Belongingness: a pivotal precursor
to optimising the learning of
nursing students in the clinical
environment

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for the degree of Doctor of Philosophy

University of Newcastle

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I hereby certify that the work embodied in this thesis is the result of original research and has not been submitted for a higher degree to any other University or Institution.

(Signed) .................................................................

Tracy Levett-Jones
Dedication

This thesis is dedicated to the memory of my mother, Joy, whose firm belief in the power and potential of education inspired my academic journey. I wish I could have celebrated this milestone with her.
Acknowledgments

My sincere thanks go to my supervisory “team”: Professor Mary FitzGerald, who took the first steps of this journey with me and inspired me with her passion for research; Professor Judith Lathlean, whose belief in the value of this study, ongoing support and detailed critique has been a constant source of encouragement; Professor Margaret McMillan, who conversed with me in ways that continually challenged and clarified my thinking; and Doctor Isabel Higgins, whose critical feedback at important junctures was germane to this project.

I’d like to acknowledge the students who participated in this study and whose perspectives and insights formed the substance of this thesis; and the staff of the three universities where the study was located, for their support and collegiality.

Most importantly, to the people who have shared this journey and so many others with me, thank you for reminding me what matters most: my husband Garry, my children Joel, Ben, Chelsea, Tyler and Madeline, my daughter-in-law Cassie, and my dearest friend Margot.
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Abstract

The phenomenon of belongingness has intuitive appeal. Empirical literature from the disciplines of social science and psychology reveals that the need to belong exerts a powerful influence on cognitive processes, emotional patterns, behavioural responses, health and wellbeing, and that failure to satisfy this need can have devastating consequences. There are assertions that people who are deprived of belongingness are more likely to experience diminished self-esteem, increased stress and anxiety, depression, a decrease in general wellbeing and happiness, impaired cognition and an increase in affiliative behaviours, such as compliance and conformity. In the nursing literature, while there is paucity of studies about this salient issue, there are inferences that diminished belongingness may impede students’ motivation for learning and influence the degree to which they are willing to conform rather than adopt a questioning approach to clinical practice. These findings are of concern to a profession that seeks to prepare innovative, confident, competent professionals with a commitment to self-directed learning; and they require careful investigation.

This study set out to identify the relationship between belongingness and the clinical placement experiences of pre-registration nursing students by measuring the extent to which students experience belongingness related to their clinical placements, and by exploring the factors that impact on and are consequences of that experience. Third-year students were recruited from two Australian universities—one in New South Wales and one in Queensland—and from one university in the south of England. This was a mixed-method case study where 362 students participated in an anonymous online survey termed the Belongingness Scale–Clinical Placement Experience (BES–CPE), and 18 of those students participated in in-depth semi-structured interviews.

The quantitative data from the survey were subjected to descriptive and inferential statistical analysis. In comparing the extent to which nursing students experience belongingness, it was determined that the mean BES–CPE scores of participants from the university in England were statistically higher than participants from either of the Australian universities. This finding may be partly explained by differences in the duration of clinical placements and the mentorship models in use at the three universities. Of the demographic variables analysed, previous or concurrent nursing experience, family
members with nursing experience, gender and country of birth were not a strong influence on students’ experience of belongingness. The effects of age and English as a first language were less certain.

The qualitative interview data were thematically analysed. The experiences and perspectives of the participants from each of the three sites were remarkably similar in many respects. They described placement experiences that spanned a continuum from those that promoted a high degree of belongingness to those that provoked intense feelings of alienation. Belongingness was seen to be both a deeply personal and a contextually mediated experience. It was the interpersonal relationships forged with the registered nurses that students worked with on a day-to-day basis that exerted the single most important influence on their sense of belonging. However, students’ sense of belonging was also influenced by a range of other individual, interpersonal, contextual and organisational factors.

A number of important consequences of belongingness were identified. These included affective consequences such as feeling safe, comfortable, satisfied and happy within the clinical environment. Belongingness was related to nursing students’ self-concept, degree of self-efficacy, the extent to which they were willing to question or conform to poor practice, and their future career decisions. However, it was the relationship between belongingness and students’ capacity and motivation for learning to nurse that emerged as a critical and recurring theme. Given that clinical placements are specifically designed to facilitate authentic learning opportunities, this is a significant finding that has repercussions at both the micro and macro levels.

By way of conclusion the practical implications of the study are brought to the foreground and made explicit through the presentation of the conceptual framework that emerged from the study. The Ascent to Competence conceptual framework applies a modified version of Maslow’s hierarchy of needs to the clinical placement experience of nursing students, and sheds light on the challenges associated with the particular needs of students who are learning to nurse in contemporary practice environments.
## Glossary of Terms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>AHWAC</td>
<td>Australia Health Workforce Advisory Committee</td>
<td>A committee formed in 2000 to oversee national level, government-initiated, health workforce planning in Australia, covering the nursing, midwifery and allied health workforces. It ceased to operate on 30 June 2006.</td>
</tr>
<tr>
<td>AIN</td>
<td>assistant in nursing</td>
<td>Sometimes referred to as trained care assistants, these staff work under the direct supervision and delegation of a RN. Some have Certificate II or III, others are undergraduate nursing students.</td>
</tr>
<tr>
<td>ANMC</td>
<td>Australian Nursing and Midwifery Council</td>
<td>The national body concerned with national competency standards and processes for the regulation of nursing in Australia.</td>
</tr>
<tr>
<td>EBL</td>
<td>enquiry-based learning</td>
<td>Working in small groups led by academic facilitators, students explore concepts of practice by examining a variety of scenarios and clinical case studies.</td>
</tr>
<tr>
<td>EN</td>
<td>enrolled nurse</td>
<td>A person whose name is entered on the register or role allocated to enrolled nurses.</td>
</tr>
<tr>
<td>HCW</td>
<td>healthcare worker</td>
<td>A variety of roles that denote unlicensed staff who care for clients / patients.</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Full term</td>
<td>Definition</td>
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<tr>
<td>LEF</td>
<td>Learning Environment Facilitator</td>
<td>RNs who are based in NHS Trusts and the independent sector to support mentors and manage practice-based learning issues.</td>
</tr>
<tr>
<td>NG</td>
<td>new graduate nurse</td>
<td>Recently or newly qualified registered nurse.</td>
</tr>
<tr>
<td>NHS</td>
<td>National Health Service</td>
<td>UK system of public health care.</td>
</tr>
<tr>
<td>NMBNSW</td>
<td>Nurses and Midwives Board of New South Wales</td>
<td>Regulatory body for nurses and midwives in New South Wales.</td>
</tr>
<tr>
<td>NMC</td>
<td>Nursing and Midwifery Council</td>
<td>Regulatory body for nurses and midwives in the UK (previously United Kingdom Central Council for Nursing, Midwifery and Health Visiting, UKCC).</td>
</tr>
<tr>
<td>NORC</td>
<td>Nursing Organisations Representative Committee</td>
<td>A nursing group formed in 1974 with representatives drawn from all major nursing organisations.</td>
</tr>
<tr>
<td>NUM</td>
<td>nurse unit manager</td>
<td>A term used in Australia to denote the registered nurse manager responsible for a ward or unit. May be termed “sister” in the UK.</td>
</tr>
<tr>
<td>PBL</td>
<td>Problem-based learning</td>
<td>Students work together in small groups to define and addressed complex clinical problems or issues.</td>
</tr>
<tr>
<td>Abbreviation</td>
<td>Full term</td>
<td>Definition</td>
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<tr>
<td>PCT</td>
<td>Primary Care Trust</td>
<td>A component of the NHS. These trusts are responsible for assessing the health needs of the population in a specified region and commissioning services to meet those needs.</td>
</tr>
<tr>
<td>QNC</td>
<td>Queensland Nursing Council</td>
<td>Regulatory body for nurses and midwives in Queensland.</td>
</tr>
<tr>
<td>RN</td>
<td>registered nurse</td>
<td>A person whose name is entered on the register as having the authority to practice.</td>
</tr>
<tr>
<td>SDL</td>
<td>self-directed learning</td>
<td>A process in which individuals take the initiative, with or without the help of others, in diagnosing their learning needs, formulating learning goals, identifying human and material resources for learning, choosing and implementing appropriate learning strategies, and evaluating learning outcomes (Knowles, 1975).</td>
</tr>
<tr>
<td>SHA</td>
<td>Strategic Health Authority</td>
<td>The link between the NHS and the Department of Health. These authorities are responsible for managing and setting the strategic direction of the NHS locally.</td>
</tr>
<tr>
<td>SPSS</td>
<td>Statistical Package for the Social Sciences</td>
<td>A widely used computer program for statistical analysis, data management and data documentation.</td>
</tr>
<tr>
<td>WDD</td>
<td>Workforce Development Directorate (previously termed Workforce Development Confederation)</td>
<td>The role of this organisation is to plan the NHS workforce, redesign work processes or jobs, commission education and training, and work with employers to implement good human resources practice. In particular, the WDD commissions nursing student numbers</td>
</tr>
<tr>
<td>Abbreviation</td>
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<tr>
<td></td>
<td>depending on workforce projections and funds nursing education.</td>
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<tr>
<td>mentor / preceptor</td>
<td>These terms are often used interchangeably to describe registered nurse clinicians who support and guide students (or newly qualified nurses) in clinical context. A “buddy” is a RN who works with students in a more informal capacity.</td>
<td></td>
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</tbody>
</table>
Glossary of Statistical Symbols and Terms

<table>
<thead>
<tr>
<th>Symbol</th>
<th>Term</th>
<th>Description</th>
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<tbody>
<tr>
<td>α</td>
<td>alpha</td>
<td>The probability of rejecting a true null hypothesis.</td>
</tr>
<tr>
<td></td>
<td>ANOVA</td>
<td>Analysis of Variance. A test of the statistical significance of the differences among the mean scores of two or more groups on one or more variables.</td>
</tr>
<tr>
<td>$\chi^2$</td>
<td>chi-square test</td>
<td>Used to test if there are differences in a table by comparing the observed versus the expected values.</td>
</tr>
<tr>
<td>CI</td>
<td>confidence interval</td>
<td>Interval in which the true mean or proportion is expected to lie within a given confidence level.</td>
</tr>
<tr>
<td>$r$</td>
<td>correlation statistic</td>
<td>A statistic used to measure the level of association between two variables. Pearson’s Product Moment Correlation is one of these statistics.</td>
</tr>
<tr>
<td>Cronbach’s alpha</td>
<td></td>
<td>The most common internal consistency measure, usually interpreted as the mean of all possible split-half coefficients.</td>
</tr>
<tr>
<td>df</td>
<td>Degrees of freedom</td>
<td>Value associated with a statistical test that is used to determine the level of significance; this value is dependent on the number of cases and/or number of samples utilised in the statistical test.</td>
</tr>
<tr>
<td>$\eta^2$</td>
<td>eta squared</td>
<td>Eta squared and partial eta squared are effect size measures for the association between a predictor and response variable.</td>
</tr>
<tr>
<td>$\eta^2_p$</td>
<td>partial eta squared</td>
<td></td>
</tr>
<tr>
<td>$F$</td>
<td>F-statistic</td>
<td>The test used in ANOVA to determine if a predictor variable has a significant effect.</td>
</tr>
<tr>
<td>$M$</td>
<td>mean</td>
<td>The average of all scores reported in the sample or category.</td>
</tr>
<tr>
<td>$p$</td>
<td>probability value</td>
<td>The probability that a statistical result would occur by chance if a NULL hypothesis was true. A probability value less than .050 (i.e., $p &lt; .050$) would suggest that the probability of obtaining observed scores would occur fewer than 5 out of 100 times by chance. Therefore, when probability values are less than .050, observed scores can be described as “significantly different” since there is a low likelihood of obtaining these observed scores by chance alone.</td>
</tr>
<tr>
<td>$N$</td>
<td>sample size</td>
<td>Total number in sample</td>
</tr>
<tr>
<td>Symbol</td>
<td>Term</td>
<td>Description</td>
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</tr>
<tr>
<td>$SD$</td>
<td>standard deviation</td>
<td>A measure of the spread/dispersion of scores around the mean score.</td>
</tr>
<tr>
<td>$n$</td>
<td>sub-sample size</td>
<td>Total number in sub-sample</td>
</tr>
<tr>
<td>$t$</td>
<td>$t$-test statistic</td>
<td>A statistical test used to determine whether the difference between two sample means is significantly different. Two variations of this test have been utilised in this thesis: 1. <em>Independent Samples t-test</em>: compares the mean scores on a single variable from two different samples. 2. <em>Paired Samples t-test</em>: compares the mean difference of scores on a single sample.</td>
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