

Research Article

# Navigating Challenges and Opportunities in Nursing Education: Insights from Student Nurses at the National University of Lesotho

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## Abstract

**Background:** Globally, student frustration and attrition rates are declining, underscoring the importance of investigating the academic and interpersonal challenges that students face after their first year. **Objectives:** exploring the experiences of National University of Lesotho student nurses on their course of education. **Method:** A qualitative phenomenological research design was used to conduct research at the National University of Lesotho. Data was collected using an unstructured interview guide in two focus groups comprising all student nurses who are enrolled in the nursing and midwifery programme from their second year into the programme. This study employed a stratified random sampling procedure to select its respondents. This study made use of thematic analysis. **Results:** The results demonstrated clinical weariness caused by a severe workload. The tasks and responsibilities assigned to the students, which they consider to be the duties of registered nurses, frequently leave them feeling overburdened. Variations in clinical supervision experiences include negligence; some experience sexual abuse; and some students find the clinical setting quite unpleasant and inappropriate. On the other hand, students expressed that they are empowered by the current nursing curriculum to face the clinical challenges. **Conclusion:** Despite appreciating the faculty's supportive and inspiring environment, students had conflicting emotions about the instructional approaches and learning environments. There were variations in both instructional quality and clinical supervision.

## Keywords

Nursing Education, Student Nurses, Clinical Supervision, Educational Challenges, Lesotho Nursing Programs

## 1. Introduction

Globally, there is a lot of attention to how students advance in higher education. Organisations understand that in order to maximise accomplishment and reduce attrition, they must maximise student support [1]. Preregistration nursing students must strike a balance between professional and academic success as well as integration into practice environments. In

order to ensure competency at registration and to facilitate the establishment of bridges between theory and practice, learning in clinical areas is essential.

In order to obtain the necessary credentials for patient care, nursing students must use their knowledge and abilities in clinical settings, and effective clinical training is a major

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factor in determining their success. The cornerstone of nursing education is widely recognised as clinical training. Additionally, the clinical learning environment is crucial in transforming nursing students into professionals and equipping them with the skills necessary to practice nursing [17]. A clinical learning environment is made up of several organisational, psychological, emotional, and physical elements that have an impact on how students learn and interact with their surroundings [2].

The plethora of instruments designed to assess learning settings bears witness to their educational significance. One of these, the Clinical Learning Environment, Supervision, and Teacher Scale, was created in 2008 with the goal of assessing nursing students' attitudes towards clinical placement on a multifaceted level and gauging the standard of clinical education in hospital units [3].

One essential part of nursing school is the supervised hospital experience that students must have. The education and training of student nurses at the National University of Lesotho (NUL) is vital to the healthcare system of Lesotho, a landlocked nation tucked away in the centre of Southern Africa. In order to prepare them for the onerous obligations of providing healthcare in a variety of settings that are frequently tough, student nurses must complete rigorous academic and practical training programs. These student nurses' educational experiences have had a significant impact on who they are as professionals and how they will contribute to healthcare delivery in the future [4].

Nursing students face numerous obstacles and issues upon entering the clinical setting, which have an impact on their ability to learn there. Nursing students' lack of readiness and concern in clinical learning contexts has been attributed mostly to fear, worry, and bewilderment, as well as to quitting the profession [2, 14]. Comprehending these encounters is crucial for enhancing pedagogical approaches as well as guaranteeing the health and readiness of Lesotho's future medical professionals. As the nation's main nursing school, the National University of Lesotho is in a unique position to mould the next wave of nurses who will skilfully and compassionately serve their communities.

In order to better understand the lived experiences of student nurses at NUL, this study examined a number of topics, including academic difficulties, clinical placements, mentorship opportunities, and the sociocultural environment that influences their educational path. By documenting these experiences, the researchers hoped to better understand the curriculum's strengths, weaknesses, and opportunities for development at NUL. This will help to advance nursing education and the development of capable and resilient healthcare workers in Lesotho.

Additionally, this study supports larger national and worldwide initiatives to improve healthcare systems by employing skilled nurses who can adapt to the changing demands of a variety of patient populations. Giving voice to the NUL student nurses, this study aims to bring to light their view-

points, goals, and difficulties in order to provide a better understanding of the educational environment and how it affects future healthcare outcomes in Lesotho.

## 2. Materials and Methods

*Study design:* a qualitative phenomenological approach was used. *Setting:* The study was conducted at the National University of Lesotho from April to June 2024. The National University of Lesotho is a tertiary institution situated at Roma, 34 kilometres south-east of south-east of Maseru town, the capital of Lesotho. *The Study population and sampling strategy:* The target population for this study was defined to include all student nurses who are enrolled in the nursing and midwifery programme from their second year into the programme. This study employed a stratified random sampling procedure to select its respondents.

*Data collection:* data was collected using an unstructured interview guide in two focus groups composed of students from each year, respectively. One focused group discussion took place in one of the hospital halls during clinical placements, while the other was through Google Meet. A hard copy of the consent form was given to respondents in physical focused groups, and a replica of it was given to those online. At the start of each discussion, the researcher highlighted the purpose of the study and the potential inclusion of their responses in the report. For clarification purposes, the researcher revisited the operational definitions of the study for respondents to gain familiarity. The interview formulation was guided by the analysed quantitative data. Each focused group discussion session was audio-taped and lasted about 25 minutes. *Data analysis:* This study made use of thematic analysis and quotations. *Ethical clearance:* The researcher obtained ethical clearance from the National University of Lesotho Faculty of Health Sciences Institutional Review Board and the Ministry of Health of Lesotho (ID 1149-2024).

## 3. Results

### *Demographic information*

Eight students, equally distributed among the years of study, participated in this study. Out of this, five (62.5%), two (25%) were male, and one (12.5%) was gay. They were all in the age range of 18–24 and had no prior undergraduate experience in nursing.

*Experiences of student nurses at the National University of Lesotho concerning practical or clinical placement and interactions with faculty members during their education.*

### 3.1. Theme 1: Clinical Exhaustion Due to a Burdensome Workload

The tasks and responsibilities assigned to the students,

which they consider to be the duties of registered nurses, frequently leave them feeling overburdened. Their lives are impacted in a number of ways, including their academic work, extracurricular activities, and general productivity in the clinical setting. The arduous task is further increased by the assignments that are provided at schools and hospitals. These difficulties all lead to tension and mental exhaustion.

Respondent 4: *"I'd say the most significant challenge is having to do a lot of work as though we're registered nurses already and it limits productivity in affairs outside formal education being received."*

Respondent 6: *"It's difficult to follow-up on assignments we're usually given at the hospital, or manage side hustles or hobbies, since we return home late and exhausted, already preparing for the next day."*

## 3.2. Theme 2: Diverse Experiences in Clinical Supervision

### 3.2.1. Subtheme: Neglect by Nurses

Students draw attention to startling details of supervisors' and nurses' negligence, emphasising the clinical assessments. It conveys the idea that students are competent enough to not need supervision when supervisors do not visit placements to evaluate the students. Moreover, this could have an impact on achieving therapeutic goals during the pertinent research years.

Respondent 5: *"We do a 6-week clinical placement and the clinical supervisors never come to the institution. The nurses treat us like we're competent."*

The gap in supervision is very large. The wards are pre-occupied with nurse staff below the level of education of student nurses. In turn, most students are not supervised or guided very often. The disparity affects the learning outcomes and experience of the student.

Respondent 4: *"You find that, there are more nursing assistants than registered nurses in the ward, and we were told that we couldn't be supervised by nursing assistants because we do a degree course. The RNM only supervised me twice in my third-year clinical placement."*

### 3.2.2. Subtheme: Supportive Supervision

Students work with supervisors who are supportive in their approach and demeanour. Supervisors in clinical environments provide a well-rounded and conducive place to meet learning objectives without fear of judgement. Students are also encouraged to think outside the box and pursue more knowledge beyond nursing. Furthermore, clinical skills are polished instantly in the presence of clinical instructors who engage with students. Documentation and assessment of procedures aid in immediate feedback.

*"I worked with people who are really nice to us. They explain. Want us to ask any questions and explain thoroughly. They also want us to try new things such as procedures and*

*documentation. They also encourage us to study further"*  
*"When the clinical instructor came here, he helped me with certain procedures and clarified documentation of the midwifery register."*

## 3.3. Theme 3: A Hostile Clinical Environment

Students feel that the clinical environment is very unsuitable and unfriendly at times. They highlight deep issues, including workplace power dynamics, sexual harassment, and educational bias.

### 3.3.1. Subtheme: Power Dynamics

The students view the imbalance of power in the clinical setting negatively. A minority of the staff who treat the workplace as if it were all theirs intimidate students, leading to feelings of helplessness, an uncomfortable atmosphere, and a reluctance to challenge inappropriate behaviour. Apart from that, students are not able to assert themselves or question decisions, which fuels resentment and fury.

*"There are some who make us feel we don't belong here, it's their workplace and we have no say whatsoever and that really pisses me off."*

*"From there, Eish! Staff are sometimes difficult on us in the sense that they don't want us around them in the staff rest and it makes it difficult to communicate with them."*

### 3.3.2. Subtheme: Sexual Harassment

Female students are concerned about the inappropriate sexual advances by authority figures in the staff and emphasise the unacceptability of such approaches. Furthermore, there seems to be an occasional crossing of ethical boundaries, with the aftermath of students' distress and uncertainty over the appropriateness of exercising their rights over what constitutes right and wrong for them.

*"As students, we come across staff that approach us sexually and that is not okay."*

*"This Doctor in Surgical OPD told me blatantly that he wants me to be his girlfriend. I was dumbfounded by this because he had been telling me about his wife and family. I replied with a clear no and went about telling him to take care of his family and how inappropriate it was to hit on me. This was followed by the awkward silence and he took that personally. I really didn't know what to do. Do I apologize for saying no?"*

### 3.3.3. Subtheme: Educational Bias

There is education-based discrimination against NUL students due to perceived ineffectiveness and a lack of clinical skills. Once again, this segregation from learning occasions in clinical practice impacts the learning objectives.

*"I overheard one nurse saying she prefers working with Diploma [in nursing and midwifery] because they are efficient and fast."*

Influence the of nursing education on career aspirations of student nurses.

Respondents communicated positive sentiments about the relevance of nursing education at NUL. Two themes were identified from the transcribed texts.

### 3.4. Theme 4: Unprecedented Scope of Nursing Education

Students feel that the nursing education at NUL broadens their perspectives and skills to go above and beyond. They also appreciate the relevance of nursing education in not only health care but also in their peers and communities.

#### 3.4.1. Subtheme: Empowerment to Raise Awareness

Nursing education at NUL emphasises the significance of peer health education. Students felt that with their academic skills, they could raise awareness among their friends and their community.

Respondent 1: *“Nursing education has introduced a new perspective on the need for health education amongst peers.”*

Respondent 5: *“I remember in third year when my now 20-year old sister, then 15 years old, went for her first period, she was terrified of the blood. Me being familiar with menstrual cycle, I was able to explain to her how and why she had blood.”*

Respondent 6: *“People do not understand me and my sexuality. I didn't too. But I got to explain to my family about my biological make-up and it made all the difference.”*

#### 3.4.2. Subtheme: Interdisciplinary Relevance

Students feel that the education provided is comprehensive and very relevant to various industries beyond their scope of practice. This may make students aware of positions in healthcare.

Respondent 3: *“The kind of nursing education provided at NUL is broad in the sense that it speaks to health in different industries.”*

#### 3.4.3. Subtheme: Opportunity to Pursue a Health-Related Profession

Nursing education has fostered awareness beyond nursing. This, in its entirety, says nursing can be used as a stepping stone to other horizons and fields. Students often envision themselves in healthcare roles they had not taken to mind because of the versatility of their education curriculum.

Respondent 3: *“One would've thought that nursing would lead to someone having to work as a nurse, but as we've been proven, it introduces the opportunity to go into other health/medical fields. So, it's interesting to think of possible careers we could venture into.”*

*“Yeah, I know of the Mr. X who says he started nursing at*

*NUL with the Dean before pursuing medicine.”*

## 4. Discussion

Student nurses' experiences are split into clinical categories such as the role of a nurse instructor, the supervisor-student interaction, and the learning environment. The fact that students' experiences in the clinical setting were largely favourable is a key finding from the study. This result is in line with recent studies that found students' clinical experiences to be usually pleasant [5].

According to the results of the current study, students felt that the clinical setting offered worthwhile learning opportunities. What is taught in lecture halls and what takes place in a clinical setting are two different things. However, a qualitative investigation showed that learning environments have a price because students reported feeling overburdened by work that they thought belonged to registered nurses, which resulted in exhaustion, stress, and a decline in productivity. Nursing students who have a heavy workload experience psychological stress and worry, which may have a detrimental effect on their learning engagement [6, 15].

A virtually equal set of results on the item indicates that students' comfort levels when participating in staff talks were divided. Students impacted by sexual harassment, educational bias, and hierarchical dynamics provide an explanation for these findings. These components partially mirror other research, which claimed that students are at the bottom of the food chain and are therefore frequently abused or feel excluded from the group out of fear of repercussions [7].

Additionally, because the supervisor was generally seen as having a good attitude towards supervision, the majority of students reported having a positive experience with their clinical supervisor. The goal of nurses is to mentor their future colleagues. The students' report of supportive supervision, in which supervisors led, supported, and nurtured learning, supports the finding.

Students, on the other hand, also complained about inconsistent supervision, carelessness on the part of nurses, and—worst of all—clinical professors who failed to visit the clinical environment. These results are consistent with a larger body of research showing that teachers do not provide enough supervision to nursing students [8, 14]. The inference is that students are left feeling helpless and unsure of their progress when supervisors are not present. According to published reports, nurses feel overburdened by their teaching responsibilities, which may be impacted by clinical instructors, their perception of their role in the learning process, and the length of their placement [9, 16].

A significant finding about the function of the nurse teacher that can be drawn from the quantitative data is that the students felt good about their interactions with the teacher. The nurse teacher was able to close the knowledge gap between theory and practice, according to item analysis. The results of this study are consistent with those of Strandell-Laine et al.,

where students reported feeling that the nurse teacher was cooperative and cooperative in their pedagogy throughout their final clinical practicum [10].

When applying information in a therapeutic setting, the integration of theory and practice is essential. The educational bias theme emphasises how students' comfort in meetings and with staff is affected by the isolation that they experience as NUL students. Students and nurses who worked at the individual CHAL hospitals, which already have their own nursing schools, are in danger from NUL students.

This study expanded on our knowledge of the general influence of nursing education on the goals that student nurses have for their future. The qualitative findings showed that the NUL nursing curriculum broadens students' perspectives and competencies, which aligns with the experience's dynamic and socially conscious nature as described by Acampado [11].

Feedback from students indicated that they can apply what they have learned in school to their peer networks. A comprehensive nursing education that prepares students to promote public health literacy and the intersectionality of social determinants of health in extremely varied communities is crucial, as evidenced by the students' sense of empowerment. A cross-sectional study conducted at a university in Namibia revealed that systematic health practice education and literacy are significant for a population's overall health [12].

The curriculum opens options for students to pursue other health-related careers in addition to training them for typical nursing responsibilities. Students also said that the curriculum had helped them broaden their professional horizons by introducing them to a range of healthcare careers that they had not before considered. The flexibility and depth of training offered by NUL in nursing discourage students from perceiving it as a stepping stone to other professions. Students' reports of empowerment and interdisciplinary relevance are consistent with the findings of Etikariena and Widyasari (2020) who highlighted that students who feel empowered are more likely to engage in innovative work behaviors, which are essential for their future professional environments [13].

It is crucial that there be a well-established mentorship programme with faculty members or experienced nurses who can help students along the way. Department heads should also make sure that students receive comprehensive and varied clinical placements that expose them to a variety of specialties and healthcare settings, as well as incorporate wellness programmes into the curriculum that emphasise stress management, mindfulness, and resilience-building techniques. Finally, department heads should routinely check in with students to provide guidance and support during their clinical placement.

## 5. Conclusions

The results highlight the need of creating a supportive learning environment for student nurses, who are essential users of the educational system. The students had a positive

perception of the quality of education and reported that the program as a whole had given them practical knowledge and skills. Students were suitably equipped for a variety of health care vocations by the program's comprehensive character.

There were conflicting opinions regarding the teaching strategies and learning environment, despite gratitude for the faculty's ability to create a helpful and empowering atmosphere. The standard of clinical supervision and instruction varied. Positive interactions with the nurse instructors, however, were discovered to be significant factors in creating a safe learning environment.

Overall, the clinical atmosphere was enjoyable, with nurse teachers offering encouragement and support. However, there were still significant problems that were to be resolved, including hostile environments, poor feedback, and negligence on the parts of clinical instructors and nurses. These problems made it more difficult to achieve the clinical goals.

## 6. Limitations of the Study

Because the time of the survey coincided with the second semester tests, there was a low response rate among students and an overall unwillingness to participate in the study.

## Abbreviations

NUL National University of Lesotho

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## Author Contributions

**Molefi Eliot Molefi:** Data curation, Formal Analysis, Investigation, Methodology, Project administration, Resources, Writing – original draft

**Mamello Regina Mpemi:** Conceptualization, Resources, Supervision, Validation, Writing – review & editing

**Letuka James Phiri:** Conceptualization, Resources, Software, Validation, Visualization, Writing – original draft, Writing – review & editing

**Bokang Amelia Mahlelele:** Conceptualization, Resources, Validation, Visualization, Writing – review & editing

**Titi Nelly Nthabane:** Resources, Validation, Writing – review & editing

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## Data Availability Statement

The data will be made available upon the authors' request for permission.

## Conflicts of Interest

The authors declare no conflicts of interest.

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## Research Fields

**Molefi Eliot Molefi:** Nursing education, Curriculum development, Educational psychology, Clinical education, Career development

**Mamello Regina Mpemi:** Nursing administration and management, Maternal and child health, Nursing education, Open and distance learning, Sexual and reproductive health

**Letuka James Phiri:** Pandemics and outbreaks, Communicable and non-communicable diseases, Primary healthcare, Sexual and reproductive health services, Community Health Models, Rehabilitation & Chronic Diseases

**Bokang Amelia Mahlelele:** Nursing education, Postgraduate supervision, Nursing students wellbeing, Communicable and non-communicable diseases, Adult health, Innovation in Nursing

**Titi Nelly Nthabane:** Nursing and midwifery education, Curriculum development, Simulation-based education, Maternal and child health care, Sexual and reproductive health, Nursing politics and policy