disagreed that clinical instructor had self – confident, and knowledge as well as respect instructors knowledge and skills.

Table (3): Shows that, 48.3%, 38.3% &35.8% of studied students were disagreed with instructors review clinical research; instructor do revision after clinical finish & fairness of their evaluation steps.

Table (4): Shows that,38.4%, 33.3% &44.2% of studied students were disagreed with instructor apply educational training with right manner, use different methods in student training & use new techniques in student training respectively.

Table (5): Illustrates that, there was statistical significant differencebetweenevaluation toward learning atmosphere and stressor during training in the clinical area of the studied students.

Table (6): Shows that, 50.8% of institutes had applied physical and environmental structure components of the institutes and 49.2 %hadnot applied physical and environmental structure components of the institutes.

Table (1): Distribution of the studied sample according to their characteristic (No=120).

Characteristic	No	%
Age		
≤ 17 years	28	23.3
$17 \le 20$ years	71	59.2
$20 \le 23$ years	21	17.5
Mean ±SD	17.	4±2.2
Number of brothers		
Two	38	31.7
Three	51	42.5
Four	31	25.8
Student ranking		
Third	61	51
Fifth	59	49
Housing		
With family	65	54.2
University housing	32	26.7
Private housing	23	19.2
Join institute		
Personal desire	28	23.3
Formatting desire	38	31.7
Parent desire	33	27.5
Working desire	21	17.5
Fail during study		
Yes	12	10.0
No	108	90.0
Fail in pediatric		
Yes	18	15.0
No	102	85.0

Part (II): Student evaluation of learning atmosphere to facilitate learning process.

Table (2): Distribution of the studied students according their opinion about clinical instructor for the Professional Competence (no=120).

Professional Competence	Extremely disagree		Disagree		Agree		Extremely agree	
	No	%	No	%	No	%	No	%
Clinical instructor had self – confident and knowledge	15	12.5	49	40.8	36	30.0	20	16.7
Respect instructors knowledge and skills	13	10.8	57	47.5	27	22.5	23	19.2
Total	14	11.7	53	44.1	32	26.7	21	17.5

Table (3): Distribution of the studied students opinion according to clinical instructor providing feedback (No=120).

Providing Feedback	Extremely disagree		Disagree		Agree		Extremely agree	
1 Toviding Peedback	No	%	No	%	No	%	No	%
Instructors review clinical research	15	12.5	58	48.3	27	22.5	20	16.7
Instructor use new revision technique	15	12.5	34	28.3	42	35.0	29	24.2
Instructor do revision after clinical finish	15	12.5	46	38.3	37	30.8	22	18.3
Evaluation steps was fair	17	14.2	43	35.8	37	30.8	23	19.2
Total	15	12.5	45	37.5	36	30.0	24	20.0

Table (4): Distribution of the studied students opinion according to clinical instructor teaching skills (no=120).

Teaching Skills	Extremely disagree		Disagree		Agree		Extremely agree	
	No	%	No	%	No	%	No	%
Instructor apply educational training with right manner	24	20.0	46	38.4	37	30.8	13	10.8
Instructor train the student seriously	27	22.6	37	30.8	37	30.8	19	15.8
Use different methods in student training	24	20.0	40	33.3	38	31.7	18	15.0
Use new techniques in student training	20	16.6	53	44.2	35	29.2	12	10.0
Total	24	20.0	44	36.7	37	30.8	15	12.5

Table (5): Correlation between evaluation toward learning atmosphere and stressor during training in the clinical area of the studied students (No=120).

Itam		learning atmosphere			
Item	r	P Value			
Stressor	0.73	*0.02			

Table (6): Characteristic of learning Atmosphere according to physical and environmental structure component of the institute (No=120).

Items	A	pply	Not apply		
itens	No	%	No	%	
Enough lab instrument	60	50.0	60	50.0	
Enough classes	48	40.0	72	60.0	
Appropriate sitting	70	58.3	50	41.7	
Appropriate lighting and ventilation	76	63.3	44	36.7	
Frequent class maintenance	51	42.5	69	57.5	
Total	61	50.8	59	49.2	

Discussion:

This part discusses the results of the current study, comparing them with other related studies, recent literature, as well as representing the researcher interpretation of the current results.

Learning atmosphere refers to the whole range of components and activities in which learning happens. It is characterized by respect for learner abilities, also it enhances learner's ability to reason and restructure existing knowledge(Sankaranararyanan et al., 2012).

This study was conducted to assess factors affecting learning atmosphere among Pediatric Nursing Students at Technical Institutes of Nursing through assessing the learning atmosphere in the institute for being a media for learning,the student stressor during training in the clinical area, assess stressors related to nature of nursing profession clinical setting and evaluation process and physical and environmental structure component of the institute observed by the researcher.

Regarding students characteristics The current study revealed that the studied students age was ranged was from 17≤20 years old with mean 17.4±2.2 This is similar finding with the Abed el Gaffer (2013)in study titled in Assess The Process Learning Obstacles Nursing Students In Technical Nursing Institute who found that, the age of students were ranged between 17 to 20 years. Also with Khalil (2015) in study titled in assess factors affecting the clinical training among pediatric nursing students in technical nursing Institute who found that, the age of students were ranged between 17 to 20 years. It could be due to the fact students of Technical Nursing Institute start the study after the certificate of secondary school.

Factors affecting learning atmosphere among pediatric nursing student in technical institutes of nursingwas assessed through asking the students about their opinion for being a media for learning, their opinion consists of tenitems concerning the learning atmosphere to facilitate learning process by the clinical instructor. the ten items was Professional competence, Professional growth, Providing feedback, Communication, Problem solving, teaching skills, Organization management, model, appreciation of diversity caring ,as well as understanding and empathy.

The current study revealed that the studied students according to their opinion about teacher for their professional competence more than half of the pediatric nursing students had extremely disagree and disagree that the Clinical instructor had self – confident and knowledge as well as extremely disagree and disagree about respect instructors knowledge and skills of which can affect learning atmosphere. This result similar to

Boutain (2015) in the study titled social justice as a framework for professional nursing found that about half of pediatric nursing students disagreed that the clinical instructor had self confident . This could be due to the fact that most of teachers those responsible for the applications of knowledge in practice were postgraduate nursing student with no postgraduate mater degree or doctorate.

Regarding professional growth which teachers awareness of personal and professional growth, creating a reflective learning atmosphere the studied students according to their opinion about teacher for helping professional growth the current study proved that less than quarter the students those reported the extremely disagree that the clinical instructor built on the previous knowledge from other clinical courses, more than quarter of pediatric nursing students disagree that The clinical instructor provided the student with clinical experiences that were relevant to what had been learnedin class, more than half of the pediatric nursing students disagreed that the clinical instructor challenged students' knowledge and critical thinking during pre conference and post conference. more than half of the pediatric nursing students assisted in growth as a future professional nursing and about half of the pediatric nursing students feel confident due to increase knowledge and skills the student believes that there was no confident with the nursing skills after clinical rotation. This result similar to the study done by *Pardo*, (2016) who conducted a study on a reflection of teachers personal and professional growth, mentioned that student gains experience throughincrease knowledge and skills.

The current study revealed that more than half of the studied pediatric nursing students disagreed and extremely disagreed that the instructor review clinical research, third of pediatric nursing students reported that the instructor use new revision technique, more than half of studied pediatric nursing students disagreed and extremely disagreed that the instructor do revision after clinical finish and about half of pediatric nursing students disagreed and extremely disagreed that the instructor evaluation was fair. This study was in accordance with the study of Alec ,(2017) who studied effect of feedback process at academic student asserted that there are instructor use new techniques in revision and evaluation steps with students was fair.

Regarding commutation skills it's the ability to communicate effectively is an essential skill in day's world. The current study revealed that regarding the providing feedback is a transmission of evaluative or corrective information about an action. The current study illustrated that more than half of pediatric nursing students disagreed and extremely disagreed the presence offeeling esteem ofhigh selfafter finishing clinical,more than half ofthe studiedpediatric nursing students disagreed and extremely disagreed that instructor was close to student about halfof pediatric nursing students disagreed and extremely disagreed that instructor respect humanity and more than half of studied pediatric nursing students disagreed and extremely disagreed that instructor create respect media.This study disagreed Gini,(2017) who studied the importance of communication skills in business, reported that the communication skills its well achieved and increased high self esteem.

The Current study displayed that approximately two third of pediatric nursing students disagreed and extremely disagreed that were had critical thinking self confident after clinical training and more than half of studied pediatric nursing students disagreed and extremely disagreed that were had problem solving self confident after clinical training. This finding was not in agreement with *Jomy (2016)*, who studied a solve self assessment, critical thinking tasks and problem solving, reported that student increase self confident for problem solving and critical thinking after clinical training.

The current study illustrated that the studied students according to their openion about their teaching skills about half of pediatric nursing students were disagreed and extremely disagreed that instructor applied educational training with right manner, more than half of studied pediatric nursing students were disagreed and extremely disagreed that instructor use different methods in student training and approximately two third of them were disagreed and extremely disagreed that instructor use new technique in training. This result was supported by Kertis (2017). who studied teaching during formal training of preservice teachers, reported that instructor not applied different methods and techniques in student training.

The current study investigate the studied students according to their openion about their organization management which proved that more than half of pediatric nursing students were disagreed and extremely disagreed that instructor had good management and about two third of pediatric nursing students were disagreed and extremely disagreed that instructor had improve managerial skills .The result of this

study was not similar to the study performed by Arie (2017), who studied the effectiveness Of organizational management for leaders who need to understand modern organizations, revealed that the organization had good management and improve managerial skills.

Regarding to role model which is a person whose behavior example, or success can be emulated by others especially by younger people, The current study revealed that more than half of pediatric nursing students were disagreed and extremely disagreed that Instructoract as a role modeland the student were not become role model through instructor training .This study was not in accordance with Herrmann .(2016) who studied the effect of role model on academic performance, student's revealed that the participation in role -playing, case studies is a useful strategy to increase their confidence for health teaching. This simulation strategy can also be applied to enhance other learner's behaviors and performance of instructor in academy not affected on student after training..

relation between In characteristics of the studied students and evaluation toward learning atmosphere, The current study show that illustrates that. there are statistical significant differences between age, residence. marital status. housing, educational year, join institute, fail during study, fail in pediatric of the studied students and their evaluation toward learning atmosphere, Although no research has been done in this regard, such result was predictable; because career, motivation and interest are a stimulus for performance strong according to social-cognitive theory of career (Hakimzadeh,et al 2013), while there are no statistical significant differences between number of siblings,

student ranking of the studied students and their evaluation toward learning atmosphere, and according to illustrates that, there are statistical significant differences between age, number of siblings, ranking of the studied students, residence, marital status, educational year, fail during study, fail in pediatric of the studied students and their stressor during training in the clinical area and illustrates there is statistical significant difference between evaluation toward learning atmosphere and stressor during training in the clinical area of the studied students.Also this finding shows statistically significant difference between evaluation toward learning atmosphere and stressor during training in of clinical area the studied students and their pattern of atmosphere at p*0.02.

Conclusion:

In the light of the present study findings ,it can be concluded that most of the respondents reported that they face factors affecting learning atmosphere in their institutions, that most factors affecting learning atmosphere in the institutions that instructor not had self confident, student not respect instructor knowledge, instructor not help to improve student skills leads to not feel confident due to increase knowledge and skills, instructor not do revision after clinical finish, evaluation steps not fair, instructor not close to students, students disagree with problem solving and critical thinking self confident, instructor not use different methods students in training ,always present difference between theory and practice and insufficient of trained teachers at institutes &workplace..

Recommendation

On the basis of the findings of the study recommended that

- Overcome factors affecting learning atmosphere among Pediatric nursing students to facilitate learning Through
 - 1- Recruitment of adequate number of qualified teachers and prepare of experienced teachers and further research will be performed

References:

- Abed el Gaffer, M.(2013). Assessment of Learning Process Obstacles among Nursing Students in Technical Nursing Institutes Unpublished thesismaster pediatric nursing ain shams university, P.144.
- Alec,J.(2017); The effect of feedback process At academic students; 29(4):124:135.
- Arie, Y. (2017): The effectiveness of organizational management for leaders who need to understand modern organizations; 16(3):122:123,Available at: https://journals.sage.pub.com.
- **Becky, F. (2014).**Education Consultant. Available at:en.wikipedia.org /wiki/Educational Technology.
- **Boutain ,D.(2015):**social justice as a frame work for professional nursing .jounal of nursing education ,search .proquest .com,43(5); 148:159.
- **Bruer**, **J.** (2015).TheMind"s Journey from novice to Expert. American Educator; 17(2): 6-15, 38-48.
- **Delay, B. (2010).**Learning in Clinical Practice. Holistic Nursing Practice; 16(1):43:54.

- Francis, M. (2011). The Principles and Practice of Education, Low Priced ed., British: , 396: 404.
- Gaberson, K.; Leen, B.; Marilyn, H.; OermannS.and Teresa, S. (2014). Clinical Teaching Strategies In Nursing. 4thed., Newyork: Springer Co., pp7&8.
- **Ghalial , M.(2013).** Job Stress And Its Relationship with Recreating Exercise Among Nurses In The Government at Hospital ,Benisuel. 3rd Annual scientic, p4.
- Grander, M.R.andSuplee,p.p.(2010).

 Hand book of Clinical Teaching In

 Nursing and Health Science

 10thed,U.S.A.p.218-220.
- Gini , B .(2017):Importance of communication skills in Buciness;22(6):133:144.
- N, Ghodrati A, Karamdost N, Ghodrati H, MirmosaviJ.(2013).Factors Affecting the Aching Learning In Nursing Education, Gse Journal of(e-ISBN 978-967-11768-0-1), WorldConferences.net.
- Hoozer, V. (2016). The Teaching Process (Theory & Practice in Nursing). U.S.A:, 351:356. Also Available atwww.elsevier.comllocate/yebeh.
- Herrmann, S. (2016): The effect of role model on academic performance; 35(1);132:144.
- Jomy, S .(2016):Solve self assessment ,critical thinking tasks and problem solving, Available at :https://www.quora.com.
- Khalil, R. (2015). Factors Affecting the Clinical Training Among Pediatric Nursing Students in Technical Institutes .Unpublishedthesismaster

- Pediatric NursingAin Shams University p80-90.
- **Kertis , S .(2017)**:Teaching during formal training of preservice teachers ;6(1):89 : 94 .Available at :https://www.Amazon.com.
- Pardo,A.(2016):Reflection on teachers personal and professional growth;23(3):111:120.
- Saladin, P.; Miller, E.; Clement, A and Wiley, M. (2010). The Teaching Portfolio: A Practical Guide to

- Improved Performance and Promotion/Tenure Decisions, 4th ed., Available at http://www.ehow.com/list-6529062-Characteristics –Effective Teachers –Teaching.Html.
- Sankaranararyanan, B. and Sindhu, B. (2012).Learning and Teaching Nursing. 4th ed., New Delhi JaypeeBrothers Medical publishers, pp 3:5.
- Sudha, R. (2013). Nursing Education:
 Principles And Concepts, Jaypee
 Brother Medical publishers (P) Ltd,
 Ansari Road, New Delthi, PP 30-52.