

CHAPTER IV

LITERATURE REVIEW

4.1. INTRODUCTION

A relationship is one of the psychological needs of a human being. In the area of pedagogy, the teacher-student relationship is one of the important activities which enhances student's learning. This chapter deals with different authors who studied about teacher-student relationships and their views as they relate to the study methods. The study is divided into two parts. Part I includes the background of nursing education in Nepal, as well as the philosophy and objectives of nursing education. Part II includes related literatures about relationships between teachers and students, as well as the components of the relationships and students' academic achievement.

4.2. BACKGROUND OF NURSING EDUCATION IN NEPAL

The history of nursing education is not long founded in Nepal. Actual need was extended in the traditional care with no training. Before the establishment of nursing schools, the Nepal government sent candidates to India for nursing education. The

nursing education programme was started by His Majesty's Government (HMG) with the help of World Health Organization (WHO) in 1956. In those days, the Nepal Government began to realize the importance of nursing personnel. The first Nepali nurse arrived from India after receiving her basic nursing course. After establishing nursing schools under the Ministry of Health, Bir Hospital Nursing School started to train and produce staff nurses to meet the country's need. During that time, most of the teachers came from outside the country such as India and WHO nurse trainer. There were only eleven students in the first group. During that time more emphasis was given to practical aspects; approximately 50 percent was devoted to practical aspects and 50 percent to theoretical courses. The training period was 4 years. The requirement for admission was grade nine but it was changed to school (grade ten) leaving certificate (SLC) in 1970.

Prior to 1971 nurse education training schools were under His Majesty's Government Ministry of Health. As a new era of educational development began in Nepal Nursing Education fell under Institute of Medicine. The first task of the Institute was to meet a shortage of manpower and to meet the future needs of

country. The system of nursing education had been changed. The Tribhuvan University reorganized the educational programme into 12 Institutes. One of them was the Institute of Medicine. Institute of Medicine established in 1972. All the medicine related schools are included under this Institute. The nursing programmes is one of them. Nursing education programmes involve certificate levels and bachelor levels. At present there are seven nursing campuses in different regions. Among them, Nepalgunj Nursing Campus and Bir Hospital Nursing Campus are newly established in 1988 and 1989. Bir Hospital Nursing Campus is under the Ministry of Health. This nursing campus operated with the same curriculum for many years. Periodically a course would be revised, but the curriculum as a whole was due for revision. It was the need and priority of the country. His Majesty's Government of Nepal has adopted a national policy for attainment of "Health for All by the Year 2000" through the use of the primary health care approach. Consequently, nursing certificate level curriculum was revised and implemented in 1987. Male student nurses were admitted in nursing campuses in 1987. Now, male student nurses are not admitted in nursing education programmes. The philosophy of



nursing education is highly influenced by the national goal of Nepal.

4.3. THE PHILOSOPHY OF NURSING EDUCATION.

In accord with the national goal of education the nursing curriculum is intended to develop a nurse who is a self-reliant person, a responsible citizen and a contributing member of the society. Through a systematic process of study and experience, knowledge is gained, skills and developed and attitudes are acquired.

Nursing is a profession recognized and accepted by society. Nursing requires imaginative and creative patterns of care in a variety of settings at each level of the health care system in order to assist individuals, families and communities to achieve the highest level of health possible within the country's economic capacity.

Nurses are people who think logically and critically and make sound judgements. They develop technical skills appropriately. With kindness, empathy and compassion nurses assist individuals, families, and communities to develop self-reliance in promoting health, preventing disease, maintaining and restoring health in order to enhance the quality of

living throughout the life cycle. Nurses are also concerned with change in self, group, and social systems.

The primary health care approach aims to assist all people to have access to health care which is scientifically and technologically sound, and economically feasible. Primary health care takes into consideration the traditional beliefs and health practices of people. Involvement of the community is essential in the identification of health problems and in the planning, management and evaluation of health services.

The nurse collaborates with members of health care groups and other sectors to help individuals, families, and communities to meet their basic needs. The goals and activities of other development sectors of the community should be understood in order to coordinate efforts to meet the needs of the community.

This programme will provide the basis for advanced education in nursing practice, teaching and administration.

4.4. OBJECTIVES OF CERTIFICATE LEVEL

NURSING PROGRAMME

The general purpose of the basic nursing educational programme is to prepare a competent and self reliant nurse who will be able to care for individuals, groups and communities according to a primary health. Upon completion of the programme the graduate will: (I.O.M, 1987).

1. Utilize a sound knowledge base in giving care to well and sick individuals, families and communities.
2. Perform preventive and therapeutic measures directed toward promotion, maintenance and restoration of health.
3. Utilize communication skills effectively with individual and groups in a variety of settings.
4. Utilize the nursing process in providing and improving health care.
5. Assume leadership for planning, directing and evaluating care given by health workers.
6. Teach and supervise individual, families and groups including health care workers.
7. Collaborate with multisectoral groups to develop a healthful environment, including safe

drinking water, sanitation and other basic needs of the community.

8. Mobilize the community to participate in the activities of the village health post.

9. Demonstrate a positive attitude and respect for cultural values in working to meet needs and solve problems.

10. Continue to seek new knowledge for personal and professional growth.

These overall objectives are used in each year to create specific objectives which guide the learning experiences from simple to complex.

4.5. TERMS AND RELATED LITERATURE

The interpersonal relationship was defined by Zaleznik and Moment (1964: 12) "The term interpersonal relationship refers to outward expression of this inner organization in the individual's relationship with others".

Falk, R. and Wagner, P. (1985), reported that relationships develop systematically as exchanges move freely between each other.

According to Bernard, H.W. (1972) interpersonal relationships are the relations of individuals interacting with each others.

Psychologists and educators are interested in the area of teaching and learning environments. Bernard, H.W. mentioned that they have made many contributions in the field of education such as; helping students to express individual needs and interests, encouraging students to participate, and learning new ways of helping students develop their maximum learning potential. Nalinee Vanchai (1976) Psychotherapist, suggested that the interpersonal relationship between teacher and student is similar to the relationship between therapist and patient in a therapeutic situation. A certain kind of relationship is important in both situations of nursing and psychotherapy. Read, D.A. and Simon, S.B. (1975) stated that relationships are essential to facilitate learning. Such findings were first applied in the field of psychotherapy, but increasingly, these findings were applied in teaching students. Roger, C. (1969) stated that characteristics of teachers which facilitate student learning include realness, genuineness, prizing, acceptance, and the trust of the learner. The instructors who manifest those attributes, facilitates students' learning at higher cognitive and affective levels.

Tyler, L. C. (1964) revealed a psychotherapeutic approach to teaching. It is based on interpersonal relationships. If the instructor utilizes proper techniques and devices, it will reduce anxiety and so promote learning. In this study, author used a Q-sorting method, a series of 75 statements about therapeutic relationships which was developed by Fielder. Tyler, L. C. focused mainly on communication, emotional, distance and status. In this study ten persons sorted the 75 statements. The ratings were incorrelated and relation matrixes, factor analyzed. The following conclusions were drawn from this study: there is a significant agreement as to the nature of ideal teacher-student relationship. The most ideal teacher-student relationships were heavily weighted with positive communication statements and least ideal were weighted with distance statements. There was great similarity between ideal teacher-student relationships and ideal therapeutic relationships. Nalinee Vanchai (1976), conducted the study in Thailand. In his study there were 14 subjects including both teachers and students. The 75 Q-sorting statements were used in this study which was developed by Tyler's statements. The data was factor-analyzed and a correlation matrix for each group was computed through Pearson product moment correlations.

He also focused on emotional distance, status, and communication. He concludes that these three dimensions of a relationship are similar in every kind of interpersonal relationship.

Hsieh, N. et al (1990) developed seven themes to identify the relationship between preceptor and nursing students. Those themes were trust; honest communication; support systems; mutual respect and acceptance; clearly defined expectations; mutual sharing of self and experience, and encouragement. There were 18 nursing students and 26 preceptors. The author used a direct observation method. The feedback was taken from both teachers and students. In this study they revealed that in the early stages teacher was more directive than supportive. In response to this situation, students performance dropped. From this study it was focused that to develop a relationship between teacher and student trust, communication and a support system were essential elements. The study also suggested that good relationships between teachers and students enhance students performance in a positive direction. The study of Griffith and Bakanauskas (1983), discussed attributes of nursing student instructor relationships. Their findings indicated that there is a direct

correlation between student's self concept and academic performance. In the same study they emphasized the importance of fostering the student's positive self-concepts for professional socialization. The study also stated that the instructor's expectation of the student's success creates a positive learning environment. The students will tend to be more successful and it promoted the student's self-confidence. Kalpan, L. and Row, H. (1971), showed that good human relationships in the classroom and clinical practice, as well as informal contact, lead to good academic learning social and emotional growth. The author also stated that when teachers manifest open communication with students and demonstrate an interest in their learning, the teacher may facilitate a positive self-concept in students and enhance their cognitive growth. Bregg, E.A. (1968), indicated that the relationship between teacher and student is an important influence, not only to the learning experience, but also to the student's growth of professional stature and maturity. Stephenson, P.M. (1983), studied the aspects of the nurse tutor and student nurse relationship. The population included 1st year students, 2nd year students, and tutors in the same nursing college. They found that the factors which influence a

student's learning ability were; friendliness, helpfulness and supportiveness, trust, and good communication. There are several constraints. They were identified as inhibited students with problems. Students were seeking help from their teacher, teacher were not give all help which are offer by the students.

TRUST: According to Grochowski, R.M. (1984), Interpersonal trust is defined as an expectancy held by an individual or group that the word, promise, or verbal written statement of another individual or group can be relied on. Irving, S. (1973), described that trust is an essential step toward achieving a successful relationship. Trust appeared to be crucial to all of the themes. Trust played an important role. The student began to relax, with improved performance as a result. Karns, P.J. and Schwab, T.A. (1982), showed that the development of a trusting relationship between teacher and student is a prerequisite to the successful socialization of a student to a profession.

SUPPORT SYSTEM: This is one of the important elements of a relationship between teacher and student. Support can be provided in the classroom, during the clinical time, and other informal times. Support should be given in different ways such as

guidance, willingness to help student's with problems, giving proper feed back, and encouragement about their progress. Marshall, J. (1989), stated that support is dependent on a person's perception of whether a relationship includes informational support and emotional support. For example, to give reassurance, information, feed back, advice, and help with problem solving, is creating a support system in the teaching and learning environment. The author conducted the study at South Eastern Ohio University. It was found that one quarter of the students who left from the nursing programme left due to lack of support and academic problems. Sheahan, J. A. (1981), indicated that most students were supported by relationships with peers rather than through student-teacher relationships. The teacher role is to provide student support. Hilbert, G.A. and Allen, G.R. (1985), conducted a prospective and descriptive correlation in social support. The relationship between social support and educational outcome was investigated. Social support was measured by the instrument of socially supportive behaviour. Out come included the cumulative grade point averages of all participants and National Council of Licences Examination (NCLEX) scores of graduate students. There is a positive relationship between social support and cumulative

grade point average and NCLEX score. Support systems it indicate have a greater influence on outcomes.

OPEN COMMUNICATION: Karns, P.J. and Schwab, T.A. (1982), Stephenson, P.M. (1983), and Hsieh, N.I. and Knowles, W.D. (1990) revealed that open communication is one of the essential themes to establish relationships between teacher and student. Without open communication the establishment of trust was not possible. When communication, lines were open and free flowing, trust was readily apparent from the very early in relationship. Teachers should communicate genuine warmth and acceptance. They show students faith in their ability to learn. When a student's positive self image is reinforced by a significant other's feelings, self confidence, dignity, and self respect are enhanced, leading to greater achievement.

EFFECTIVE CLASSROOM TEACHING: For effectiveness in building relationships between teacher and student, the role of both teacher and student are interrelated. However the role of teacher, in terms of effective teaching, will be the main point in creating the relationship. In the research of Wotbura, T.R. and Wright, P.L. (1975), 40 criteria of effective teaching, as defined in 21 studies of selected research were developed. The 40 criteria are

the characters for the evaluation of teaching effectiveness. Sources of information used for the evaluation included judgement by administrators, teachers, students and many others. In the assessment of teaching effectiveness, ten items were found to be ranked in the nine in importance in common by at least two of the respondent group (10 were arbitrarily chosen through and some other number could be used if desired). Another nine items fell in the top 10 rankings of importance by each of the respondents groups alone. These effectively dealt with the positive factors in building the relationship between teacher and students. Effective classroom teaching is one important aspect in forming a relationship between teacher and student. Pardue, S. F (1983), found that the role of teacher, in terms of effective teaching, was the main cause in creating the teacher-student relationship. Dixon, J. K and Koerner, B. (1976), and Eason, F.R and Corbett, R.W. (1990), identified four factors in class room teaching effectiveness. The teacher's level of knowledge, organization of teaching materials, presentation style and concern for teaching with a desire to improve teaching effectiveness were identified. An enthusiasm for teaching and development of student rapport were considered salient aspects of the presentation style.

Relaxed, friendly, personable and humorous were characteristics also identified. Wong, J. (1979), found that the inability to transfer classroom knowledge to practice was one problem in nursing education. A vital role of the teacher is to help students understand the relationship between teacher and student. The teaching of nursing curriculum is a complex process in which the human component is directly involved. In the clinical situation the teacher-student relationship was significantly revealed by Wong, S. (1978), Wolfe, M.L. and Engle, J. D (1982). They studied preservice teachers opinions on students' nature and needs for classroom discipline, subject matter, and appropriate teacher behavior. They concluded that a progressive teaching style was more effective than a traditional style.

CHARACTERISTICS OF CLINICAL TEACHER:

Winsdor, A. (1987), revealed that the student-teacher relationship depended on the quality of the students preparation and characteristics of the instructor. Good teacher-student relationships depended on the characteristics of teaching ability, professional knowledge, and behaviour. Another important thing was that the student's individual development varied with their instructor relationship. Also good teacher-student relationships helped students take full

advantage of the positive aspects of interdependence. These are some of the characteristics of the clinical teachers which were indicated by the students to be important. The characteristics include: actively helpful, respectful of the student, and sensitive to the student's feelings. Bryn, D. (1987), stated that interpersonal relationships develop not only in the classroom, but occur during prolonged clinical supervision. Students can experience emotionally determined attitudes which can, and often do, influence the learning process.

4.6. CRITERIA FOR ASSESSING THE STUDENT ACADEMIC ACHIEVEMENT.



There are yearly final examinations during the course period. Internal assessments are held time to time, assessed by the teacher to know the student's progress. For the final examination, the Institute of Medicine is responsible for the final year examination. The clinical practical is assessed by the methods of a rating scale, check lists, report records, and direct observation by the clinical instructor. The theory examination is based on paper pencil tests, such as multiple choice questions, short answer question, Essays, true-false, and matching.

The course description, requirement and allocation of marks for nursing certificate level is as follows:

Table 4.1. THE REQUIREMENT FOR FIRST YEAR
INSTITUTE FINAL EXAMINATION

SUBJECTS	THEORY		CLINICAL	
	TOTAL MARKS.	PASS MARKS	TOTAL MARKS.	PASS MARKS
1. Fundamental of nursing	100	40	100	50
2. Community health nursing	100	40	100	50
3. Integrated science related to Health	100	40		
4. Nepali	100	40		
5. English	100	40		
Total	500	200	200	100

Table 4.2. THE REQUIREMENT FOR SECOND YEAR INSTITUTE
FINAL EXAMINATION.

SUBJECTS	THEORY		CLINICAL	
	TOTAL MARKS	PASS MARKS	TOTAL MARKS	PASS MARKS
1. Community nursing II	100	40	100	50
2. Behavioral science	50	20	-	-
3. Nursing care of children	50	20	50	25
4. Midwifery A	50	20	50	25
5. Midwifery B	50	20	50	25
6. Midwifery C	50	20	50	25
7. Nepal parichaya	50	20	-	-
Total	400	140	300	150

Table 4.3. THE REQUIREMENT FOR THIRD YEAR INSTITUTE
FINAL EXAMINATION.

SUBJECTS	THEORY		CLINICAL	
	TOTAL MARKS	PASS MARKS	TOTAL MARKS	PASS MARKS
1. Care of adult patient I				
- Medical nursing	50	20	75	35.5
- Surgical nursing	50	20	75	35.5
2. Care of adult patient II				
- Gynaecological	25	10	25	12.5
- Eye, ear, nose and throat nursing	25	10	25	12.5
- Operation theatre	25	10	50	25
- Psychiatric nursing	25	10	-	-
Leadership + Management (theory)				
- Ward Management	50	20	75	37.5
- Community Health	50	20	75	37.5
Administration				
Total	300	120	275	200

Remarks- 20% for theory and 50% marks for clinical is allocated by the campus for each paper at final examination in each year.

The pass mark for Theory is 40%.

The pass mark for Clinical practical is 50%

The student will be graded in to four deviation.

Distinction	> 80%
Merit	> 60%
Pass	> 40%
Fail -	< 40%

Relationships between teachers and students are necessary to enhance student learning. Pascarella, E.T. (1980), stated that good relationships between teachers and students, influence the students' educational aspirations and career plans. Pascarella and et.al. (1983), they used multiple regression for three measures of the extent and quality of teacher-student relationships associated with first year students intellectual and personal growth. A regression of each development measured on the set of teacher-student relation variables alone, yielded an R^2 of 0.11839 ($p < 0.01$) personal development and an R^2 0.08808 ($p < 0.01$). In the prediction of intellectual development, four

variables had significant positive beta weights in both equations: purpose of artistic achievement, the first year GPA, the peer-group relations scale, and teacher concerns for teaching and students development scale, had significant ($p < 0.01$) zero order correlations with intellectual development. In this study, questionnaire response rate was low about 46.5%.

Terezini and Pascarella (1980), revealed that informal relations with teachers are positively related not only to academic performance but also to a variety of other personal and educational benefits. They also used a multiple regression procedure. The results show that student-teacher relationship variables were associated with significant R^2 increase in all three dependent measures. Those variables are frequency of contact, personal problem and career. But not for academic achievement. This study also suggested that sex, ethnicity, educational aspirations and family educational back ground can be important mediating variables. Pascarella and Terezini (1981), in their study, conclude that relationships fostered between teachers and students and those between students and their peers, are linked these specific

educational outcomes. Relationships that develop between teachers and students are important agents to socialization.

It was known that relationships play an important role in learning the environment. It may enhance student learning achievement. All the studies mentioned were conducted in other countries. Due to a lack of studies in Nepal, a correlation between teacher-student relationships and academic achievement of nursing students is important to Nepal nursing campuses.