

# **THEORY-PRACTICE GAP: PERCEPTIONS OF NURSE FACULTY, NURSING STUDENTS, AND CLINICIANS IN GHANA**

**BY:**

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# LEARNER OBJECTIVES

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**At the end of this presentation the learner will be able to:**

- ❑ Describe theory-practice gap from the perspective of nurse faculty, clinicians, and nursing students in Ghana**
- ❑ List at least five effects of TPG in nursing practice**
- ❑ Outline at least five factors influencing TPG in the Ghanaian context**
- ❑ Enumerate at least three contemporary strategies for theory, practice integration.**

# OUTLINE

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- Introduction/Background
- Aim of the study
- Research Objectives
- Conceptual framework
- Methods
- Results and discussion
- Conclusion
- Strengths and Weaknesses
- Implications/Recommendations
- References

# INTRODUCTION/BACKGROUND

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- ❑ Globally the goal of nursing education is to ensure professional clinical competence
- ❑ There appears to be a decline in the clinical competence of nurses
- ❑ Pre-registration nurses are emerging from nursing education programmes without essential clinical skills (Glen, 2009)
- ❑ Graduate nurses though proficient in theory, are less proficient in clinical skills at the time of registration (Glen, 2009)
- ❑ Steady fall of the image of nursing in Ghana due to poor nursing care (GRNA, 2011)

# INTRODUCTION/BACKGROUND...

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- ❑ **Effective theory-practice integration is pivotal in ensuring clinical competence**
- ❑ **Unfortunately, there exists a wide theory-practice gap (TPG) in nursing education defying resolution**
- ❑ **TPG - disparities that exist between content taught in the classroom and simulation labs and those encountered in the real clinical environment**

# INTRODUCTION/BACKGROUND...

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□ Review of the literature (Europe, North America & Australia) provides support for the existence of TPG in nursing

(Gardner, 2006; Haigh, 2008; Landers, 2000; Maben, Latter, & Clark, 2006; Rafferty, Allcock, & Lathlean, 1996; Sellman, 2010; Sullivan, 2010; Wilson, 2008).

# INTRODUCTION/BACKGROUND...

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- ❑ TPG challenges the basis of contemporary nursing practice: EBP (Scully, 2010; Webber, 2010)
- ❑ TPG influences the delivery of competent nursing care and patient outcomes
- ❑ TPG results in medication errors & poor nursing care decisions (Gregory et al., 2009; Jones & Treiber, 2010)
- ❑ TPG adversely impacts professional socialisation (Maben et al., 2006)

# INTRODUCTION/BACKGROUND ...

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- ❑ There is paucity of research on TPG in sub-Saharan Africa (SSA) (Lugina, 2009)
- ❑ Consensus among Ghanaian educators and practitioners on TPG existence
- ❑ Unique context of nursing and healthcare in Ghana & other nations of SSA
- ❑ Context specific knowledge on TPG enables development of effective strategies



# AIM of STUDY

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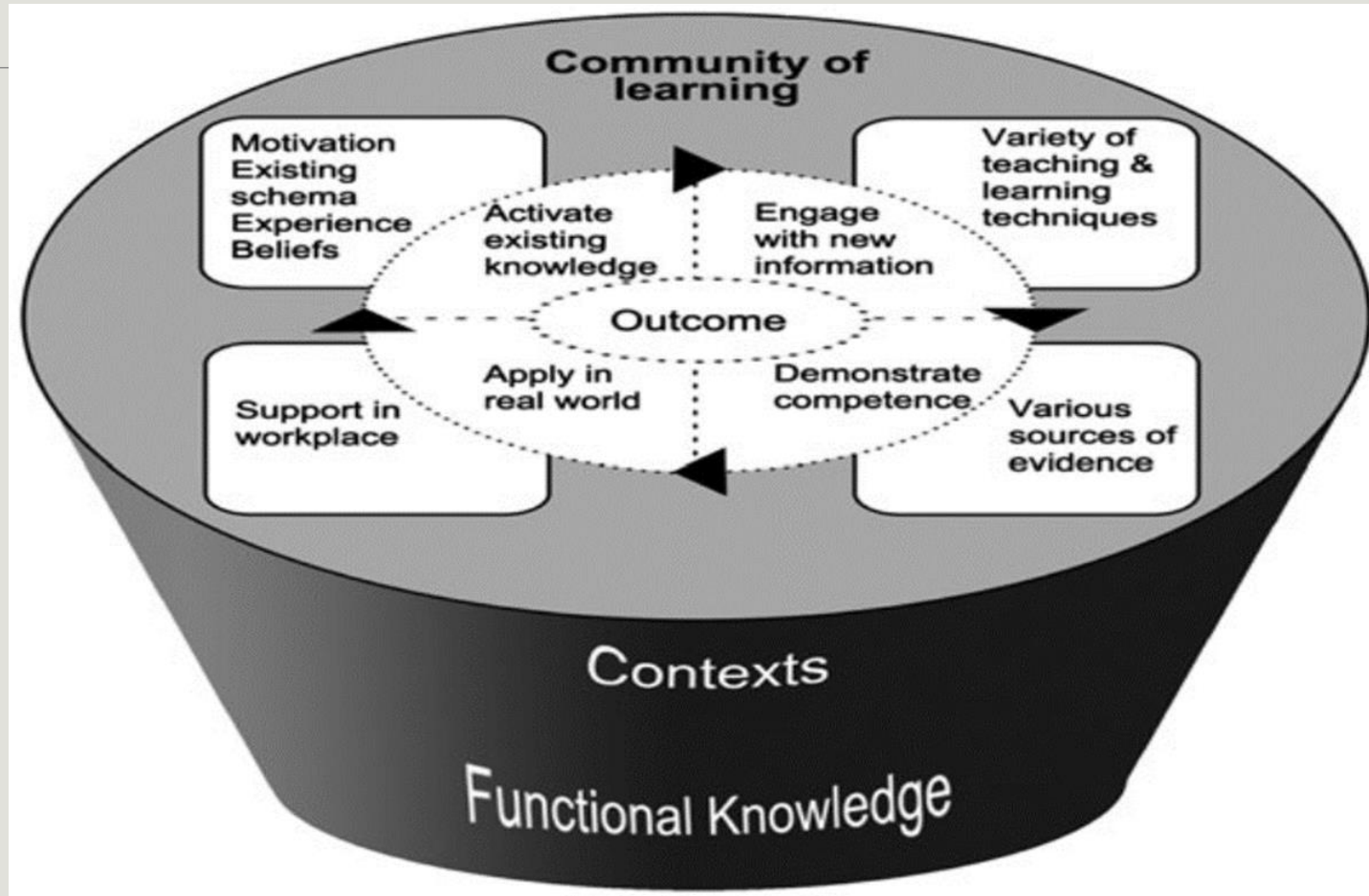
**To explore the understanding of TPG from the perspective of nurse faculty, clinicians & nursing students within the context of Africa (Ghana).**

# RESEARCH OBJECTIVES

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- To explore nurse faculty and clinicians' understanding of TPG in nursing education and practice
- To explore efforts nurse faculty and clinicians were undertaking to bridge TPG
- To explore the experiences of postsecondary bachelor of nursing students on TPG

# CONCEPTUAL FRAMEWORK FOR THE STUDY



Adopted from Botma, Van Rensburg, Coetzee, and Heyns' (2015)

# METHODS

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- **Descriptive phenomenology**
- **Purposive sampling**
  - **Original and rich data**
- **32 study participants**
  - **8 nurse faculty**
  - **12 clinicians**
  - **12 nursing students**

# DATA COLLECTION AND ANALYSIS

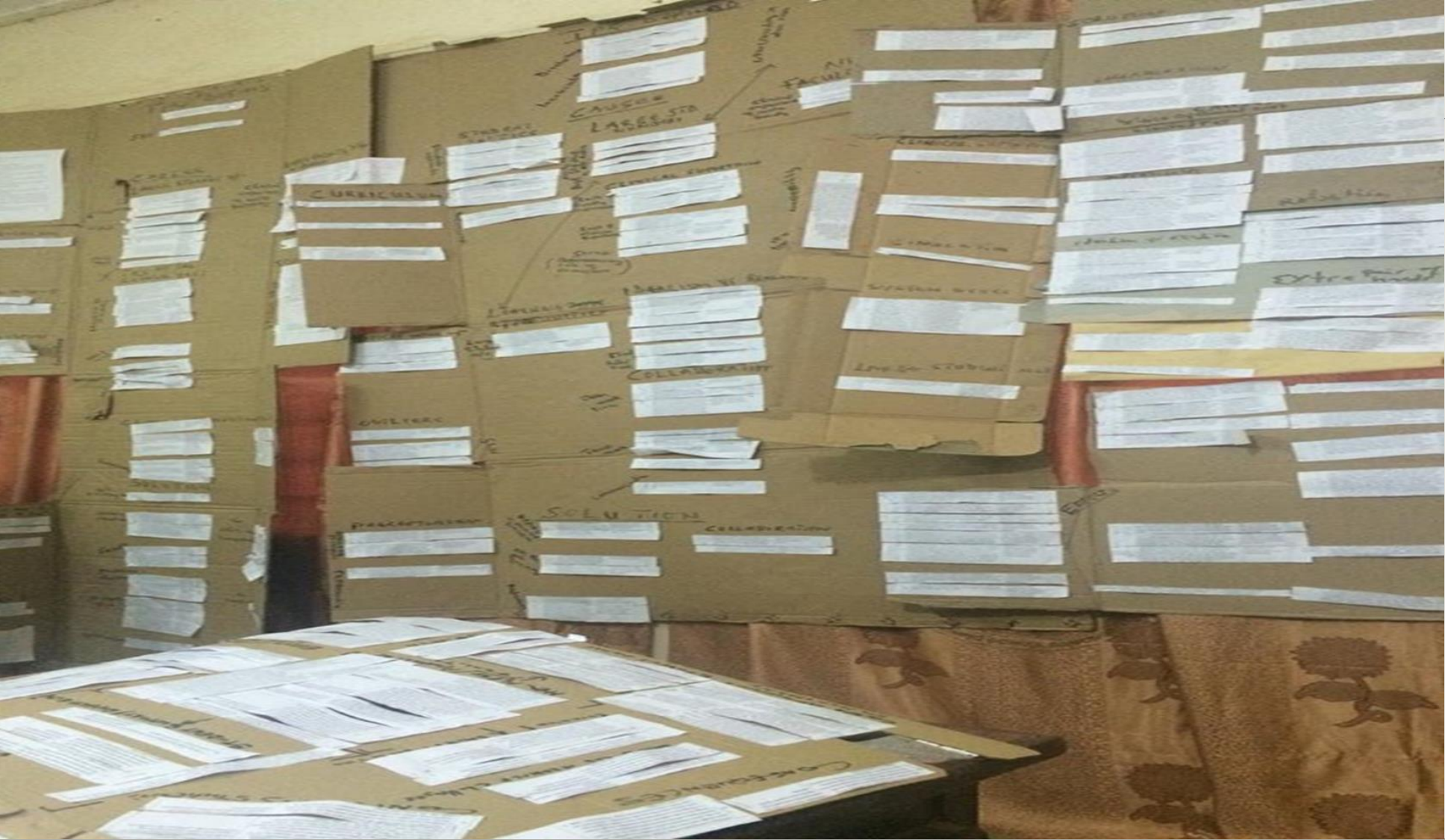
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Focus group discussions

Topic guide

Colaizzi's descriptive phenomenology data analysis process

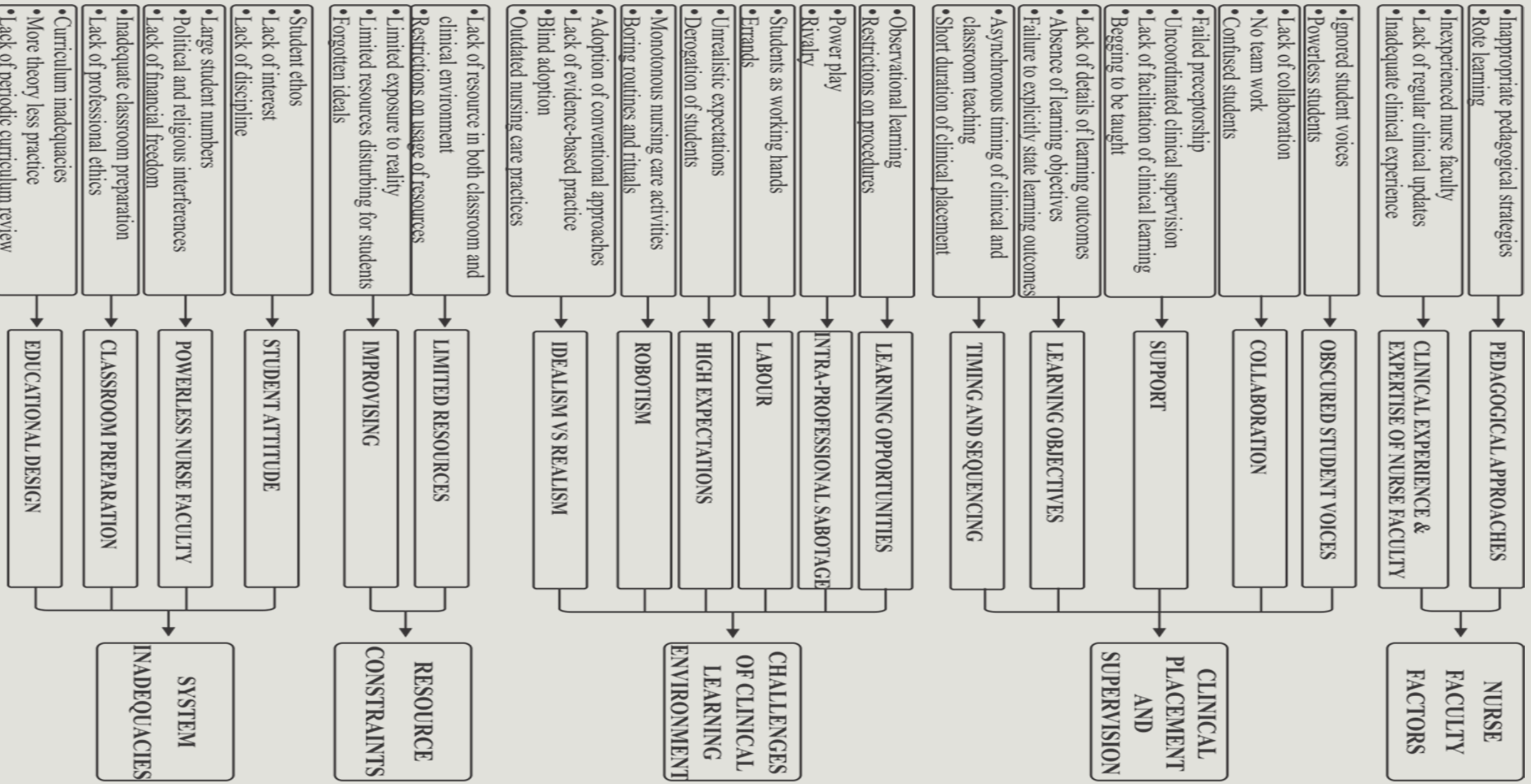
# Data Analysis Process (in action)



# FINDINGS & DISCUSSION

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**SUB-CLUSTER THEMES**

**CLUSTER THEMES**

**EMERGENT THEMES**



# Results

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- ❑ Findings of this study confirmed the existence of TPG in the Ghanaian context of nursing education and practice
- ❑ Adds to the growing literature acclaiming TPG as a global phenomenon.

# Main Finding: Themes

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- System inadequacies
- Resource constraints
- Challenges of clinical learning environment
- Clinical placement and supervision
- Nurse faculty factors

# Theme One: System Inadequacies

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- ❑ Powerless nurse faculty
- ❑ No control over the number of nursing students admitted
- ❑ Higher educational institutions inclined towards increasing student enrolments to increase financial resources (Spitzer & Perrenoud, 2006).

# Theme Two: Resource Constraints

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## Limited Resources

**lack of equipment and utilities to promote effective demonstration of concepts and procedures**

**“...In our skills lab we don't even have a single dummy so if you're talking about turning of patient, if we are talking about giving injection, you don't have anything to demonstrate. So it's just theory, theory, theory” (Lecturer).**

# Theme Two: Resource constraints...

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## Improvising

**Nurse faculty, clinicians and students navigate clinical procedures by improvising for unavailable equipment or items**

**“...we are always improvising, they will tell you okay, colostomy care fine, there is not even colostomy bag, you have never seen it before, you come to the hospital and the hospital is also improvising, so many things during the four year course of study we just assume or we see pictures of it on our phones, on the internet” (Student).**

# Theme Three: Challenges of Clinical Learning Environment

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**Adoption of conventional, simplistic approaches to nursing care.**

**Use of students as additional working hands**

**“When you come to the ward, they treat you like you are part of the staff, you are expected to work ... it is just that you do not get paid, that is the only difference”  
(Student).**

**This finding was corroborated by Papathanasiou et al., 2014**

# Theme Four: Clinical Placement & Supervision

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## Timing, Sequencing & Support

- ❑ Short and asynchronous clinical placement
- ❑ Lack of support
- ❑ These challenges are well noted in the literature (Killam & Heerschap, 2013; Spitzer & Perrenoud 2006)

# Theme Four: Clinical Placement & Supervision

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## Support...

**Clinicians felt no obligation to support the clinical learning of students**

**“As clinicians whatever you do, you are doing it on your own volition. I am paid to nurse clients. I am not paid to teach students” (Clinician).**

**Corroborated by Dahlke & Hannesson, 2016; Ohrling & Hallberg, 2000; Papathanasiou et al., 2014; Ryan-Nichols, 2004.**



# CONCLUSION

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- ❑ Stakeholders in nursing education and practice in Ghana are yet to wake up to the realities of the implications of TPG
- ❑ This study presents the initial understanding of the nature and scope of the theory-practice gap in Ghana.
- ❑ It may serve as the basis for developing strategies to address the gap and for further research.

# STRENGTHS

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- ❑ **First of its kind on TPG in the context of Ghana**
- ❑ **From the perspective of diverse key players (nursing students, nurse faculty, and clinicians)**

# LIMITATIONS

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## Limited Transferability

### Choice of participants

- Criteria and sampling technique ensured information rich participants

### Challenges of the settings

- Relatively new department and teaching hospital
- Challenges of growth and development

# TRANSFERABILITY

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## Why these findings may apply to other settings in Ghana

- Shared operational factors by nursing schools and hospitals (regulatory guidelines and resource availability)
- Perceptions of clinicians may be formulated from collective interaction with nursing students across Ghana
- Experiences shared by students in this study might also be borne out of interactions with clinicians in different hospitals and clinics across Ghana

# **RECOMMENDATIONS**

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# NURSING EDUCATION

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- ❑ Development of strong partnerships among educational programmes, practice and other stakeholders to facilitate student learning
- ❑ Development of a guiding document by stakeholders to aide in the progression of nursing education into higher educational institutions
  - Strong regulatory bodies to ensure strict implementation of such a guiding document

# NURSING EDUCATION

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- Involvement of all stakeholders; nurse faculty, clinicians & nursing students, in the development & review of curricula in departments & schools of nursing
- Strengthening the use of eclectic approaches (classroom teaching & simulation sessions)
- Introduction of formal support programmes (preceptorship, clinical instructor, link tutor) to facilitate practical skills acquisition
- Adoption of innovative evidence-based contemporary pedagogical approaches e.g. PBL

# NURSING PRACTICE

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- Effective supervision of both staff and students in the clinical environment**
  
- The development of policies and protocols for nursing care interventions should be based on research evidence**

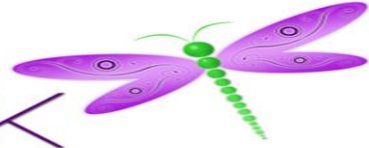


# RESEARCH

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- Replication in one of the traditional universities and teaching hospitals or all across Ghana
  - Use of a longitudinal approach e.g. ethnography
  
- Development of an intervention to facilitate theory-practice integration (based on these findings)

THANK  
YOU . . .



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