



Reflections and Learning: A Case Study on Students' Community Health Nursing Immersion

Jude L. Tayaben, Maureen E. Gay- as, Jonalyn S. Esco, and Carol Ruth L. Valles

College of Nursing, Benguet State University

ABSTRACT

Recognizing varied and real life community learning experiences of students are necessary as they are continuously deployed by the College of Nursing of Benguet State University for immersion to different placements. A case study was used as the research approach for this endeavor. Fifty-two reflective journals were reviewed and twenty-two student nurses participated in the study. Participant reflective journal reviews, observations, and focus group discussions were used as data collection methods. Using thematic analysis, four themes emerged from the students' descriptions of their learning experiences: (1) unforgettable experiences: being with people; (2) facing challenges; (3) contributions to self and to the community; and (4) impacts on their lives. Real community health experiences of students should be treasured in nursing education. These can help identify better strategies in improving community learning experiences. This study; thus, hopes to provide further evidence-based indications for policy development to guide support networks working with and for grassroots community stakeholders.

KEYWORDS

Community health nursing
Reflective journals
Student nurses
Immersion
Nursing education

INTRODUCTION

The challenges confronting nurses in today's health care environment have highlighted the necessity for student nurses to feel both competent and prepared for practice (Edwards et al., 2004). This necessity has in turn emphasized the increasing significance of the nature and quality of student community health learning experiences (Adams, 2002; Chan, 2002). The Community Health Nursing (CHN) course focuses

on the care of individuals, families, population groups and the community as clients utilizing concepts and principles in community health development. To apply concepts learned, students are brought to communities for immersion in relation to learning experiences applying community health nursing. As graduates, they are required to have adequate knowledge and skills and be able to transform learned competencies into effective application in the future. The importance of varied real life learning experiences can be gained

in communities; thus, the College of Nursing of Benguet State University has continuously been deploying its students to different communities for immersion. In the many years that this has been done; however, there has never been any study conducted to explore the students' experiences during the said immersions.

Several studies have indicated the essence and influence of community health nursing immersion as a learning venue in the development of student nurses' caring attributes, nursing skills, knowledge, and professional socialization in the context of public health. Despite this; however, there is limited literature on student nurses' learning experiences. Nevertheless, Edwards et al. (2004) described that a supportive community environment is of greatest importance in optimizing the teaching and learning process and is widely regarded as essential to the preparation of registered nurses for work (Ajiboye, 2000; Conway & McMillan, 2000; Tolhurst & Bonner, 2000; Williams et al., 2001). It is during community health nursing immersion that students are able to develop relevant knowledge, skills, and competence (Chan, 2002) to develop their capacity to know how and what and expand their perceptions of their future roles as registered nurses in the community (Edwards et al., 2004). It promotes and preserves the health of populations by integrating the skills and knowledge relevant to both nursing and public health. Providing quality nursing student experience in the community requires a careful consideration of placement and assignments that reinforce clinical and community concepts to work in community-based settings (Dalton et al., 2011; Ervin, Bickes, & Schim, 2006) using the Community Organizing Participatory Action Research (COPAR).

With this, the 'soon-to-be' registered nurses must be well prepared for beginning practice in the community setting. By exploring learning experiences, the findings of the study hope to identify strategies that will improve the learning experiences of students. It also hopes to enhance partnerships with the community in the development of sustainable programs. Lastly, it may be able to provide evidence-based indications for policy development to guide support networks working with community stakeholders.

This study aimed to explore the learning experiences of BSU College of Nursing junior and senior student nurses during their community health nursing immersion placement in two selected

communities in the Province of Benguet.

METHODOLOGY

A qualitative case study design was utilized to answer the objective of the study. This is a strategy used by researchers to explore in-depth a program, event, and activity (Creswell, 2009) which is bounded by time using a variety of data collection procedures (Stake, 1995). Further, this design is appropriate in shedding light on the various ways in which a phenomenon is manifested including the underlying processes and experiences of a particular group or community (Polit & Beck, 2012).

Participant reflective journals, focus group discussions, and observations were used as data collection methods during the students' one week community immersions in two selected communities of Benguet. These communities are outreach areas for related learning experiences and serve as skills laboratories for the community health nursing aspect of the college.

This study initially analyzed 22 junior and 30 senior student nurses' reflective journals. Different community health nursing placements of the student nurses and the reflective journals taken during their first and last rotation in the community were considered. Twenty-two student nurses each from third and fourth years participated in the focus group discussions (Table 1).

Data gathering was done through a two-phase procedure: reflective journal review; followed by focus group discussion and observation.

Table 1. Percentage of FGD participants in the study by sex and level

Characteristics	Frequency	Percentages (%)
Sex		
Male	5	22.73
Female	17	77.27
Level		
III	11	50.00
IV	11	50.00
TOTAL	22	100



The researchers sought permission from the Office of the Dean, College of Nursing, Benguet State University for the data review and secondary analysis of the submitted reflective journals of students. These reflective journals were required by their respective community health nursing instructors who were with the student nurses during the community immersions covering May 2013 and January 2014. Reflective journals of the students were used for data collection.

To capture previous and current actual community experiences, four researchers further facilitated the focus group discussions (FGDs) and observations for a separate group of third and four year level students who were having their community immersions in January 2015 and May 2015. This was done after initial data collection from the reflective journals.

During the community immersion, the researchers conducted three FGDs to selected participants who were grouped according to sex and year level. Furthermore, the researchers made sure that the participants were also assigned in the same placements to ensure accuracy of the initial data collected. The FGDs were composed of at least 5- 10 participants from the third (n-11) and fourth year (n-11) levels with discussions lasting for about 45 minutes to 1 hour. Field notes were used to facilitate documentation, after which data were analyzed.

To ensure confidentiality of the data extracted from the reflective journals, careful de-identification of the names including batch/section was done, using instead, letters and numbers (P1, P2, P3, etc.) throughout the data review and analysis until findings were reported.

The FGDs and observations done during the community immersions were facilitated with the permission and informed consent of the participants.

Thematic analysis was used to analyze the data. This is a qualitative descriptive approach for identifying, analysing, and reporting themes within data to analyse the responses (Vaismoradi, Turunen, & Bondas, 2013). Narrative statements were independently analyzed and data reduction done. The 89 significant statements taken verbatim from the reflective journals, field notes during observation, and FGD transcripts were first

independently examined by the researchers and one or more themes for each response were suggested using a spreadsheet.

The researchers sorted significant statements as themes taken during data collection and analysis. Sorting enabled the researchers to develop the concepts and helped ensure parsimony of categories and themes (Santos-Reyes, 2016; Streubert & Carpenter, 2011).

After initial categorization of all statements by the researchers, 16 subthemes emerged. Further reduction of statements was done then consolidated through a list of four major themes from the subthemes. Each researcher examined each of the statements again in relation to the broader themes identified. Finally, the themes that emerged were re-read and reviewed by the four researchers, after which a consensus on the subthemes and major themes was derived.

After careful thematic analysis, validation was done through 'member checking' by presenting the summary to the FGD participants. Clarification and additional responses were sought when needed.

RESULTS AND DISCUSSION

This study attempted to explore learning experiences of student nurses assigned in two communities of Benguet for community health nursing immersion. From the analysis of data, the four major themes provided were: unforgettable experiences being with people; facing challenges; contributions to self and the community; and impacts on their lives.

From Table 2, the emerging subthemes of "Unforgettable experiences being with people" which includes acceptance in the community; facing walls and open doors-problems and opportunities; and getting to know each other-deepening interpersonal relations. The student nurses will never forget how the people accepted and welcomed them. Moreover, as per observations of the researchers, every time they met the people either on their way to or from school where they stayed, the community folks smiled and greeted them



Table 2. *Unforgettable experiences: 'Being with People'*

Emerging Subthemes	Major Theme
Being with people-acceptance in the community	Unforgettable experiences: Being with people
Facing walls and open doors-problems and opportunities	
Getting to know each other-deepening interpersonal relations	

wholeheartedly. This gave the students strength and perseverance to do the tasks assigned to them. Another is dealing and communicating with the people in the community and the way the children interact as they approached them. Other unforgettable experiences included unavailability of water, walking along the mountains with friends, the smiles of the people around and the warmth of friendship, and going to the house of every family. As one participant said: "After surveying, they gave us bananas and mangoes. We appreciated their kind heart and hospitality (FGD 3, female, Level III)."

Student nurses likewise described their learning experiences as living beyond their comfort zone and unforgettable moments. The student nurses mentioned about how they had to deal with scarcity of water and the lack of personal space, among others. However, it was a challenge and a blessing at the same time, because they experienced the reality of life which made them grow as persons. As another Level III student nurse in the FGD espoused, "During the community immersion, we were able to explore and enjoy the scenery while walking, and we were also able to talk to different people."

The students think of these as unforgettable moments to cherish, such as one statement from a Level IV student in the FGD, "Living with the people who were once strangers, mingling with them, knowing their ways of life and learning new things not taught in school or learned from books."

Seeing all the community people smile and laugh made the student nurses feel welcomed and appreciated most especially during the community assembly. Furthermore, one participant proudly said that, "The community people made me realize how lucky I am in life (FGD 3, female, Level III)."

The learning experiences of student nurses are somewhat an 'eye opener' to them with respect to community health nursing. The learned concepts

and their expectations in the community have directed them to be more approachable, humble, facing the reality of life, and eventually growing as a person. It is interesting to note how community health nursing immersion has changed their perceptions of life. The community immersion influenced student nurses' satisfaction with their placements and the degree to which their experiences were regarded as positive (Edwards et al., 2004). Such circumstances are noteworthy in the light of research findings suggesting that graduates are more likely to seek employment in areas where they have had previous positive experiences (Talbot & Ward, 2000).

The results can also be regarded as aspirations and directions of the student nurses. Through community health nursing immersion, a nurturing and supportive environment can be created. Despite differences of the community people from the student nurses, the 'unforgettable experiences' manifest the important roles that College of Nursing students play in the development of students' confidence, organizational skills, and their preparedness for practice in the future. The increasingly complex healthcare environment requires a corresponding development in full breadth of nurses' knowledge, skills, and attitudes (Cheek & Jones, 2003). Practice placement enables one to experience the varied elements of the modern nursing role.

The emerging subthemes (Table 3) in "Facing challenges" include the community's lingua franca-learning the Ibaloi and Kankanaey tongue, the unending walks-traversing mountains to reach the people with different personalities and attitudes, and scarcity of resources specifically water as the source of well-being. What confronted the student nurses during community immersion was how they should deal with different attitudes and personalities and adapt to the people of the community.

The implication of these challenges in community immersion is that working under such circumstances



Table 3. *Unforgettable experiences: 'Facing Challenges'*

Emerging Subthemes	Major Theme
Community's Lingua Franca- learning the ¹ Ibaloi and ² Kankana-ey tongue	Facing challenges
Unending walks- traversing mountains to reach the people	
Scarcity of resources- water as the source of well-being	
Different attitudes, different personalities of the people	

needs perseverance, determination, interest in engaging in community immersion, becoming independent and responsible, making oneself better and making one proud of oneself. One male Level III participant in the FGD 3 defined his experiences as, "Being able to care, touch and empower others' lives."

Despite the challenges, most of the participants in the FGD found tremendous joy in doing their roles in the community, increased and developed their sense of responsibility, and helped them realize that their belief in God put them in the nursing profession for a reason.

This was also mentioned by a Level III male participant in the FGD 3 that:

Through community immersion, we are exposed to a totally different world. We have to deal with different attitudes and personalities of groupmates and the people of the community. We had to adjust and adapt greatly especially since the place is not our usual environment.

Moreover, some Level IV student nurses found it very difficult to adapt because of the students' difficulty in speaking the dialects. As one Level IV female participant reflected in the journal, "We do not know how to break the language barrier because we are unable to speak Kankanaey', Ibaloi', and barely understand as we speak Ilokano'."

Conversely, this was observed by the researchers during the home visits and community assemblies. Student nurses had difficulty speaking because of the language barrier. The community's lingua franca definitely was considered a cultural barrier in their community health nursing experience. Luthy, Beckstrand, & Callister (2013) explained that the development of cultural competence like learning

their dialects or language, practices, and beliefs in order to communicate among nursing students and community folks is an issue. It is a problem that needs an urgent solution if satisfactory community immersion results are desired. Multiple interactions with the same cultural population over several weeks are necessary to afford nursing students with opportunities to immerse themselves in the community's culture.

The unending hikes such as traversing mountains to reach the peoples' homes simply put them in a mountainous and rocky geographical setting in Benguet Province. Putting student nurses in this actual experience made them realize the essence of a community health nursing placement, compared to hospital experience. The long walks and problems on water are important issues that community health nurses should give attention to, especially in the Cordillera Region. Access to health care and sanitation are the prevailing problems in the community. On a positive perspective, as mentioned by a Level IV female student nurse in the FGD 4, "It was a challenge that we had to learn to view change as a natural phenomenon in our experiences."

This can be viewed as an opportunity to anticipate and plan for community health development strategies.

Dealing with the different attitudes and personalities of the people made the student nurses appreciate the essence of partnership and teamwork to achieve a common goal in their community health nursing immersion. As one participant mentioned during the FGD, community health nursing immersion changed his personality immensely. He was able to deal better with different attitudes and moods. Aside from this, being in a different place and mingling with other people made them less shy and taught them humility and kindness. Lastly, they discovered great things which made them



proud of themselves. Further, as one female (Level IV) participant said in the journal, “Community Organizing and Participatory Action Research (COPAR) makes me realize the essence of becoming a community health nurse.”

Despite the challenges faced by student nurses, it is the desire of the BSU College of Nursing to send student nurses for community health nursing immersion in the far-flung areas to fully understand and experience the actual scenario of a community with regard to public health issues. As indicated by Talbot and Ward (2000), rural placement programs improve the skills necessary for rural work, and increase appreciation for the variety of experiences offered in rural practice. It increases awareness of the multiple opportunities to practice skills during rural placements (Peach & Bath, 2000). In support of this, student nurses surveyed by Kinsella et al. (1999) saw clinical placement as relevant and useful, and a most influential aspect of student nurses’ education, more meaningful than classroom experience (Quinn, 2000).

The major theme (Table 4) was “Contributions to self and to the community: two-way responsibility” which included the emerging subthemes: building a community- community’s vision and consciousness raising; defining the community-assessment, gathering of data, diagnosing key health issues, implementation; community integration-individual, family, and community interaction; and voice of the community-advocacy of Community Organizing, Participatory Action Research and empowering people.

As some Level IV female participants of the FGD said:

“Simply being a part of this whole immersion is already valuable- being able to render service.”

“Giving health teachings and putting a smile on their faces were also worthy contributions.”

“The most valuable contribution to the community is giving health teachings and also being participative in activities assigned to them.”

“Managing the team is a learning experience to me. Each member of a team has his/her own contribution to the success of a plan.”

Everyone had a task to do and responsibilities to take. The students did their part and their work to the best of their abilities and did what were expected of them. The sub-themes were principally able to relate to the acquisition of skills, undertaking necessary assessment, planning and implementation, and supporting community people’s needs by providing health promotion information. As indicated in the results of one study (Baglin & Rugg, 2010), acquiring basic skills and knowledge was often student nurses’ primary placement learning goals.

The “Contributions to self and to the community” became: two-way responsibility, wherein both the student nurses; and the community have responsibilities. To empower the community towards self- reliance, a sustained partnership, and a ‘give and take’ approach is where success of the community health nursing program lies. Most of

Table 4. Unforgettable experiences: ‘Contributions to Self and to the Community’

Emerging Subthemes	Major Theme
Building a community- community vision and consciousness raising	Contributions to self and to the community: Two- way responsibility
Defining the community- assessment, gathering of data, diagnosing key health issues, implementation	
Community integration- individual, family, & community interaction	
Voice of the community- advocacy of COPAR and empowering people	



the statements of student nurses in their journals focused on their contributions to the experience; however, a team approach is highlighted as an instrument to utilize for the achievement of an area/activity assigned to them. Tasking and teamwork are important if one wants community immersion to become successful. This is strengthened by a study conducted in the United States, where 50% of the student nurses agreed that they indeed can make a difference in the communities they served (Luthy, Beckstrand, & Callister, 2013). What is important is how they appreciate their life-long experiences in order for them to apply what they have learned as community health nurses in the future. There is considerable evidence that undergraduate community health nursing immersion programs are successful at achieving these aims and despite the diverse, complex, and changing face of health care, the 'soon to be' registered nurses are well prepared for beginning practice in the community setting (Clare et al., 2002).

The significant subthemes also indicated increased level of confidence displayed by student nurses' practice of community health nursing built from community immersion related activities. They found positive attributes on how to contribute during their immersion. However, student nurses' confidence is fragile (Kelly, 1993) and needs careful nurturing if this is to survive in today's fast moving, complex healthcare world (Stockhausen, 2005). Recognized contributions of the student nurses and community people during immersion was found to be an effective approach.

The emerging subthemes (Table 5) of the major theme "Impacts on their lives" included: simple way of living; one simple act means a lot; sharing stories with community; community and student nurses—the spirit of comradeship; and community's environment—a time for relaxation and enjoyment.

They set the direction of community health nursing experience among student nurses as they create impacts on the community people's lives. Level IV female participants shared their experiences as reflected in their journals, to wit:

Despite the challenges we had in the community, our five-day stay was still memorable. As they say, one simple act means a lot. On my part, the families particularly in Sitio X, especially the children, showed cooperation in the services we rendered.

"How the people in that community share their stories with us, I missed the bond *na nabuo*." (How the people in that community share their stories with us, I missed the bonds formed) – P11 (Level IV, female).

"The bonding of the batch; I missed the joy of each and every one of us, the sharing of experiences of going to the different sitios of community X and most especially, the teamwork and cooperation of all"– P18 (Level IV, female).

"The simple and cool way of living in that community and of course, the warm acceptance" – P29 (Level IV, female).

It also entails creating an impact and change in their lives considered as life- long experiences. Four 4th year, female students mentioned in their journal that:

"It is the hospitality of the people to us. Even though we were there for a few days, they did their best to accommodate us and to tend to our needs" – P26 (Level 4, female).

Table 5. *Unforgettable experiences: Impacts on their Lives'*

Emerging Subthemes	Major Theme
Simple way of living	Impact on their lives
'One simple act means a lot'	
Sharing 'stories' with community	
The community and the student nurses: the spirit of comradeship	
Community's environment: a time for relaxation and enjoyment	



“The friendly approach and simple living of the people of community X. They have these personalities that make you want to live in the area for a longer period of time” – P23 (Level IV, female).

“The community per se: the beautiful sceneries that are unique to community X and the warmth of the people” – P28 (Level IV, female).

The people of the barangay we are tasked to help are so hospitable. My first impression of them was that they are not nice, that they were snobbish but, this changed when they invited us to their houses and they even gave us bananas and some mangoes. It was really a happy experience. We also got lost on our way but then it was the most joyful thing that all of us shared. We felt our tiredness vanish as we laughed going down the mountain. In addition, the children were very nice to us; I also enjoyed serving the people in simple ways like shampooing them and delousing them and sharing stories with them – P22 (Level IV, female).

The experiential learning activities in community immersion are instrumental in the appreciation of how community health nursing should be approached and delivered. The themes posit understanding and become a venue for the realization of some of their expectations of what CHN is all about. This can be an excellent illustration of how students' learning experience makes it memorable and enjoyable. It can transform them into new social beings, responsive to peoples' needs, and to the environment as a whole.

A study in Australia (Clare et al., 2002) found that community immersion provided them with quality learning experiences that meet the growing demands needed for the completion of their studies. This can also be an indication of returning to one's own community for social change. As reflected in the learning experiences, the students saw building relationships with people as rewarding and directly relevant to their learning outcomes. These findings agree with the recommendations in the study of Dornan and Bundy (2004) on the value of placing students in the practice area early in their professional education. Stockhausen (2005) identified positive accounts of placement learning of student nurses such as feeling welcome through

a friendly and approachable manner, and enhancing their practice placement learning experiences. Mentors or community instructors' roles are also fundamental to student nurses' smooth entry into the practice environment, influencing both the nature and quality of placement experiences, be they ward or community-based (Lambert & Glacken, 2005).

Community health nursing immersion is a time for relaxation, enjoyment, and establishing camaraderie as indicated by student nurses' learning experiences. This is true in one study in Iran where student nurses considered their community health nursing training courses as opportunities for fun and leisure (Moonaghi et al., 2012). Further, given the complexities of their learning experiences, this shows that student nurses need quality practice placement learning (Baglin & Rugg, 2010).

CONCLUSIONS

The significance of varied and real life learning experiences of students is indispensable as a source of evidence-based practices in nursing education. The student nurses' reflective journals, focus group discussions, and observations of the researchers revealed multi-faceted learning experiences in their community-based nursing practice placements which generated four major themes after careful analyses and deliberations. The student nurses described their learning experience in community health nursing as having unforgettable experiences, facing challenges, creating impacts on their lives, and leading them to have contributions to self and to the community. Evidence of improvement in the nursing students' beliefs and perceptions of community health nursing was seen in the results that would influence and expound understanding about the program. This study fills the gap and increases understanding on the learning experiences of student nurses in community health nursing education. Further, because of the complexities of their learning experiences, student nurses need better practice placement learning.



RECOMMENDATIONS

The real community health nursing experiences of students should be treasured in nursing education and strategies on improving learning experiences be identified. The depth and breadth of student nurses' experiences may be given an equal weight as a Related Learning Experience requirement (like more hours to be allotted and selection of areas for immersion should be considered). This study found significant results relating to culture; thus, this suggests that cultural competence as a skill be integrated in their community health nursing training before community immersion. The basic dialects of the communities where the students are usually sent for immersion, health and illness practices, and other related cultural practices that may affect their community health nursing experience may likewise be considered.

With this, the researchers suggest that the Colleges of Nursing should allot at least two to three rotations in a semester for community immersion to respond to the issue of cultural barriers especially dialects of the community people.

Most of the themes reflect positive learning experiences which the College of Nursing may consider in devising tips for teaching and learning activities about community health nursing considering unique attitudes of Benguet people. This study likewise recommends a cultural intervention guide and community immersion as policy approach and how a nursing college's community health nursing can be advanced and developed that would direct the transformation and realization of student nurses' response to this related learning experience.

The researchers failed to discriminate qualitative data by sex and year levels of participants in the analysis. It would be interesting to see in other qualitative studies the themes arising from year level and sex considering this as part of the rigor and trustworthiness of the process and data. There is a need of using other methods and varied data gathering procedures, and sex and year level qualitative data must be analyzed separately. A follow-up quantitative study including cultural competence among student nurses using a survey questionnaire are highly recommended to expound the results of this study. Further, exploring the impacts of community health nursing is part of imperative research agenda needed among Schools of Nursing.

REFERENCES

- Adams, V. (2002). Consistent clinical assignment for nursing students compared to multiple placements. *Journal of Nursing Education*, 41 (2): 80- 82.
- Ajiboye, P. (2000). Learning partners. *Nursing Standard*, 14 (52): 34.
- Baglin, M., & Rugg, S. (2010). Student nurses' experiences of community-based practice placement learning: A qualitative exploration. *Nurse Education in Practice*, 10(3), 144-152. doi:10.1016/j.nepr.2009.05.008
- Chan, D. (2002). Development of the clinical learning environment inventory: Using the theoretical framework of learning environment studies to assess nursing students' perceptions of the hospital as a learning environment. *Journal of Nursing Education*, 41(02), 69-75.
- Cheek, J., & Jones, J. (2003). What nurses say they do and need: Implications for the educational preparation of nurses. *Nurse Education Today*, 23(1), 40-50. doi:10.1016/s0260-6917(02)00163-6
- Clare, J., White, J., Edwards, H., & Van Loon, A. (2002). Curriculum, clinical education, recruitment, transition and retention in nursing. *Adelaide: School of Nursing and Midwifery, Flinders University*.
- Creswell, J. W. (2009). *Research design qualitative, quantitative and mixed methods approaches*. Thousand Oaks: Sage.
- Conway J. & McMillan, M. A. (2000). Maximizing learning opportunities and preparing for professional practice. In: J. Daly, S. Speedy & D. Jackson (eds) *Contexts of Nursing: An Introduction*. MacLennan and Petty, Sydney.



- Dalton, A., Ahmed, I., & Sawan, J. E. (2011). *To 52nd Annual Adult Education Research Conference and the 30th National Conference of the Canadian Association for the Study of Adult Education* (pp. 155-162). Toronto, ON, Canada: New Prairie Press. doi:http://newprairiepress.org/cgi/viewcontent.cgi?article=3148&context=aercthe
- Dornan, T., & Bundy, C. (2004). What can experience add to early medical education? Consensus survey. *Bmj*, 329(7470), 834. doi:10.1136/bmj.329.7470.834
- Edwards, H., Smith, S., Courtney, M., Finlayson, K., & Chapman, H. (2004). The impact of clinical placement location on nursing students' competence and preparedness for practice. *Nurse Education Today*, 24(4), 248-255. doi:10.1016/j.nedt.2004.01.003
- Ervin, N., Bickes, J., & Schim, S. (2006). Environments of Care: A curriculum model for preparing a new generation of nurses. *Journal of Nursing Education*, 45(2), 75-80.
- Kelly, B. (1993). The real world of hospital nursing practice as perceived by nursing undergraduates. *Journal of Professional Nursing*, 9(1), 27-33.
- Kinsella, F. E., Williams, R. W., & Barbara, G. F. (1999). Student nurse satisfaction: Implications for the common foundation programme. *Nurse Education Today*, 19(4), 323-333. doi:10.1054/nedt.1999.0644
- Lambert, V. & Glacken, M. (2005). Clinical education facilitators: A literature review. *Journal of Clinical Nursing*, 14(6), 664-673. doi:10.1111/j.1365-2702.2005.01136.x
- Luthy, K. E., Beckstrand, R. L., & Callister, L. C. (2012). Improving the community nursing experiences of nursing students. *Journal of Nursing Education and Practice*, 3(4), 12-20. doi:10.5430/jnep.v3n4p12
- Moonaghi, H., Heydari, A., Taghipour, A., & Ildabaradi, E. (2012). Challenges of community health nursing education in Iran. *IJCBNM*, 1(1), 62-68.
- Peach, H., & Bath, N. (2000). Comparison of rural and non-rural students undertaking a voluntary rural placement in the early years of a medical course. *Medical Education*, 34(3), 231-233. doi:10.1046/j.1365-2923.2000.00515.x
- Polit, D. & Beck, C. T. (2012). *Nursing research: generating and assessing evidence for nursing practice*. Wolters Kluwer Health/Lippincott Williams & Wilkins, Philadelphia.
- Quinn, F. M. (2000). *Principles and Practice of Nurse Education* (4th ed.). Stanley Thornes, Cheltenham.
- Santos-Reyes, A. (2016). Intimate partner violence from the perspective of Cavitenas: Its implications to the nursing profession. *Philippine Journal of Nursing*, 86(1), 39-47.
- Stake, R. E. (2010). *The art of case study research*. Thousand Oaks, Calif.: Sage Publ.
- Stockhausen, L. (2005). Learning to become a nurse: Student nurses' reflections on their clinical experiences. *Australian Journal of Nursing*, 22(3), 8-14.
- Streubert, H. J. & Carpenter, D. R. (2011). *Qualitative research in nursing: Advancing the humanistic imperative*. China: Wolters Kluwer/Lippincott Williams and Wilkins
- Talbot, J. & Ward, A. (2000). Alternative Curricular Options In Rural Networks (Acorns): Impact Of Early Rural Clinical Exposure In The University Of West Australia Medical Course. *Australian Journal of Rural Health*, 8(1), 17-21. doi:10.1046/j.1440-1584.2000.81237.x
- Tolhurst, G. & Bonner, A. (2000). Development of Clinical Assessment Criteria for Postgraduate Nursing Students. *Collegian*, 7(2), 20-25. doi:10.1016/s1322-7696(08)60361-3
- Vaismoradi, M., Turunen, H., & Bondas, T. (2013). Content analysis and thematic analysis: Implications for conducting a qualitative descriptive study. *Nursing & Health Sciences*, 15(3), 398-405. doi:10.1111/nhs.12048
- Williams, A. F., Wellard, S., & Bethune, E. (2001). Assessing Australian undergraduate clinical Learning. *Collegian*, 8(4), 9-13. doi:10.1016/s1322-7696(08)60028-1

