TURKISH REPUBLIC OF NORTH CYPRUS
NEAR EAST UNIVERSITY
HEALTH SCIENCES INSTITUTE

PERCEPTION OF NURSING STUDENTS IN THE GAP BETWEEN THEORY-PRACTICE IN NURSING EDUCATION

JULIEN KISIATA FETI

MASTERS THESIS

NURSING DEPARTMENT

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MENTOR

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NICOSIA 2019

STATEMENTS (DECLARATION)

Hereby I declare that this thesis study is my own study. I had no unethical behavior in all stages from planning of the thesis until writing thereof. I obtained all the information in this thesis in academic and ethical rules. I provided reference to all of the information and comments which could not be obtained by this thesis study and took there references into the reference list and no behavior rights and copyright infringement during the study and writing of this thesis.

Julien Kisiata Feti

Date:……

Signature…….

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CURRICULUM VITAE

ABBREVIATIONS AND ACRONYMS

TRNC: Turkish Republic of Northern Cyprus

NEU: Near East University

TPG: Theory Practice Gap

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TÜRKÇE ÖZET (TURKISH SUMMARY)

Teori ve pratik hemşirelik eğitiminin iki önemli bileşenidir. Hemşirelik eğitiminde teoride kazanılan bilgiler pratiğe aktarıldığı zaman etkili öğrenme gerçekleşir. Ancak araştırmalar hemşirelik eğitiminde teor i ile pratik arasında bir boşluk olduğunu göstermektedir.

Amaç: Bu çalışma, hemşirelik eğitiminde öğrencilerin teori ve pratik arasındaki boşluk hakkındaki algılarını öğrenmek amacıyla yapılmıştır.

Gereç ve yöntem: Bu çalışma niteliksel tasarım kullanılarak yapılmıştır. Veriler onaltı gönüllü öğrenci ile yüz yüze bireysel derinlemesine görüşme yapılarak toplanmıştır. Görüşmeler, yarı yapılandırılmış soru formu kullanılarak yapılmıştır.

Bulgular: Çalışmada dört ana tema belirlenmiştir. İlk ana tema hemşirelik eğitimidir. Hemşirelik eğitiminde belirlenen alt temalar: Teori ve pratik arasındaki denge, teori ve pratik arasındaki etkileşim, öğrencilerin deneyim ve hemşirelik imajlarıdır. İkinci ana tema, hemşirelik eğitiminde teori ve pratik açığıdır. Teori-pratik boşluğunda tanımlanan alt temalar: Teori ve pratik arasındaki boşluğun öğrencilerin öğrenme deneyimine etkisi ve bu boşluk nedeni ile öğrencilerin yaşadığı korkulardır.. Üçüncü ana tema, hemşirelik eğitiminde teori-pratik boşluğunun nedenleriyle ilgilidir. Hemşirelik eğitiminde teori-pratik arasındaki boşluğun nedenlerine göre belirlenen alt temalar: Akademik çevre, klinik ortam, öğrencilerin kendi öğrenmeleriyle ilgili ihmalleri ve dil engelidir. Son olarak, dördüncü ana tema teoriyi ve pratik açığını kapatmaya yönelik öneridir. Teori ve pratik açığı kapatmaya yönelik önerilerde belirlenen alt temalar: Teori ve Pratik arasındaki denge, öğrencilerin daha fazla desteklenmesi, laboratuarların hazırlanması ve dil engeli sorununun çözülmesidir.

Sonuç: Bu çalışmanın sonucunda hemşirelik eğitimi, teori ve pratik arasındaki boşluk, boşluğun nedenleri ve çözümüne ilişkin ortaya çıkan öğrenci algılarının eğitim program iyileştirme çalışmalarına katkısı olacaktır. Araştırma, Kuzey Kıbrıs Türk Cumhuriyeti'nde teori ve pratik arasındaki boşluk başlığı ile ilk kez yapılmış olan bir çalışmadır.

Anahtar Sözcükler: Hemşirelikte Eğitim, Teori ve Uygulama, Klinik Eğitim, Teori ve Uygulama Arasındaki Boşluk, Öğrenci Deneyimi

ENGLISH SUMMARY

Theory and practice are two important components of nursing education. When the knowledge gained in theory transitions into practice, effective learning becomes in nursing education. However, research shows that there is a gap between theory and practice in nursing education.

Aim: This study was conducted to learn students' perceptions about the gap between theory and practice in nursing education.

Material and method: The qualitative design used in this study. Individual face-to-face semi-structured interviews with sixteen volunteer nursing students.

Findings: Four main themes were determined in the study. The first main theme is nursing education. The sub-themes determined in nursing education: The balance between theory and practice, interaction between theory and practice, experience and nursing image of the students. Second main theme is theory and practice gap in nursing education. The sub-themes identified in theory-practice gap: Gap impact on the students' learning experience and fears of students in the theory practice gap. The third main theme concerns the reasons for the theory-practice gap in nursing education. The sub-themes determined in the reasons for the theory-practice gap in nursing education: Academic environment, clinical environment, student negligence for his learning and language barrier. Finally, the fourth main theme is suggestion to close theory and practice gap. The sub-themes determined in suggestions to close theory and practice gap: Balance, students need to be more supported, preparing laboratories and solve the problem of the language barrier.

Conclusion: As a result of this study, students' perceptions about nursing education, the gap between theory and practice, the reasons and solution of the gap will contribute to the curriculum revision. This is the first study in the Turkish Republic of Northern Cyprus with the title of gap between theory and practice.

Key Words: Nursing Education, Theory and Practice, Clinical Education, Gap between Theory and Practice, Student Experience

1. INTRODUCTION AND AIM

Clinical learning is a key area that explicates the importance of a nursing student's performance in the clinical setting and provides the students an avenue to practice their skills, develop their professional identity, increase their knowledge and apply the theoretical and practical knowledge in the clinical setting (Estrada et al., 2015). Globally, according to Shahin and Tork (2013), the goal of nursing education is to provide professional clinical competency/skills and improve the delivery of safe and quality nursing care.

To achieve this level of competency, the nursing student must acquire solid knowledge in a wide variety of subject areas and training that requires both a high level of theoretical and practical knowledge, as the classroom and practices are important clinical setting increases the quality of health care.

Nurse education, as Saifan et al. (2015a) consists of two main parts: the theoretical and practical parts. The theoretical part reflects the knowledge passed on in class giving students the opportunity to build a range of powerful examples drawn from the experience. The practical part focuses on improving skills in the clinical field and prepares nursing students to be able to "Do" as "Knowing" clinical principles in practice and encouraging students to use their critical thinking skills to solve problems. This can only be achieved by ensuring that nursing students apply what they have learned in the classroom and in laboratory to real life situations.

Nevertheless, an increasing rift between nursing theory and nursing practice has been presented by numerous studies over the years (Ajani and Moez, 2011; Scully, 2011; Corlett, 2000). The literature shows that there is a gap between the theoretical and practical components of nursing education (Salifu et al., 2018; Shahzadi et al., 2017; Saifan et al., 2015[a]; Scully 2010; Ajani 2011; Kyrkjebo 2006; Corlett 2000) and is apparently the most critical issue in nursing education.

The existence of Theory-Practice Gap (TPG) revolves around the inadequacies of the system; resource constraints; the challenges of the clinical learning environment; clinical placement and supervision and nurse factors (Salifu et al., 2018). On the other hand, Aththiligoda et al. (2017), note that lack of knowledge and skills, insufficient equipment, lack of time to perform, procedures, inadequate clinical supervision, and

poor supervisory relationships are factors leading to gaps between nursing education theory and practice. The gap between theory and practice may be disappointing for nursing students. Therefore, nursing education significantly requires an integration of theory and practice. This combination is more important in nursing education because, understanding the theory behind the practice allows students to connect and become their knowledge to react to unforeseen situations and achieve better results for patients (Safazadeh et al., 2018). According to a study by Saifan et al. (2015a) that focuses on identifying suggestions and interventions to reduce the gaps between theory and practice in nurse education. Student statements were collected and integrated into four main themes: Open channels between theory and practice teachers, students to be further supported, augmented clinical instructor skills, and laboratory preparation and improvement.

To better understand how nurse educators could facilitate the integration of theoretical knowledge into practice or to minimize the gap between theory and practice, it is important to assess the current state of knowledge on this gap. In line with the above-mentioned knowledge, no study was conducted on the subject in the Turkish Republic of Northern Cyprus. The aim of this study is to learn students' perception on the gap between theoretical and clinical education.

The results of this study will help faculty and university administrators understand the errors and weaknesses in their education system. In addition, this study provides the solution and recommendations that will be useful to decision makers while making improvements to the nursing curriculum. From a practical point of view, the idea is that understanding this topic would provide the foundation for new approaches, measures and policies that can help nurse educators fill these gaps more effectively. The data will contribute to the evaluation of the educational program of the nurse.

2. GENERAL INFORMATION

This part constitutes a preliminary literature review on the phenomenon known in the nursing profession as the theory-practice gap. The gap between theory and practice has been a concern for the nursing profession for many years and has generated a great deal of literature in the nursing press.

Given the many terms used in the literature, it seems important to clarify the vocabulary used in this chapter. Thus, the following key concepts will be defined according to the idea of this study. These key concepts are explained below.

2.1. Nursing education

Education is considered by Li (2016) as a process that facilitates freedom of knowledge or social transformation, as it must express a dynamic motivation to create and recreate thoughts. In addition, it is undergoing changes due to the different social, political and economic contexts of the world over time.

Education is a formal and well organized process in which a society transmits knowledge, values and skills from one generation to the next. She is received from a school or university by teaching (Biggs and Tang, 2011).

Nursing is a vital component of the health system. effective nursing education contributes significantly to health system strengthening nursing education prepares skilled and competent professionals able to identify individual and collective health needs in epidemiologic transition societies and provide care using the best scientific evidence (Saleh 2018).

Nursing education can be considered as a series of coherent operations (providing theoretical and clinical learning), allowing the student to acquire new knowledge and develop independent learning (Parker et al. 2014).

The universal demands placed on the nursing profession imply that educators recognize the importance of the professional roles of future nurses in bringing innovations into nursing education outcomes that can lead to excellence in nursing practice (Saleh 2018).

To this end, according to Barr and Clark (2012), a major societal concern that needs to be addressed is the improvement of academic achievement and learning in higher education.

The essence of nursing education as a health framework emphasizes, according to Lawal et al. (2016), the perspectives of the four pillars of United Nations Education Scientific Commission (UNESCO) including: learning to know, learning to do, learning to live together and learning to be.

Improving trends in nursing education involves integrating teaching and learning styles and methods with nurse educators to better educate learners about the needs and problems of clients. Effective teaching leads to reasoning, problem solving, and critical thinking as professional outcomes (Biggs and Tang, 2011).

Nursing education includes the theoretical and practical training provided to nurses to prepare them for their duties as nursing professionals. This education is provided to nursing students by experienced nurses and other qualified or experienced health professionals for instructional tasks on effective ways to provide health care to patients (Morin, 2014).

2.1.1 Theory

The theory is defined as the content that student nurses learn in class. In fact, theories are mainly taught for their identity functions and are often part of a logic of continuity with the founding work of the nursing discipline. Theoretical information offers students the opportunity to build a range of powerful examples from experience. Nursing theorists use abstract expressions to define the rules and procedures of the clinical field (Saifan et al., 2015b).

The theory is a set of statements or principles designed to explain a set of facts or phenomena, in particular a test that has been extensively tested or accepted, and that can be used to predict natural phenomena. (Ajani and Moez, 2011).

In the classroom, nursing students learn the basics of all the procedures, illnesses, interpersonal skills and requirements to be a nurse (Dale 1994; Nabolsi et al., 2012). Theory are principles and knowledge necessary to understand the why of practice (Corlett, 2000).

To sum up, theory is defined as the principles that describe, explain and guide practice.

2.1.1.1 Theoretical education

Nursing has accepted theory as basic to its practice; however, the use and development of nursing theory is constrained by the approach used in nursing education. It is not appropriate or sufficient to isolate theory in one course. It is imperative that nursing education engage students in theory-related content at all. Through theory-based practice, nursing will come to realize its full potential as a discipline (Phaneuf, 2008).

During their clinical education, students must acquire nursing skills and procedures, deepen knowledge research, critical thinking and problem solving, as well as develop personally and professionally. This means that students' goals should include increased self-awareness and scientific awareness, as well as progressive improvement of professional nursing care (Scully 2010).

As clinical education in nursing is also about preparing students for the transition to the nursing profession and working in the future health care system, which is unpredictable, the goal of clinical education must be to help students improve their ability to "learn to learn" so that they can better manage changing realities and situations (Baker, 2000).

2.1.2 Practice

The practice is the experience gained in clinical contexts through the application of theories. It provides to nursing students with a mechanism to extend classroom learning to nursing practice environments (McKenna and Wellard, 2009; Saifan et al., 2015a).

The practical term is defined as the act or process of doing something; performance or action. "Difference between" what is taught "and" what is practiced "in nursing, where the theory focuses on the ideal for patient care, while clinical training focuses on the reality of nursing work. Effective nursing practice requires the application of knowledge, skills, caring, and art to care for patients in an effective, efficient, and considerate way (Ajani and Moez, 2014).

The objectives of practical learning are consistent in helping students integrate theory into practice, apply problem-solving skills, develop clinical skills, develop interpersonal skills, and socialize in the classroom the nursing profession and the health system (Mannix et al., 2006).

2.1.2.1 Learning practice for nursing education

Nursing students must have the appropriate knowledge and skills and be able to translate these skills into effective performance (Boamah et al., 2016). Learning the practice is an essential part of the undergraduate nursing program to achieve effective and competent practice. The nature and quality of the practical learning environment and the experience of nursing apprentices are recognized as influential in promoting the integration of theory and practice and, ultimately, in nursing capacity development. It is during their learning that they develop the knowledge, skills and competences (Chan 2013), develop their ability to "know how" and "know it" and broaden their perception of their role as teachers (Missen et al., 2016)

2.1.2.2 Clinical education

The term "clinical education" is used in this study to refer to the field of study that is concerned with the pedagogy of teaching and nursing learning. Clinical education aims to (Phaneuf, 2012; Sylvain et al., 2007; Desrosiers, 2009; Dumas, 2007):

- Introduce students to different realities of professional life.
- Apply theory and techniques learned during education.
- Allow students to adapt to reality and acquire skills and attitudes.
- Enable the student to realize how the fundamentals of the nursing profession fit into the technical and organizational work of everyday life and apply them to real-world care.
- Also allow to learn by model, to grasp the ethical, relational and organizational implications of the nurse's work, to foster the development of a professional identity and to face the challenge of taking care of patients.

The continuing education process in clinical practice is important part of nursing education. This process is defined as the clinical education. Clinical education is a patient-centered, targeted, interview specific three-part educational interaction

between an educator, students, and a patient (Amin and Eng, 2012). Students' basic knowledge is strengthened by combining clinical data obtained from the patient with the basic sciences.

In clinical education, the student is in transition from novice to expert. This process is described by Benner (1982), as a progressive continuity in the acquisition of professional nurses. The author suggests that the clinical educator must knowingly and at all stages support these steps so trainees are well trained in the clinical training process.

2.1.2.3 Essential elements of a clinical learning experience

In the literature, various studies have explored the prerequisites for a successful learning experience in a clinical setting (Andrews et al., 2005, Löfmark and Wikblad 2012). According to these findings, the essential elements of positive experiences are related to students' motivation to learn, to their integration into the clinical environment, to a positive atmosphere and to a supportive attitude of students by nurses, as well as to distinctive characteristics of the interaction between instructors, teachers and students. Lauder et al. (2008) subscribe to this last point by suggesting that the nature and quality of the experience gained by trainees depends primarily on the mentors and other practitioners assigned to them and how they play this role on the ground to facilitate learning and helping students achieve their goals, practical skills and the learning outcomes prescribed by each university (Missen et al., 2016).

It should be noted that learning is not something that occurs in isolation, but rather that it is produced and reproduced in the social interactions of individuals when they participate in a culture or organization. This idea of learning is that participation is not separated from the context in which it takes place and learners can learn by acting as legitimate members of a true community (Andrews et al., 2005).

2.2. Nursing education process

In this section, both theoretical and practical information about nursing education are presented.

Nursing and health education is a series of coherent operations (dispensing theoretical and clinical education), allowing the student to acquire new knowledge and develop an autonomous learning. Anyway, the combination of both educational nursing aspects gives the opportunity to do both (Bagheri and Bazghaleh 2016).

According to Gordon (2009), theoretical learning is the subject of knowledge and practical learning is the way in which knowledge has been learned. The practical learning method associated with theory gives students clear and contrasting explanations of the facts. The theory teaches about the experiences of others while practically experiencing the particular task can learn about their own experiences. Philosophically, knowledge is intangible, but practical experience has made it tangible by applying these skills in practice.

2.2.1 Learning theory and practice

Learning is an active process of developing learner-initiated skills and not a passive reception of preconstructed knowledge by educators. According to DeYoung (2003), learning involves understanding, linking ideas, and making connections between prior and new knowledge, independent and critical thinking, and the ability to transfer knowledge into new contexts and different.

Nursing students need to develop knowledge, skills and clinical attitudes for professional practice, and nurse educators need to use good learning methods to prepare students' core competencies for clinical practice. Nursing education are expected to prepare qualified professionals who are capable of identifying individual and collective health needs in the epidemiological transition societies and providing care using the best scientific evidence. Continuous creative learning strategies can be the key to combine basic training and professional practice (McKenna and Wellard, 2009).

2.2.2 The benefits of practical and theoretical learning

The use of both learning styles is extremely important in nursing education. Some degrees should be 50:50 such as very practical roles like a health care assistant. Others may be more theory-based and vice versa (Hatlevik 2010).

Practical learning allows the student to carry out the necessary tasks in the role he / she will assume once qualified, and he / she will be tested by these skills to be qualified as competent in his / her role (McCrea, 2012).

The theory helps to understand why practical work is done in a certain way in order to understand what to do for oneself, to explain to others, especially if one is doing something tangible about a person, such as blood, and understand what to do if something goes wrong and its dangers (Estrada et al. 2015). If we do not understand why to do something, something will go wrong and we will not understand how or why. The best learners can do both to improve their knowledge and skills and refine them at the highest level (Dadgaran et al. 2012).

2.2.3 Relationship between theory and practice in nursing

Improving practice by positively influencing the health and quality of life of patients is considered the main goal of theory in the nursing profession. The relationship between theory and practice is reciprocal. Practice is at the root of the development of nursing theory, whereas the nursing theory must be validated in practice. To promote the ability of the nursing profession to respect societal obligations, it is necessary to establish a permanent reciprocal and cyclical relationship between theory and practice. This will help bridge the perceived "gap" between theory and practice and promote theory-guided practice. The theory that guides practice in the form of theory of practice, is the future of nursing (Cook et al., 2011; Saleh, 2018).

Theories of practice are narrow and circumscribed theories proposed for a specific type of practice. University nurses, scientists, researchers and practitioners must place the theory that guides practice into the heart of nursing. To provide effective, comprehensive and holistic care, nurses must rely on sound theoretical principles to develop and implement the plan of care (Saleh, 2018). The relationship between theory and practice can be achieved by using active laerning method.

Using an active learning environment can enhance the integration of classroom practice and theory. Active learning is about using instructional activities in which students do things and think about what they do. In active learning, students are involved in more than just listening, less emphasis is placed on the transmission of information and more on the development of students' skills, students are involved in

higher order thinking (analysis, synthesis, evaluation), they participate in activities (such as writing, reading, discussing and observing) and the focus is more on students' exploration of their attitudes and values (Choi and Lee, 2008).

2.3. Theory-practice gap

According to Saifan et al. (2015a), nurse education is composed of two main parts; the theoretical part, which reflects the knowledge acquired in class; and the practical part, which focuses on improving skills in the clinical field. Thus, before addressing the gap between theory and practice, it is necessary to describe the theory and practice in nursing education. Among health professions, nursing research has provided the most comprehensive description of the gap between theory and practice that can be applied to the profession in the field of nursing education. In general terms, the nursing literature defines the gap between theory and practice as the gap between what students are taught in the classroom (theory) and what they experience during clinical placements (practice) (Corlett, 2000; Baxter, 2007).

Several authors have found that theory and practice can not exist separately, they are dependent on each other. They have a complementary role: "The theory without practice is sterile and the practice without theory is blind" (Corlett, 2000; McCaugherty, 2003).

The gap between theory and practice has been debated in the nursing profession for many years and the term "theoretical gap" has appeared in many publications. It is defined in one way or another according to the different authors (Shahim et al., 2013; Maben et al., 2006; Ferguson and Jinks, 1994; Corlett, 2000; Landers, 2000; Baxter, 2007; Saifan, et al., 2015a):

Theory-Practice Gap is the difference between what nurses learn in school and what they see in practice.

- It is the necessary tension between the nurse theory and the nursing practice so that one can lead the other.
- It's the difference between what nurses know and what nurses do.
- It is the inability of nursing practice to use the results of research.
- This is the difference between what nurse managers visualize from guidelines and what actually happens when they are put into practice.

- It is an inconsistency between what nurses learn at class conferences and what they experience in a clinical setting.

These are disparities between the ideals of best practice and the values taught, and those encountered in practice. Corlett (2000), also added to the educational foundation of the gap between theory and practice, arguing that the gap in nursing care is that teachers focus on essential skills, whereas practitioners are more concerned with carrying out the work realistically.

Corlett (2000), defined theory as the principles and knowledge needed to understand the why of practice. In her study, comparing the perceptions of nurse educators, nursing students and preceptors, teachers felt that theory was taught both in the classroom and in the clinic, while students firmly placed the theory in the classroom. In addition, the gap between theory and practice in this study is defined as the lack of concordance between the theory taught in class and the practice that students see and practice during their clinical placements (Figure 1).

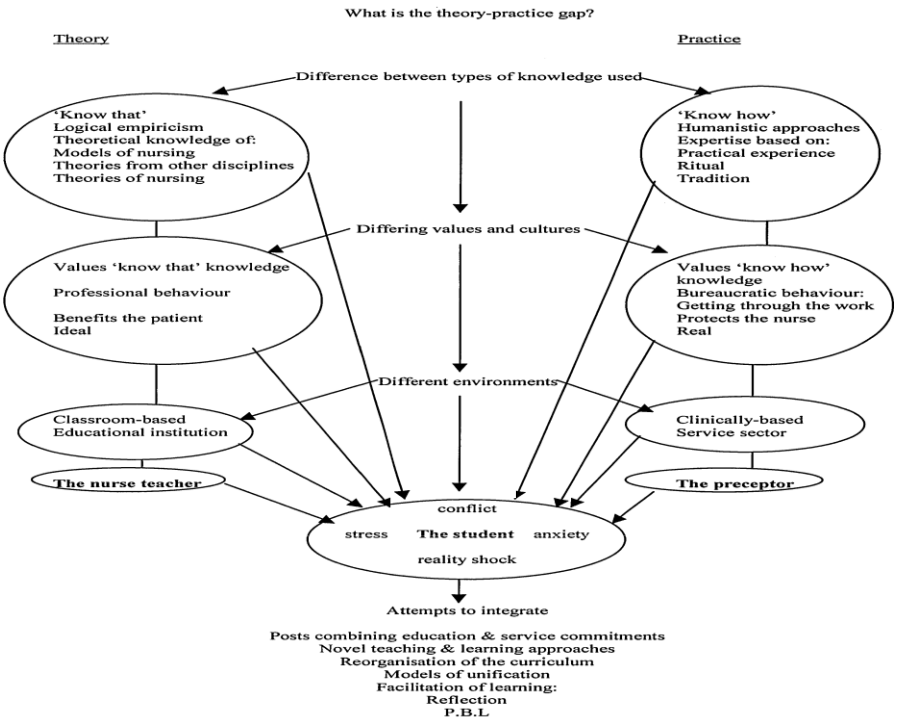

Figure 1. The Theory-Practice Gap

Corlett J. The perceptions of nurse teachers, student nurses and preceptors of the theory-practice gap in nurse education. Nurse Education Today. 2000; 20(6):499-505, (cited by McCaugherty 1991).

2.3.1 Reasons of the gap theory-practice in nursing education

The analysis of the foundations of the gap between theory and practice results in a multitude of interrelated topics that contribute to its existence in nursing education. In the literature a number of studies have been conducted to determine the reasons for the gap between theory and practice in nursing education. For example, Streveler (2013), tried to understand how the theory-practice gap affected students and how students handled the differences they found. Saifan et al. (2015b) mentioned the reasons for this gap and made suggestions to fill it.

Iranian researchers (Cheraghi et al., 2010) also showed that nurses often did not follow their university education and could not use their qualifications or scientific knowledge in the health system. Some reasons are the shortage of philosophical knowledge about nursing, the inadequate clinical knowledge of instructors and the poor communication between theoretical and practical units (Dadgaran et al., 2012), using the memorization system in nursing training Cheraghi and Salsali (2005), and the dominance of task-based work in clinical settings (Cheraghi et al., 2010). However, the importance of training programs in defining students' essential professional skills and aptitudes (Tiwaken et al., 2015), as well as the ambiguity and complexity of clinical training and related issues (Bagheri and Bazghaleh, 2016), especially in the emergency department, prompted current authors to use clinical experience and additional research to recognize and describe the reasons for the gap between theory and practice among nursing trainees in emergency departments.

Smeby and Vagan (2008) argue that there is a correlation between obsolete theories related to the misconception of the relationship between theory and practice. However, Maben et al. (2006) argue that the defect lies in the lack of socialization of theories in the clinical environment and in the inability to integrate research into the clinical practice environment.

Ajani and Moez (2011), state that there are several factors behind TPG in nursing education among others:

- The learning model,
- Students used as service providers,
- Lack of current clinical practice among nurse educators,

- Governmental support,
- Nursing Leadership Support,
- Nursing research,
- Lack of opportunities for continuing education.

According to Safazadeh et al., 2018; Saifan, et al., 2015a; Saifan et al.,2015b), the following factors influence nursing education:

- Student,
- Instructors,
- Environment,
- Culture and organizational processes,

➢ **Student**

In nursing education, the student, called a learner, is at the center of her education because she is the one who is learning. It will have to associate and bring to the daily (thanks to the theoretical contributions and to the implementation in the field), the proof of: knowledge, know-how, to know how to be, to know how to act, but also to make it known. Contrary to this assertion, some studies have shown that students study nursing without enough information about it. They lack knowledge of roles and do not have clear job opportunities. These would give false illusions about the profession. In addition, some of them are not very interested in the profession, others feel uncomfortable and, worse still, some think of another job. Students also learn by memorizing and blocking during the exam period. The stress of some care, the repetition of reckless care, and the attempt of nursing students to move to clinical activities are examples of the causes of the gap between theory and practice (Mannix et al., 2006; Safazadeh et al., 2018; Saifan, et al., 2015a).

➢ **Instructors**

In this category, the professional competence of instructors and nurses as influential human resources is taken into account. This could be effective in reducing gaps if they have enough experience and management skills to manage educational or clinical situations. Some studies suggest that clinically-competent practitioners who provide student support and follow-up, as well as debriefing, are critical to the success of student socialization. Mentors who have good relationships with the former are

highly valued because they integrate technical skills while stimulating students with their theoretical and contextual knowledge.

But often the low use of clinical judgment and consideration of certain procedures as obsolete cause the gap between theory and practice in nursing education (Safazadeh et al., 2018; Scully, 2010; Maben et al., 2006).

- **Environment**

The environment is characterized by the equipment and all the university and clinical stakeholders in 'student education. The lack of equipment for a standard procedure and the difficulties of using special equipment are some examples. In addition, creating a collaborative relationship between academic staff and clinical staff is of utmost importance when developing educational strategies. Proposed academics must work with clinically credible colleagues and support them to develop a curriculum that covers both the theoretical and practical areas, while engaging in jointly managed research projects to improve professional profiles. on both sides of theory and practice. Such collaboration will ultimately lead to greater consistency in nurse education, where students will see a link between academic study and clinical practice. The literature shows that the division of power between nursing academics and clinical practitioners is uneven, as academics (even if they do not evaluate the student in practice) retain their responsibility and influence through design. from the program. This unbalanced relationship and the equipment problem is one of the main reasons for the gap between theory and practice in nursing education. (Safazadeh et al., 2018, Scully 2010, Ousey and Gallagher 2007).

- **Culture and organizational processes**

Role modeling, organizational relationships and role conflicts are secondary factors and are classified in the organizational culture. The nursing education program requires the consolidation of knowledge and its anchoring in professional practice. The reason for this gap is that students follow substandard care provided by inexperienced staff or instructors and follow the routine of the hospital.

The role conflict between instructors, nurses and students is another reason why students do not act on the theory. In nursing educational programming, education needs-based factors, content, resources, time and teaching methodology must be taken into account to narrow the gap (Safazadeh et al., 2018, Ousey and Gallagher, 2007).

The gap will worsen due to the lack of organization of the care programs in the different environments (academic and clinical) of the students. The supervision and evaluation processes are part of the influential processes of the care services. Insufficient supervision of the work of nurses, a part-time presence of theoretical instructors in clinical settings and in evaluation and feedback methods, few nurses and mentors to assess students explain the gap between the theory and practice (Figure 2) (Safazadeh et al., 2018).

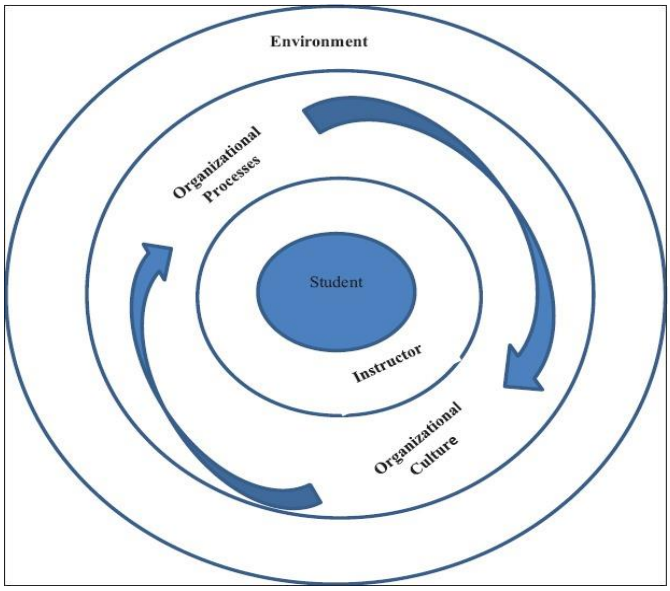

Figure 2. Factors Influence Nursing Education

Safazadeh S, Irajpour A, Alimohammadi N, Haghani F. Exploring the reasons for theory-practice gap in emergency nursing education: A qualitative research. Journal Education Health Promotion. 2018;7(132):1-8.

In addition, in their study on factors related to the gap between theory-practice to nursing students, Aththiligoda et al. (2017), concluded that individual factors such as anxiety, lack of knowledge and insufficient self-confidence negatively affect clinical education.

Insufficient equipment, students treated as workers, insufficient time to complete the procedure, a poor interpersonal relationship and poor communication with educational staff, a poor staff attitude towards student learning and insufficient clinical supervision are environmental factors that influence students' clinical learning. In addition, the authors concluded that the theoretical content of the nursing program is not sufficient to acquire good knowledge and does not build confidence in the clinical

configuration, and does not integrate theory and practice; differences between the actual situation in the classroom and in the demonstration room that there is variability in the procedures depending on the guardians (Baxter, 2007; Saifan, et al., 2015a; Smeby and Vagan, 2008).

2.3.2 Problems created by the gap between theory and practice

When analyzing the gap between theory and practice, it is imperative to note what is in the middle, that is, the student who is trying to learn.

Research has been conducted to determine if students perceive a gap between theory and practice and the implications this gap may have for the education of nursing students in recent decades.

Liimatain et al. (2001), has shown that students exposed to this gap have a variety of emotions and reactions about their presence and how to manage it.

- **Student reactions**

Liimatain et al. (2001), on the gap between theory and practice in nursing revealed that students feel left in the middle and uncomfortable during some of their first indoor placements. Nursing teachers make students believe that their learning should be self-sustaining, that is, they would inform practitioners of their learning needs and that service practitioners would help them achieve their learning goals. When health care practitioners have a very different vision of learning and have little understanding of self-directed learning. Their main concerns are patient safety, not whether a student is allowed to use specific skills and whether they have done this before they attend clinical placements or not. This revealed similar emotions among students in nursing programs. According to these authors, students feel anxious, fearful, preoccupied and questionable when they work in nursing departments (Maben et al., 2006; Cheraghi et al., 2010).

Similar research has been conducted on the training of medical students and their perception of the gap between theory and practice. Radcliffe and Lester (2003), both found that students felt that the transition from the classroom to the clinic was a cause of stress. Students reported feeling that they did not have enough knowledge or skills to help care for patients, which created a stressful learning environment.

Prince et al. (2000), conducted a focus group study showing that changes perceived by students at the beginning of clinical placements included negative experiences associated with professional socialization, difficulty apply their knowledge and skills problems of real patients and the need to adopt different learning strategies.

According to Prince et al. (2000), Radcliffe and Lester (2003), 67% of the students surveyed indicated that they were nervous at the beginning of their clinical placement and that some of them considered leaving.

Many said they have difficulty adjusting to the daily routine. The students also felt that the workload was heavy, the hours were long and the work was tiring (Phaneuf 2008).

- **Students' ability to make connections between theory and practice**

Hislop et al. (1996), studied the relationship between college-level courses and students' experiences with nursing internships. More than half of the students surveyed felt that it was difficult to associate their university courses with the practice, except in the context of the classroom, specific tasks such as practical skills or medical procedures. The same research 1996, also found that students had difficulty integrating theoretical components into nursing practice during their internships. Some students indicated that they did not see how the course elements were relevant to their learning and study, but that they understood their relevance. Students also noted that the relationship between their college-level courses and their placements did not really pertain to college courses informing their practice, but the opposite: practice helped them to grasp the theory of the course. For its part, Corlett (2000), reported a similar result: beginner students were frustrated by the amount of time spent on classroom theory as they preferred to focus on the acquisition of practical skills in nursing. Older students, on the other hand, may begin to understand how the knowledge of both parties converges in nursing.

When the class information differs from the clinical experiences, the students feel that the teacher is obsolete and of dubious credibility. Sharif and Masoumi (2005), conducted a group study to analyze clinical experience from the perspective of student nurses on the theory-practice gap. The students mentioned a lack of integration of

theory into clinical practice. Finally, students felt that the skills they were using in a clinical setting were not "professional".

They were allowed to provide only basic nursing skills and therefore did not feel as if the professional image evoked by teachers in the classroom was the same as in the care unit (Sharif and Masoumi, 2005).

- **Problems after graduation**

Some research indicates not only that the theory-practice gap poses problems for students during their studies, but the presence of a theoretical-practical gap can also be a problem for students once they have entered the labor market. Hunt et al. (1998) asked students who had graduated from a physiotherapist program at the University of Sydney if there was a gap between the knowledge / skills acquired at school and what they had need in the labor market. The results indicated that graduates perceived specific gaps.

Respondents felt that the most important gaps were patient communication, workplace adaptation, health sector knowledge, and workplace management skills.
The gap between theory and practice in nursing education according to Ajani and Moez (2011) has other influences on the nursing profession related to the motivation and dignity of work. If nurses are not well equipped theoretically, the image of nurses as chambermaids is promoted. On the other hand, if they do not demonstrate practical skills, their credibility is questioned, which leads to frustration and demotivation.

2.3.3 Suggestions to close the gap between theory and practice in nursing education

To bridge the gap between theory and practice in nursing education, Manspeaker et al. (2011), suggest that integration of educational information and clinical applications could improve by raising expectations for evidence-based practice among faculty and practitioners. In theory, if evidence-based concepts are taught in the classroom and used in a clinical setting, the distance between theory and practice would be reduced, thus, increasing evidence-based content both in the classroom and in the clinical setting could therefore help bridge the gap between theory and practice. In addition, Saifan et al. (2015a), Saifan et al. (2015b), Saleh (2018), suggested four main themes:

Channels open between professors of theory and practice,

- Students need more support,
- The skills of augmented clinical instructors,
- Preparation and improvement of laboratories.

➢ **Channels open between professors of theory and practice**

This was expected to produce synchronisation between what is given in the theory and the material given in the practice.

By opening these channels of communication;

- The theory teachers could coordinate with the clinical instructors to focus on specific subjects in the clinical setting.
- The clinical instructors could ask that students be assigned to specific cases in the hospital.
- This process could also be implemented visa-versa by discussing those viewed in the clinical training in the classroom.
- That theory teachers and clinical instructors should be the same persons. This was thought to strengthen the link between the material given in theory and the material covered in practice (Saifan et al., 2015a).

Depending on the available cases in the clinical area, the nursing teachers could modify their lectures timetable. This would produce harmony between the content of education in the classroom and the material given in the practice area. (Saifan et al., 2015a; Saifan et al., 2015b; Saleh, 2018).

➢ **Students need more support**

- In practical classes very early, such as the medical-surgical clinical course.
- Clinical instructors must be sufficiently qualified to recognize their needs at that time.
- Instructors need to know how to deal with students and how to help them.
- Instructors must deal with common day-to-day management issues to reduce the amount of time they have left for students.
- This support should be put in place from the school before going into the clinical field. This goal was to be achieved through classroom instructions and general advice on clinical parameters.

- Training in classrooms and dolls labs must match the actual complex clinical environment.
- That the instructors should consider the difference between students.
- Improving the instructors' communication skills (Saifan et al., 2015a; Saifan et al., 2015b).

➢ **Increase the competence of clinical instructors**

- Nursing teachers and clinical instructors must have experience in hospitals or clinical settings.
- Clinical instructors must be familiar with the clinical environment.
- Instructors must facilitate learning, know exactly what to focus on and how to break the ice between students and the clinical environment.
- Nursing teachers should present real-life case studies in classroom lectures and then review these cases, taking into account any issues that may be influencing students. The use of this teaching method can give more life to scientific terms and theoretical content.
- Divide the class into small groups. Each of these groups should be tasked with managing patients with specific clinical conditions.
- Using more audiovisual materials in the theoretical lectures was expected to help nursing students to understand the complexity of several health conditions. For instance, nursing teachers may use a real or animation movie to explain how to do cardiac catheterization (Saifan et al.,2015a; Saifan et al., 2015b; Saleh, 2018; Parker, 2014).

➢ **Prepare and improve laboratories**

- Students must follow several practical modules in the laboratory.
- Students must attend laboratory sessions to prepare them for the clinical environment.
- Nursing school laboratories must be adequately equipped to prepare nursing students for a complex clinical environment.
- Students need better and more sophisticated equipment in their laboratories (Lofmark, 2012).

In addition, Severinsson (1998) studied narrowing the gap between theory and practice: a supervisory program for nursing. Thinking has been found as a way to

bridge the gap between theory and practice; Improving interpersonal, professional and communication skills was also highly appreciated. In a study conducted by Corlett (2000), on nurses 'and nursing students' perceptions of the gap between theory and practice, all interviewees felt that this difference could be considered a difference. way to develop students' problem-solving skills minimize its impact.

2.4. Previous studies addressing the gap between theory and practice in nursing education

Numerous studies have been conducted on the gap between theory and practice in nursing education. Selected researches from the related researches are presented below.

Saifan et al. (2015b), conducted a study aimed at identifying the gap between the theory and practice of nursing education in the Jordanian context. A qualitative approach was adopted to study this phenomenon among thirty students interviewed. Several reasons were supposed to cause the gap between theory and practice in nursing education. The main reasons given were that the theory was intended to create a knowledge base while the practice involved the acquisition of nursing skills. Half of the students were agreed that the clinical instructor had played a major role in increasing or reducing this gap and had a major effect on their personal experience. Most students were agreed that laboratory training had helped a lot in narrowing the gap|.

Shahzadi et al. (2017) examines learning, practices, gaps between theory and practice, and causes of gaps between theory and practice. The results of their study emphasized that the student's theoretical knowledge was better than the performance of the training. The clinical faculty was not up to the task, which could narrow the gap between theory and practice and improve the performance of the nursing student. In addition, the integration of classroom and clinical training did not allow students to trust each other. It was therefore necessary to understand the importance of integration between theory and practice and to put more emphasis on the practical training of nursing students. Faculty in classrooms and in the clinical setting, which would guarantee students' knowledge, practical performance and self-confidence.

In a study seeking to identify and describe the factors that imply a theoretical-practical gap in emergency nursing education. Safazadeh et al. (2018), conducted eighteen semi-term interviews with (11 women and 7 men) theoretical and clinical instructors and nursing students of the Faculty of Nursing and Obstetrics in the Emergency Department at Isfahan University Hospital. The results of this study showed that nursing students faced different challenges in the emergency department to put the theory into practice. These challenges concerned the faculty as a university environment and the hospital as a clinical teaching environment; reforming these areas would help the nursing profession become more competent and competent. Focus on the main factors of the gap between theory and practice; the human resources, equipment, culture, and organizational processes of students, faculty, and hospitals could help to improve the main goals of nursing education: to apply acquired theories and improve their decision-making skills under real-life conditions and intensive. It is therefore imperative to use all factors involving effective education to transfer theoretical knowledge into practical skills for patient management (Safazadeh et al. 2018).

Thus, seeking to explore the existence of a gap between theory and practice in the learning program for Tunisian nurses through the technique of simple hand washing, Bouchlaghem and Mansouri (2018), led to a cross-sectional descriptive study of 70 participants. Only 10% of the population was able to correctly name the various recommended steps to perform the technique in question. Only 8.6% were able to complete the survey questionnaire. 67.1% of respondents observed did not perform the technique according to the recommendations. The results were extremely alarming and showed a gap between the knowledge taught in the classrooms and the training provided at the hospital by the students, at least with respect to hand hygiene proved the existence of a gap between theory and practice in the program of the high school of nursing of Tunis.

Abu et al. (2017) conducted a study at the College of Nursing in Palestine, on The Gap between Theory and Practice in Nursing Education: The Role of the Clinical Setting. This research method is a quantitative descriptive. Data were obtained from 135 students who had agreed to participate in the study. The results showed that the majority of students (56.3%) were enrolled at the higher level of the study. There was

a significant agreement (mean 3.5, t = 8.1) among the nurses-in-training on the role of framework availability in bridging the gap between theory and practice, according to which the referral process training venue could help bridge the gap highest average score (mean = 3.9, 78%). In addition, the study shows that a significant marginal agreement (3.4, 68%) on the availability of simulation labs in nursing colleges could help bridge the gap, which may well reflect the current low availability of simulation in some nursing colleges Gaza Strip. The study concluded that it is clear that all the topics mentioned by students play an imperative role in their learning process and could strongly reflect the current gap between theory and practice in nursing education. The study showed that clinical instructors make a valuable contribution to the student learning process, which can improve them by creating a positive learning environment and playing a role. In light of the results of the study, it is clear that the phenomenon of gaps exists and has its strengths as well as areas that can be improved. There are strategies to overcome this problem, which aim to facilitate an optimal clinical environment and to link the fields of education and practice (Abu et al., 2018).

According to Monaghan (2015), since the gap between theory and practice begins during pre-registration learning, it is essential to develop the clinical skills of nursing students in collaboration between universities and the community practice to develop the nursing profession.

3. MATERIAL AND METHOD

This chapter describes the methodological approach of the study. It presents not only the research design and the study environment, but also some aspects of the study population and sample. Also, the techniques of data collection, the plan of treatment of the information collected and the aspects related to research ethics.

3.1. Study design

This research has descriptive phenomenological method. Phenomenology focuses on the meaning of the experiences lived by man. The way individuals interpret their world in their given context (Polit and Beck, 2010), is the case of the perception of nursing students in the gap between theory and perceived practice during their course education. A qualitative approach is envisaged for this study, which deals with the gap between theory and practice in nursing education. Therefore, qualitative research is preferable for emerging and new research areas, as it identifies phenomena that can then be studied using other approaches. This is how qualitative researchers believe that reality is understood by sharing experiences and interacting with others (Bryman, 2012). Therefore, qualitative research seems to be effective when it is necessary to better understand social phenomena such as the gap between theory and practice in nursing education.

This study is in the field of education, specifically nursing education. It aims to capture the perceptions of Near East University foreign nursing students on the gap between theory and practice in their training.

3.2. The study site

This study was conducted with students from Near East University's Faculty of Nursing English Program. Foreign students go to the Near East University' Hospital for clinical practice. The hospital is located in Near East University Campus. The hospital has internal and surgery clinics, child health and disease, gynecology and obstetrics clinic, intensive care unit, emergency unit, operation unit, laboratories, polyclinics, radiology unit. There is basic nursing skills laboratory. Students learn baic

skills in fundamentals of nursing course and they acquire basic skills in the laboratory (Enc. 1).

3.3. Population and sample/participants

As part of this study, the population includes the second, third and fourth year students of the Near East University Faculty of Nursing for the 2018-2019 academic year. Quantitatively, it was estimated at 200 students. The students present that volunteer to partake in the surveys constitute the accessible population of this study. Students were randomly selected.

Informed Consent Forms were given to the students. It is therefore to them that we asked to express, from their experience, the gap between theory and practice in their education. Researcher choose the students that contributed to the information needs of study.

The sample technique called purposive sampling is used (Polit and Beck 2010). The saturation of the sample is reached when we will not obtain new data. Polit and Beck (2010), cited from Morse (2000), the number of participants needed to reach saturation depends on a number of factors. Data quality can also affect sample size. If participants are good informants who are able to reflect on their experiences and communicate effectively, saturation can be achieved with a relatively small sample.

As the sample size was not determined a priori, data were collected until data saturation or sampling to the point where no new data were collected information was obtained but redundancy was obtained. Polit and Beck (2010), consider data saturation as one of the guiding principles of sampling for qualitative research.

Students were invited to school and informed about the research. Sixteen volunteers' students accepting were included in the sample group and signed the consent form to participate in the study (Enc. 2).

3.4. Data collection

Individual, semi-structured in-depth interview was chosen as the method of data collection for this research. According to Bryman (2012), this method allows participants to describe their lives and experiences in their own words, to 'tell it like it is'.

Data were collected and analyzed concurrently throughout the research process (Strauss and Corbin, 1998). Data collection occurred through a process of guided. Interviews were conducted in the Room SBF 2 - D1 of the Near East University Nursing Faculty in a quiet meeting room, which ensured privacy, and were digitally recorded and transcribed verbatim (Streubert and Carpenter, 2011).

Two data collection tools prepared. First tools included the issue of demographics (Enc. 3) and second was the semi-structure questionnaire (Enc. 4) form on learning, theory, practice and gaps between theory and practice in nursing education. Semi-structured questions form were prepared according to the literature and the experiences of the researchers.

This method, according to Palmquist (2010), accounts for conflicting comments and unresolved issues regarding the meanings and application of concepts and procedures. After the form was prepared, expert opinion was obtained from five faculty members specialized in nursing education. Permission for data collection was obtained from the Approval of Nursing Faculty Dean.

The advisor of the graduate student has taken qualitative research courses and gained qualitative study experience. Before research process the two pilot study of the research were done by the advisor and the student observed. Conducting these pilot interviews before actual interviews increased the researcher's ability to interact with the interviewees.

The researcher and samples need to feel more confident to begin the interviews. At the beginning of the interviews, each participant received an explanation of the purpose of the study and the method of data collection. Interviews lasted 40 minutes or more with information prior to the interview and preparation. All interviews were recorded. All discussions were conducted in English, recorded on a tape and copied to a master computer accessible only to the research team.

The study was conducted from at the beginning of July to in the middle of the August 2019 based on a semi-structure questionnaire.

3.5. Analysis of tata/findings

Sixteen participants data was analyzed using a conventional content analysis that according to Hsieh and Shanon (2005), allows subtheme and group themes to generate only data. The analysis of recorded content that began in the early stages of data collection includes open coding, creating categories and sub-themes that emerge as the main theme of the study. Open coding is the reading of the audio tapes of the data of the interviewees translated verbatim, and the transcripts listened to and read respectively several times to allow an immersion and an appreciation of all the data (Verbatim). The transcripts were then read word by word and notes composed of words or sentences of the text representing the underlying thoughts or concepts. The researcher makes a decision, interpreting the elements to be placed in the same category. Categories with similar events and incidents were grouped into subtopics. This approach was continued until the appearance of a global label for a sub-theme representing all initial concepts or thoughts.

All data in a subtopic have been reviewed to ensure a match between the data and the subtopic. The sub-themes were then grouped into group themes, then into emerging themes with the researcher's agreement. An examination of the analytical process was performed by comparing codes and transcripts to improve reliability.

3.6. Ethical considerations

Ethical considerations that taken into account included human rights, that is, the right to self-determination, privacy, anonymity, confidentiality and fair treatment. Approval to conduct the study obtained from eleven members the Ethics Committee and approved by the Dean of Near East University, which served as an ethics approval body at the stage that the study conducted (Ethics Committee Approval Number:927-2019). Participation was voluntary and each participant signed an informed consent before participation in the study. Thereafter, the study potential participants approached and an explanation of the study nature, purpose and procedure provided to them (927-2019-Enc. 5).

3.7. Limitation of the study in time and space

The study was conducted from the beginning of July to in the middle of the August 2019 on the basis of a semi-structured interview guide face-to-face. It concerns the student population of the Near East University Faculty of Nursing English Program.

4. FINDINGS

This chapter presents data collected from students in the Near East University English Program in the Nursing Department and discusses the results obtained. In total, nine in-depth interviews were conducted with nine students.

The findings of this study should provide a better understanding of nursing education at Near East University. Unsurprisingly, most of the students showed in this study that there was a huge gap between the theoretical content in the classroom and they found in a complex clinical environment. This study focused on students' perceptions of the gap between theory and practice in nurse education. Student statements were collected and integrated into four main themes and each of these themes emerged from these sub-themes.

These data are presented in two sections, the first of which is the sociodemographic profiles of the respondents and the second corresponds to the themes and sub-themes selected for this study.

4.1. Profiles of participants

This section presents the data pertaining to the socio-demographic parameters of the students who participated in this study. Four parameters were selected: Country, class, gender and age.

Table 1. Socio-demographic parameters

Profiles	Frequency	Profiles	Frequency
Country		**Age**	
Cameroon	01	19 years	02
Nigeria	09	22 years	04
South Africa	01	23 years	02
Tanzania	01	24 years	01
Zimbabwe	06	25 years	03
		26 years	01
Class		29 years	02
2nd years	04	30 years	01
3rd years	05	33 years	01
4th years	09	42 years	01
Gender			
Female	12		
Male	06		

Table 2. Detail of the students Interviewed

Interview	Class	Country	Age	Gender
001	4th year	Nigeria	26 years	Female
002	3rd year	Nigeria	22 years	Female
003	3rd year	Zimbabwe	30 years	Female
004	3rd year	Zimbabwe	22 years	Male
005	3rd year	Nigeria	24 years	Female
006	4th year	Nigeria	19 years	Fe male
007	4th year	Nigeria	29 years	Female
008	4th year	Tanzania	42 years	Female
009	4th year	Nigeria	15 years	Female
010	4th year	Nigeria	2 3 years	Female
011	3rd year	Zimbabwend	^{2}5 years	Female
012	4th year	Nigeria	29 years	Female
013	2nd year	Cameroon	23 years	Female
014	2nd year	Zimbabwe	22 years	Male
015	2nd year	Zimbabwe	25 years	Male
016	2nd year	South Africa	25 years	Male

The survey profiles of this study show that the participants were from different African countries, including Cameroon, Nigeria, South Africa, Tanzania and Zimbabwe.

Of these, Nigerians were the majority followed by Zimbabweans. Fourth grade students were highly represented, followed by those in the last year, and those in the fifth grade were in the minority. The females dominated the males and their ages ranged from 19-42 years, of which the age of 22 was the majority.

4.2. Themes related to TPG in nursing education

The data collected from respondents come from their experience and experience of their points of life on TPG, which is the subject of these investigations. Supported textually, the thematic analysis of the data highlighted 4 themes followed by 14 sub-themes.

Table 3. Main-themes and Sub-themes

Themes	Sub-themes
1. Nursing Education	**a.** Balance **b.** Interaction **c.** Experience, practice **d.** Nursing image of student
2. Theory Practice Gap in Nursing Education	**a.** Gap impact **b.** Fears of students in the theory practice gap
3. Reasons of Theory Practice Gap	**a.** Academic environment **b.** Clinic environment **c.** Negligence **d.** Language barrier
4. Suggestion to Close Theory Practice Gap	**a.** Balance **b.** Support more **c.** Preparing laboratories **d.** Solve language barrier

Four main themes were identified in the study. The first main theme is Nursing Education. Sub-themes of nursing education the Balance between Theory and Practice, Retention of Learning, Interaction between Theory and Practice, Experience and Nursing Image of the Students were determined. Second main theme is Theory and Practice Gap in Nursing Education. The sub-themes retained in Theory-Practice Gap are: Gap Impact on the Students 'Learning Experience and Students' Fears in this Gap. The third main theme concerns the Reasons for the Theory-Practice Gap in Nursing Education. These reasons were determined by a Clinical Environment characterized by Hospital Conditions, Patient Conditions and Lack of Confidence between nurses and students, as well as patients and students; Academic Environment that determines the laboratory education problems, the lecturers stuff missing and student selflessness for his learning; and Communication problem was determined as a language barrier. Finally, the Fourth main Theme is Suggestion to Close TPG. These suggestions are as

follows: Education should be balanced between Theory and Practice, Students Need to be More Supported, Solve the Problem of the Language Barrier and Prepare and Improve the Education Laboratory.

1. Main Theme: Nursing Education

Students said it was important to practice in nursing education. They said that theory helps them learn practice. The students said that theory is what they learn in class and practice is when they go to hospital to experience what the learnt in class. They have associate theory and practice to have a good result. Practice is easy to do something and have strong knowledge when they practice nursing. They have access to practice on mannequins in their laboratory. These students' statements stand out the following subthemes.

a. Balance

Although the literature on nursing education shows the need to maintain a balanced approach between nursing education theory and practice in order to have a good nurse capable of caring for patients, Nursing Education should try to make it 50/50 (theory with practice is merged together, student statements on this balance are somewhat different. Some students said that in their education there is more theory than practice.

"Usually we do more theory than practice and what we do in theory is not as profiled …… I feel it should be profiled as it should be for nursing. (Student 003, 3rd year, Zimbabwe: Question 1)."

"Ok, I am having more theory than practice, so I think there is a gap. (Student 002, 3rd year, Nigeria: *Question 2)."*

"I notice some differences, but many things here in Cyprus is just the theory, no more time for practice; because theory….. (Student 011, 3rd year, Zimbabwe: Question 1)"

"I realized that in my second year and I noticed we do not really go for practice like the theory—they always give us more of the theory than practical. (Student 002, 3rd year, Nigeria: Question 4)."

"Definitely there is a huge difference because in the classroom we are thought the theories and nothing practically in the classroom, except maybe a roleplay or demonstration, but when we go to the hospital, it is different from the class because in the hospital you have to remember what you are thought in the classroom and apply it in the hospital as practice, but then if you perhaps you didn't remember what you were though (Student 005, 3rd year, Nigeria: Question 1)."

"Yes, there is gap. We have more theories……. Because sometime when we go to the hospital, there may be due to the lack of patient or language barriers. . (Student 009, 4th year, Nigeria: *Question 2). "*

"Yes, in theory and practice at Near East University, we have gap between them. Actually the theoretical part is more than the practical. (Student 010, 4th year, Nigeria: Question 1). "

"I mean learning theory in class was quiet ok, but then doing it or practicing it at the hospital was not much; and here we are not fully led to do what we did in theory. We cannot really practice here because at the hospital there are not many patients to have many offers. (Student 003, 3rd year, Zimbabwe: Question 4). "

Unlike the previous group, some of them said that in their education the practice is more elaborate than the theory, in practice the knowledge is more advanced than in theory because the practice brings more knowledge and according to them, this that they learn in class is not what they observe in practice.

"I mean in class your knowledge is limited due to the fact that you do not really get more exposure. So for me, the difference is that practice is more elaborated than theory. (Student 006, 4th year, Nigeria: *Question3)."*

"(…..), mostly the theory is limited than practice because practice brings more knowledge. (Student 006, 4th year, Nigeria: Question4)."

"Of course, there is a difference. Umm what I can say is that sometimes what we learn in class is not what we observe in practice. (Student 016, 2nd year, South Africa: Question1)"

b. Interaction

In Nursing Education, a reciprocal influence between theory and practice is required. This influence should also exist between educators, students and patients in clinical settings. In this study, the students state that they have noted the lack of interaction between theory and practice, as well as the lack of accessibility to patients and lack of interaction with the patient and their lecturers.

"…umm, I don't really know what to say about this one; but my experience is that the gap is wide because of the lack of accessibility to patient or the interaction with them; for example when we go the hospital, and we don't really have access to patients base on the lack of the language: we don't speak same language; sometimes the patients don't find us confident that we can help them or take care of them. (Student 016, 2nd year, South Africa: Question2)"

"My experience is the gap is mainly wide because of lack of accessibility to patient and lack of interaction as much as possible and also in general I also think a lot of things we do learn in theory maybe we are going to see them in the future maybe when we live to start working in the hospital itself, but right now the Gap I can see that there is that missing like the stuff missing in between which we learnt in class but we can't see them in the hospital. (Student 001,4th year, Nigeria: Question2)"

"If you get theoretical at your first year you will know when, how and practice is all about interaction with the patients, doing physical staffs but with theory you gain the knowledge (Student 015, 2nd year, Zimbabwe: Question11)"

c. Experience, practice

In Nursing Education, the lecturers owes knowledge or mastery of theoretical and practical subjects. This knowledge will enable him to learn students well. Students who do not receive a good learning will be less effective in the practice of his profession. In this study, the students talked about some experiences for their training.

The majority of students said that teachers do not give them all in reality and often some things are missing. To do this, others said they lack information and experience.

Such a situation, according to the students, will make them lazy. One student said that what they see the people doing, they too can do it better.

".....but right now the Gap I can see that there is that missing like the stuff missing in between which we learnt in class but we can't see them in the hospital. (Student 001, 4th year, Nigeria: Question2)."

"I would say that the key for the education for nursing students is a practice; because if you are not practicing every time, you will be lazy and you will not have more information about people. (Student 011, 3rd year, Zimbabwe: Question2)."

"....you need to do it, because it is what you see people doing that you can do better. (Student 012, 4th year, Nigeria: Question2)."

"Hum, the number one fear is, in the future you might be deficient in your knowledge when you are facing with a situation because of your lack of experience as you have not done it hands-on….(Student 010, 4th year, Nigeria: Question9)."

".....we were taught in class maybe from experience of our lecturers express from books but practice is something we have to do ourselves to gain our own experiences so that we can know how to handle situations if we ever meet them again so, that is my difference.(Student 001, 4th year, Nigeria: Question3)."

d. Nursing image of student

Nursing students must develop their skills by drawing on the different aspects of their education (theoretical and practical aspects) to enable the integration of knowledge that can be mobilized in a professional situation.

For this reason, the student can relate his image to everything he learns. In this study, students shared different perspectives on their education at Near Eats University. Some have a positive image, saying that they have not noticed a discrepancy between theory and practice and have not made the difference between theory and practice, because the two aspects of education go together and complete. According to them, they have the opportunity to practice at the hospital. They also say that they have learned a lot from the nurses and these nurses are experienced.

One of them recognized that the nurses of Near East hospital are good, but sometimes the language barrier matters.

"Hummmm, there is no really much different. (Student 012, 4th year, Nigeria: Question3)."

"Well, like I said, the gap is no really much referring to where I did practice. It has no really affected me though there is much language barrier; but the impact is good because "I really get much to learn a lot from the nurses and they are experienced". So personally I don't there is any much. (Student 006, 4th year, Nigeria: Question7)"

"Mmm, the gap is no much. It is just little. The only thing is that the staff nurses maybe in the hospital need to be……., to update themselves because in the theoretical aspect they teach us the current nursing research…… the current nursing care. But when we get to the hospital it is like they are still using the old nursing care. So the gap is no that too much, they just need to update themselves (Student 007, 4th year, Nigeria: Question 2)."

"Hmmm, little bit! I do not know if I can describe it like it is a big difference or not; but it is ok. I think that's how education should be. (Student 014, 2nd year, Zimbabwe: Question 2)."

"Well, the gap is ….. Hmmm I will not really say that there is much gap because what we have been thought is what we practice. But though there are changes in knowledge and in practice as well; and the nursing field is quiet developing very fast. So, from what I have seen and practice in the hospital, there is no really much gap between theory and practice! (Student 006, 4th year, Nigeria: Question2)."

"I do not see any difference in theory and practice in nursing education. The only thing is that both are interwoven. We guess in the theory aspect of nursing, it makes someone know what s/he is doing on patient; because we will only need the practical aspect of it (Student 007, 4th year, Nigeria: Question 1)."

"…So the theory aspect is teaching us why the practical is like we are practicing what we lean. (Student 007, 4th year, Nigeria: Question 3)."

On the other hand, other students gave a negative image by saying that the nurses did not allow them to interact with the patients or administer the care, they remained standing by observing what the nurses were doing. So, some students talked about their discomfort, that they will not be good nurses and unable to solve the patients' problems.

"I am a goodness only to realize later that I know this thing they appear to be different only to realize that there is a gap and that gap now need to be bridged so it in backs me in a negative way. (Student 004, 3rd year, Zimbabwe: Question7)."

"I just feel like I am not getting enough practice. (Student 001, 4th year, Nigeria: Question8)."

"The impact I have is sometime a lot of times I do feel like I am not doing enough or I am not doing what I am adequately meant to do in terms of like what I am supposed to know and learn from the practice I don't (Student 001, 4th year, Nigeria: Question7)."

"I believe that, while we have been thought as student, we should be able to practice. But sometimes they might not allow us to interact with patients or administer care to patients … (Student 006, 4th year, Nigeria: Question13)."

2. Main Theme: Theory Practice Gap in Nursing Education

In this study, the majority of students surveyed felt that there was a gap between theory and practice in nursing education at the University of the Near East, because the theoretical aspect is much more taught than the aspect convenient. According to these students, the theoretical aspect and the representation of nursing care provided in the classroom do not correspond perfectly to the nursing practice at the hospital. The theory studied in class gives only a mean or ideal vision and does not highlight the uniqueness of the real needs of each patient. This justifies the existence of a gap between theory and practice in nursing education. Thus, the student majority is that this gap has an impact on the learning experience of students and other students say they are afraid of the gap between theory and practice in nursing education.

a. Gap impact on the students' learning experience

The answers of the students are divergent on this point of view, confirm the impact which for some, it is positive and for the others the impact is negative. However, other students have responded that the gap between theory and practice in nurse education has no impact. Because the understanding of some knowledge can be progressive

"Well, as for me, it did not have much impact because I will later get to know it better. Those things I did not know in the first year, at least I used other materials to know it. (Student 001, 4th year, Nigeria: Question3)."

"I do not really have bad impact or not. But I have a good impact, because right now I theoretically learnt a lot. Practically I still trying because you live alone, but it has been absolutely good. (Student 014, 2nd year, Zimbabwe: Question7)."

"The impact of this is that I miss the opportunity to practice knowledge thought in school in this period, because in hospital practices are so different from what I learnt in school. (Student 013, 2nd year, Cameron: Question7)."

"Hmm, the gap does not have any impact on my learning. The only thing is that I am not happy when what that was thought in school was not done in the hospital. The skills that we were thought in school was not the same we are using in the hospital (Student 007, 4th year, Nigeria: Question7)."

"Well, like I said, the gap is no really much referring to where I did practice. It has no really affected me though there is much language barrier; but the impact is good because "I really get much to learn a lot from the nurses and they are experienced". So personally I don't there is any much. (Student 006, 4th year, Nigeria: Question7)."

"I think personally the gap must be filled because I think it will be good if we are taking at hospital and then thought and practice that same thing, it's going to make more impact than teaching and after two days going to the hospital to go practice then after all the theories done and go to the hospital and practice I think it's better we had

been thought and after being thought practice immediately in the hospital (Student 005, 3rd year, Nigeria: *Question2)."*

"There will nurses without experience…. With little experience. This is very dangerous I can say! Yes…., because there will be nurses with no experience……. So there will be quality of nursing care. (Student 008, 4th year, Tanzanie: Question 7). "

"It has a lot of implications: 1°) the gap in theory and practice makes some nurses to be lazy; 2°) it makes them to forget what they were thought in school. 3°) it reduces the interpersonal relationship between the patient and the nurse, because the way we were thought interpersonal relationship is not the way they are doing it in the hospital, just to be sincere with ourselves. So it has a lot implications. (Student 007, 4th year, Nigeria: Question 11). "

Also, students who show that the gap exists in nursing education and this triggers trajectories of change of competence of students who do not have the same effectiveness.

"When I also try to explain you or to ask question or something I would like to know, you don't get me to give me an answer. So this is the impact this gap can have in my learning education (Student 016, 2nd year, South Africa: Question7)."

"The gap Hmmm…, actually the negative impact is like since Hmmmm…, due to the language barrier and all this, because when you get to the hospital (like NEU Hospital), there is language barrier. Sometimes the nurses want to show us something but due to the language barrier they can't give us that much education. (Student 010, 4th year, Nigeria: Question7)"

"The impact I have is sometime a lot of times I do feel like I am not doing enough or I am not doing what I am adequately meant to do in terms of like what I am supposed to know and learn from the practice I don't ……(Student 001, 4th year, Nigeria: Question7)."

"But the thing is when I start working in hospital set up, and I have theoretical basis and my first experience as a nurse now in practice it wasn't so good. I feel to do some of the thing that I thought I knew so that one will lead me to decreased

connivance and definitely it will give negative impact on my work as a nurse. (Student 002, 3rd year, Nigeria: Question9)."

b. Fears of students in the theory practice gap

Obstacles in nursing education are frightening that the student can see when he is in education or even when he is practicing his profession. The gap between theory and practice in nursing education is a major obstacle, as some students have pointed out. The majority of students said that the gap scares them for different reasons: their education was not adequate, he risks being a nurse that he did not want to be, he could be deficient in their knowledge, individuals will not be confident of them and the fear of making mistakes like curse a patient

"My main fear is fear of not been adequate or fear of not knowing what I am meant to know same way as other people. (Student 001, 4th year, Nigeria: Question9)."

"My big fear is to be a nurse that I don't want to be. Because, I like the profession of nurse so much, but the way maybe we are learning will make me be a nurse I don't want to be. I want to be a professional nurse or someone who can be good at doing something, at taking care of the patients; but sometimes because of language barrier and lack of communication, we don't really get much what the teacher is teaching us. So the consequences will be like sometimes they bring you a patient, you try to care him/her but s/he does get well. This is the big fear I have today: being a nurse student by name but when you at the hospital or when you are working somewhere, when you find someone fell down and you are not able to solve his/her problem. That is the big fear I have. (Student 016, 2nd year, South Africa: Question9)."

"Fear about gap between theory and practice is to that ……. it affects the nurses who supposed to guide me when I realize that this person is not exactly doing what they thought me in class. So I guess that my fear is to tell or ask why the person does not teach me what I learnt in school (Student 013, 2nd year, Cameron: Question9)."

"Hum, the number one fear is, in the future you might be deficient in your knowledge when you are facing with a situation because of your lack of experience as

you have not done it hands-on; you might find yourself in a terrible situation when you have the theory up but then there is another part of you like experience even you are doing it by yourself. So there might not even know what to do (Student 009, 4th year, Nigeria: Question9).”

“Ah, as I said before, my fear is that we are losing the actual nursing because it is all about practice, if you have nurses who do not have enough skills to practice…that is my fear. (Student 008, 4th year, Tanzanie: Question9).”

“Probably I fear making mistakes like cursing a patient that is supposed to recover and then because of luck of experience and practice. (Student 005, 3rd year, Nigeria: Question9).”

“Humm, the major fear I have is to cause an individual not to be confident (Student 004, 3rd year, Zimbabwe: Question9).”

“I feel like when I graduated and I supposed to do my stand measure. I did not have that experience. (Student 003, 3rd year, Zimbabwe: Question9).”

“I feel that it might affect me in some ways; maybe if I go back to my country to work and I am scared that I might not be able to deal or apply the practical or the experimental part very well. (Student 002, 3rd year, Nigeria: Question9).”

“Actually my fear is when I go back to my home country, because since I got a lot of theories here, at least I go home they expect me to see more and more practical aspect. But actually to that one, to me it is not a problem because nursing education is all about the practice. So it will not be hard when I go back to my country (Student 010, 4th year, Nigeria: Question9).”

“Hum, the number one fear is, in the future you might be deficient in your knowledge when you are facing with a situation because of your lack of experience as you have not done it hands-on; you might find yourself in a terrible situation when you have the theory up but then there is another part of you like experience even you are doing it by yourself. So there might not even know what to do. (Student 009, 4th year, Nigeria: Question 9).”

"Yes, sometimes I have hesitation because you will have theory very well but when it comes to do something like practice, ……. let me give an example from myself: last year when I went home , one patient was there and she had lung problem. I was hesitating to check her because I did not know anything about the lung. But I remembered they told me to do this and that, but I never did practice. (Student 011, 3rd year, Zimbabwe: Question 9). "

These students do not admit to being afraid at the moment, they say that they will be able to have them in the long run.

"Hmm, I do not know as the time goes on I will experience a lot, but for now I don't have any fear. (Student 014, 2nd year, Zimbabwe: Question9)."

"Mmm, I do not have too much fear. The only thing is that it affects some people. (Student 007, 4th year, Nigeria: Question9)."

3. Main Theme: Reasons of Theory Practice gap

Based on the alternation between theory and practice at the university, this device in nursing education aims to articulate theoretical knowledge and practical knowledge, knowledge and action, reasoning ability and operational know-how. However, the answers that we have obtained from the teaching situations experienced daily by the students show that this is not self-evident. In fact, the student is simultaneously confronted with two environments (academic and clinical), the problem of communication and his responsibilities regarding his education.

Students responded that the academic environment, the clinical environment, the lack of communication and the student's neglect of his education were the reasons for which they identified the gap between theory and practice in nursing education.

a. Academic environment

Academic environment is characterized by the conditions of education under theoretical aspects which contribute to develop knowledge on the practical aspects to which the student will have to apply in the clinical environment and the organization of the passage of practices to the clinical laboratory. Student said that they don't use full capacity the clinical laboratory.

"To me, the gap is like maybe it depends on lecturers. Maybe the lecturer depends on the theory aspect. So if s/he used to give much theory than practice, that will be a barrier; maybe the language barrier also is one the reasons. (Student 010, 4th year, Nigeria: Question 6)."

"...even in the laboratory we are not using the laboratory full capacity (Student015, 2nd year, Zimbabwe: Question14)."

"...the teacher does not explain well or s/he tries to explain but you don't get him/her. Student016, 2nd year, South Africa: Question8)"

".....probable the teacher just come to class and read the note and didn't explain well something like that or just give project you come and he doesn't to correction then when you get to hospital those mistakes you made them again...(Student0015, 2nd year, Zimbabwe: Question6)."

b. Clinical environment

Clinical environment constitute the frame of the life, is characterized by all the conditions of the hospital (hospital culture type of hospital: private) and the conditions of the patients. The students said that these conditions of the hospital deprived, lack of collaboration with the patient are the reasons for gap in nursing education.

"The hospital we go to for practice is a private one, and we see that when we go there we can't really get interact with patients and administer care ... (Student006, 4th year, Nigeria: Question5)."

"When we go the hospital, and we don't really have access to patient base on the lack of the language: we don't speak same language; sometimes the patients don't find us confident that we can help them or take care of them. (Student016, 2nd year, South Africa: Question2)."

"To me… The only thing I see is that the staff is not sure to update themselves by the hospital management, which has to consistently doing exam for the staff nurses and also introducing the new nursing care…, the new quality care, new things like evidence pre-practice. The hospital has to be updating their staff nurses.

So by doing that, it makes them to be updated and also student nurses that go to the hospital….. (Student 007, 4th year, Nigeria: Question 6)."

c. Negligence

In this category, the concentration of the student as well as the mastery of the theoretical notions by the student were taken into account. Participants felt that some students were studying the nursing profession without enough information and did not focus on classroom teaching. To do this, they enter the care service without having enough knowledge.

"Students in particular. Some students don't take nursing seriously or they don't take it as serious job. Hum… probably the student didn't focus in class or was not taking the lectures seriously, (Student006, 4th year, Nigeria: Question9)."

"Hum… probably the student didn't focus in class or was not taking the lectures seriously….. (Student015, 2nd year, Zimbabwe: Question6)."

d. Language barrier

Communication is a very important foundation in education. Poor communication between instructors, students and patients would encourage students not to use their educational capacity in the clinic. Good communication is characterized by a common and comprehensive language in all communicators. The students said that instructors and patients communicate in Turkey, while students speak English which is the language of training. A wide barrier is created, causing poor communication, because of the gap between the theory and practice in nursing education at the University of the Near East. Students stated that language was a major barrier to nursing education at this university.

"In terms of communication with the professional nurses, if we want to talk with them, we do communicate with our phones sometimes.(Student 015, 2nd year, Zimbabwe: Question10)."

"I can say it is communication between all of them: Let say communication between nurse students and patients at the hospital. Mostly when we go at the hospital we find patients that don't speak English and I, myself nurse student I don't speak

Turkish. So that is a problem. So lack of communication between nurse student and patients; also lack of communication between students and teacher because sometimes we find other teachers, they don't really speak well English. It can be also lack of communication between nurse students and professional nurses that we find at the hospital when we go for practice. Sometimes they don't also really speak English. So it is the lack of communication between all of them: Lack of communication between student nurses and patients at the hospital, and between students and teachers in the class. (Student016, 2nd year, South Africa: Question6)."

"....Mainly for me communication is a barrier. (Student001, 4th year, Nigeria: Question7)."

"The conclusion I will dress is about 'having nurses that are better in theory than practice' but all the same we have other courses or we do a lot of courses in nursing and very staffs have to do with not just emotional communication. (Student001, 4th year, Nigeria: Question11)."

"I know that we probably deal with the language barrier, but we have to try, we have to be at least more practical. (Student003, 3rd year, Zimbabwe: Question12)."

"When we go to the hospital and on the major problems we have is the language barrier. (Student001, 4th year, Nigeria: Question1)."

".....maybe the language barrier also is one the reasons… (Student 010; 4th year, Nigeria: Question 6). "

"We are here in Cyprus as I mentioned the language barrier. (Student016, 2nd year, South Africa: Question11)."

"Ok, for example in this university setting, one of the major reason why there is this gap is the language barriers. It does not say a lot to tell you a lot to show you .....Or because they cannot express themselves to speak English and s/he speaks Turkish;… (Student 009, 4th year, Nigeria: Question 6)."

"For example here in Cyprus, sometimes Humm… when you go to the hospital, you know what you will do, but they will not allow you to do it because of the language

barriers; and it is difficult for you to do something due to the fact that it will be difficult for you to talk to the patients. …. (Student 011, 3rd year, Zimbabwe: Question 6).”

“I would say maybe it is because of language barrier sometimes—some of the staffs which are interpreted might be misinterpreted—because some of these (I can say ‘Lecturers) might not be good at English. So they read on the board and then they give it their theoretically. (Student 015, 2nd year, Zimbabwe: Question 10).”

“….when you get to the hospital (like NEU Hospital), there is language barrier. Sometimes the nurses want to show us something but due to the language barrier they can’t give us that much education. (Student 010, 4th year, Nigeria: Question 7).”

4. Main Theme: Suggestion to Close Theory Practice Gap

The gap between theory and practice is evident in the education sector. Indeed, to preserve the human in the educational field, it would be desirable to ensure that training devices resist the temptation of efficiency at all costs, filling and manufacturing professionals to established standards.

Students were asked about ways to narrow the gap between theory and practice. The need to balance or adjust the two aspects (Theory and Practice) of nursing education, as well as to open and improve the channels of communication between professors of theory and practice, between educators and students and between students and patients to further support students and improve laboratories for nursing students was highlighted.

Students suggested that if they received the relevant theory before a clinical placement, they would be better able to integrate theory into practice. However, this theory had to be up-to-date and reflect what is actually seen in practice, and that these aspects of teaching (theory and practice) are provided by educators who are proficient in the language of learning; to say the English language, communication barrier in their education.

a. Balance

Preventing and reducing nursing education problems by encouraging and facilitating the training of nurses would help to avoid the gap between theory and practice in nursing education. Indeed, according to student responses, to reduce the GPT: theory and practice should be at 50/50, lecturers should be adjusted, the major solution to try in theory and put forward practical examples or studies of cases.

"Coming to class and learn something ……. You learn faster than this online staff. So theory and practice should be 50/50. (Student012, 4th year, Nigeria: Question14)."

"So I think the school can it 50/50, meaning that you study in class and you go for practice. (Student012, 4th year, Nigeria: Question13)."

"I think there should not be a gap, in the first place it should be balanced like if you have 50% of theory, the other 50% should be of practice. Not that you have like 70% of one and 30% of the other, etc (Student 009, 4th year, Nigeria: Question 2)."

"Mmm, personally I think …… it is better for the theory and practical part to be 50/50 than the practical to be more or the theory to be more…. It is better for them to be 50/50 so that students will be able to do both theory and practical aspect. (Student 010, 4th year, Nigeria: Question 2)."

"So it is almost balanced so that when we work out there we know everything like we almost get the necessary. (Student015, 2nd year, Zimbabwe: Question2)."

"I feel that why it manifests it is balanced to the school, the educational body of the school or the system of the school. So it is the system of the school that matters! If this system of the school is well developed and well equipped, and even the lecturers are well equipped, I guess there will not be enough (Student012, 4th year, Nigeria: Question6)."

"So for me, you should have the balance and not just the full course on the theory. (Student 009, 4th year, Nigeria: Question 13)."

"To me, as I said, to eradicate this gap between theory and practical aspect, since all the topic is like communicating practical and theory aspect in nursing, so as I already said, if the teachers and students balance them (50/50), it will be much better for both students, hospital and the lecturers.(Student10, 4th year, Nigeria : Question13)."

b. Student need more support

Teaching and guidance is an important component that should be provided by the lecturers and preceptors in nursing education. The students explained the importance of being supported during their learning. Nurse students reported lack of support from the lecturers and nurse during their clinical experience. Some students indicated that this support should be started from the school before going to the clinical area
The students felt that they did not receive good support in the clinical field because at one point they found that the nurses were giving care to the patients without interest to the students to observe the procedure.

"So to reduce this gap will be like, when you go for practice, they university staff must assign a kind of committee or some people; it can be from teacher's staff that can come with us at the hospital and in case we need to ask questions or when we have difficulties, they can help us. (Student 016, 2nd year, South Africa: Question12)."

"I do that with my You Tube. I go there to learn more practical since we do have more theory. So I go on YouTube to do research and see/watch how they do things. (Student 002, 3rd year, Nigeria: Question10)."

"I need a support or somebody to guide me so that I may know if what I am doing is right or not. (Student 012, 4th year, Nigeria: Question9)."

"You can use internet to try to find a real clinical examples to help you on the other hand the lectures can assist the student by like what I said giving them questions thought theoretical but with a clinical implication with a real hospital cases or real clinical cases where students are asked to provide solution through the application of knowledge or application of their theory. (Student 004, 3rd year, Zimbabwe: Question13)."

"Give us a good environment for us to do more practical or maybe there should be on the same level, the practical and the theory. So it is really the school authority's work. (Student 002, 3rd year, Nigeria: Question13)."

"I think personally the gap must be filled because I think it will be good if we are taking at hospital and then thought and practice that same thing, it's going to make more impact than teaching and after two days going to the hospital to go practice then after all the theories done and go to the hospital and practice I think it's better we had been thought and after being thought practice immediately in the hospital. (Student 005, 3rd year, Nigeria: Question 2)."

"Go further and search more, do more research it is interesting and it can help many people especially here; because of this I think maybe the university will take into consideration and maybe try to fix somethings that are missing. (Student 016, 2nd year, South Africa: Question4)."

"Just do more research. To my all self I need to go online, do more research and try to acquire more knowledge. It is only the school that is in the best position to reduce the gap. Maybe we talk to the school, to the course advisor and our deans so that they can give us more time for practice. (Student 002, 3rd year, Nigeria: Question12)."

"I just think that they really need to implement; because in my country when I came from the beginning of the first class, nursing students are taking to the hospital, they practice with nurses, they come back and give feedback if it can be done. (Student 005, 3rd year, Nigeria: Question 14)."

c. Preparing, improving clinics and laboratories

However, there are several students explained that the nursing laboratory in their school is not equipped enough to prepare nursing students for the real complex clinical environment. The students showed the need for better and more advanced equipment in their laboratory.

"*I will suggest that we are given access to our laboratory so that in case you forget stuffs you can go in and practice on the mannequins. (Student 001, 4th year, Nigeria: question 14)."*

"I knew that practice specially starts with the laboratory although we go further at the hospital. (Student 015, 2nd year, Zimbabwe: Question8)"

"...even in the laboratory we are not using the laboratory full capacity (Student 015, 2nd year, Zimbabwe: Question14)."

"I would say — like I said before, it needs more practice; and equipment should be, when we are learning for especially fundamental field, that is when we first year feel of what really nursing is. So the equipment should be there when the lecturers are showing us. At least the equipment should be made available for us to see 'this is what the lecturer is talking about and it is there, s/he can show us, but we do not have it. (Student 003, 3rd year, Zimbabwe: Question 13)."

d. Solve the language barrier

To live is to communicate. No personal or professional life without words or exchanges. Communication makes it possible to share, seduce and convince. It will not matter to say something specific, but only to talk to each other. Language is a means of communication exclusive of the man.

Some students complained about the communication method of their theoretical and clinical instructors. Instructors do not know how to deal with students and help them because of the language that creates obstacles. Some explained that they used the translation of messages to facilitate communication with the instructors. And other students were using the Internet, especially YouTube, to solve or manage this gap.

"Even if you take the form, you have to take your phone and use google translate in order to understand the meaning of the word (Student001, 4th year, Nigeria: Question12)."

"For theoretical aspect, they have to give us lecturers who can purely speak English because here we are sometimes having problems in the sense that if you don't understand or if you raise your hand, it is not an explanation to them. (Student015, 2nd year, Zimbabwe: Question12)."

"To my all self I need to go online, do more research and try to acquire more knowledge. (Student002, 3rd year, Nigeria: Question12)."

"So I feel that when they assign a lecturer that understand language enough, I guess the gap will not be obvious and I guess they avoid all this gap different between theory and practice. (Student012, 4th year, Nigeria: Question13)."

"Now because of internet I can go on YouTube different platforms and I should be doing more reading (Student 007, 4th year, Nigeria: Question 10)."

"Hmmm, now it is just bad, be doing more reading since we are exposed to the theory part and find out things in my own, watch you tube videos… (Student 003, 3rd year, Zimbabwe: Question 10)."

Taking into account the class of students who responded to this research, it appears that the majority of second year students reacted to the interaction, the experience, the gap effect, the problem of the academic environment, the balance between theory and practice and the language barrier. Those of third year responded in majority on balance, impact of gap and support of the students. Fourth year students majority spoke about the experience, nursing image, gap impact, solve language barrier and suggested balance between theory and practice in nursing education

Concerning the countries of origin of students; the majority of Nigerian and Zimbabwean students responded on the impact of gap, nursing image, balance, student fears, experience, students need more support, and solve language barrier. Those in South Africa and Tanzania mostly discussed the laboratory problem, clinical environment, language barrier, students need more support, and nursing image. The one from Cameroon answered more about the student's negligence, solve language barrier and support more.

5. DISCUSSION AND CONCLUSION

Nursing education is the responsibility of the different actors. It is the university, the clinician and the student that is the all-star plate of these actors. Each of these actors plays an important and interdependent role in the development of the student nurse. Nursing schools responsible for academic input must provide accurate, up-to-date teaching in evidence-based teaching methods that reflect the current clinical environment. This includes consideration of staffing levels, communication constraints and a strong awareness of the importance of adaptation to the clinical context. The student that remains at the center of operation of the main actors must be motivated to learn and think about the practice. The results of this study theme could be transferable to other regions with conditions similar to that of this study. Analysis of some articles in the literature shows that this topic has been examined in several studies (McCrea, 2012; Ahmad et al., 2015; Dadgaran et al., 2015).

The present study provided additional information in gap existence of the gap between theory and practice in nursing education, reasons as well as important suggestions and systematic interventions to reduce or close the gap between the theory and practice in nursing education. These elements were produced by nursing students who spoke about their perceptions. Everyone knows that students are the most important component of the nursing education process. As a result, their experiences and perceptions are important in the development of the nursing education process.

When students were confronted with this situation, they felt a strong sense of dissatisfaction because they felt that the theoretical and practical knowledge they profited from in their education would not match the ones they imagined. They thought it was important for them to understand their limits but especially their possibilities, in order to afford to improve their knowledge.

In the study, student responses were classified into four key areas: Nursing education, the existence of a gap between theory and practice in nursing education, its reasons and strategies for fill the gap.

Respondents point out the discordance in nursing content as taught in the classroom to link the academic ideal to the reality of practice. This difference was noted by the fact that education is focused more on the theoretical aspects than on the

practical aspects, sometimes the theoretical knowledge learned in the classroom is also limited. Students encounter some field cases that teachers did not think about during classroom instruction, as reported by some students. Considering the magnitude of this difference, some students said that it is a lot and that there is a big gap between the theory and practice of nursing education.

Some studies in the literature show that nurses receive more theoretical knowledge than practical knowledge in official universities, which in turn creates the gap between theoretical knowledge and clinical practice, while nursing programs at the hospital provide direct access to nurse and research of best practices, immediate availability of clinical placements while in school, and direct employment after graduation (Debbie and Berkowitz 2002; Davhana-Maselesele et al., 2001).

Nurse education as Saifan et al. (2015a) consists of two main parts: the theoretical part, which reflects the knowledge passed on in class giving students the opportunity to build a range of powerful examples drawn from the experience, and the practical part, which focuses on improving skills in the clinical field and prepares nursing students to be able to "Do" as "Knowing" clinical principles in practice and encouraging students to use their critical thinking skills to solve problems. This can only be achieved by ensuring that nursing students apply what they have learned in the classroom and in simulation laboratory to real life situations.

Wells and McLoughlin (2014) emphasized that clinical education is still an integral part of the nursing curriculum and is the foundation for bridging the gap between theory and practice. However, the literature still shows a huge gap between theory and practice (Rich et al., 2010; Wolff et al., 2010). Students continue to complain of a contagious imbalance in their learning, where theory dominates practice. Therefore, the academic and clinical community in the learning of nursing students must assume its responsibilities for the education and effective preparation of nursing graduates, taking into account the theoretical aspects of institutions and practices in clinical settings (Greenwood, 2000). The hope is to improve the nursing education system if nurse educators and practitioners understand and appreciate the university-clinical role, its benefits, its elements and its challenges.

Literature demonstrates the gap between theory and practice as one of the major challenges in nursing education and practice today. Despite all the measures taken to

reduce this gap, there is a persistent gap between what nurses learn in school and practical applications in clinical settings (Corlett, 2000; Debbie and Berkowitz, 2002; Wall et al., 2014).

The gap between theory and practice can affect students in various areas of life; according to the reactions of the students surveyed for this study, the gap between theory-practice is very dangerous because it can induce inexperienced nurses and reduce the interpersonal relationship between patient-nurse, student-teacher, student-nurse and student-patent. These elements are consistent with previous studies supporting the lack of adaptation to clinical context, lack of self-esteem and self-image, stress and anxiety related to errors, conflicts with other nurses and complaints patients were contributing factors to the discrepancy between theory and practice (Kim, 2002; Park and Jang, 2010; Kim and Lee, 2005; Woo, 2015).

The language barrier is a communicational problem in nursing education at this study site. Both in the classroom and in the clinic, students are often confronted with this type of situation and sometimes find it difficult to cope with it. They are sometimes frustrated at not being understood and sometimes not understanding anything for their future being that nurse.

As language is an obstacle to communication, the support provided to students for nursing learning from an academic point of view is insufficient. Since teachers and preceptors do not speak English in favor of the Turk language, they cannot properly guide students in this area. According to Msiska et al. (2014), the inappropriate communicational attitude of nurse educators has a negative impact on the students they teach.

Therefore, Chaun and Barnett (2012) point out that the lack of harmony, communication and interpersonal relationships between the educator and the student adversely affects the learner's theoretical and practical learning. In addition, Guzman et al. (2006) state that the communicative attitude, approach, interpersonal relationships and neutrality of the speaker create trust between students and their teachers.

A common language helps foster verbal communication. Indeed, the use of the same language allows a better understanding of messages during exchanges between different people.

The best communication is achieved when teachers and students speak the same language, or when nurses in the clinic speak the same language with nurses and patients. Jagosh et al. (2011) believe that speaking and listening skills is an important aspect of communication in a clinical setting. Warnea et al. (2010) suggest that nurse practitioners should be a model for the nursing student by facilitating individualized counseling and professional learning.

In the classroom, teachers remain the facilitators of student learning and the creators of productive classroom environments, where students can develop the skills they may need. Thus, students are required to participate actively in classroom learning to develop their skills. But an investigated student indicated that the existence of the gap between theory and practice sometimes stems from the negligence of students, who either did not attend theoretical lessons or were present at the courses but did not follow the teaching properly, because of their distractions in the classroom; as a result, such students have found multiple difficulties in clinical practice to increase, Maben et al. (2006) indicate that students are unable to transfer knowledge acquired at university to the clinical setting or that they are insufficiently prepared for clinical placements by the university. Hence the existence of the gap between theory -practical education.

The results of this student support study are consistent with those of several other studies in which nursing students must be accompanied in clinical learning (Gillespie and McFetridge, 2006; Henderson et al., 2007; Warnea et al., 2010). Most students explained that they were not well supported by teachers and nurses in clinical settings, so they needed more support during the initial period of clinical learning. This may be due to the lack of effective communication because of the language that was a major barrier. One of the students said that sometimes the communication took place by the translation of the massages on the phone.

Therefore, Roter et al. (2008) states that clinical instructors and theory teachers should be aware of the importance of the stage of nursing students learning. They should increase students 'confidence in improving communication (Penman and Oliver, 2004) and by creating a stimulating and supportive environment, as increasing the knowledge and skills of nursing students should reduce students' stress levels.

In this study, most students have shown the need to strengthen communication because language is a barrier in teaching in this university and coordination between theory teachers and clinical instructors, and between these teachers and students. This situation has also been mentioned in the literature (Scully, 2011, Hope et al., 2011; Hatlevik, 2010; Corlett, 2000). Cheng (2010) indicated that if the cooperation between theory and practice is not adequate, this could result from the difficulty of transferring theoretical knowledge into one area of the clinical complex. According to Hope et al. (2011); Ousey and Gallagher (2010), this situation can lead many students to be shocked when they examine their ideal expectations and knowledge in a real-world context. This could widen the gap between theory and practice in nursing education. Therefore, the results of this study and the results of several articles (Cheng et al., 2010; Dadgaran et al., 2012;, Chaun and Barnett, 2012) suggest that more channels of communication are open between theory teachers, clinical instructors and students who are the main players in nursing education.

Nursing teachers should constantly find ways to show students the importance of a strong theoretical foundation for achieving excellence in their professional practice. This goal would be achieved through classroom learning experiences and clinical practices. Felder and Brent (2003) demonstrate the importance of active and constructivist learning that emphasizes multiple teaching modalities, including learning-by-doing and the fact that the student serves as a teacher for learning he is learning.

For Mendenhall (2007), the educator and those enrolled in the course assume the role of teacher and student at different times in the classroom. In these roles, all course participants optimize their learning by observing, reflecting, sharing and applying course material in the classroom and in the clinical environment. Both the teacher and the student are essential to creating an active learning environment, which should foster students' interest in the subject and encourage their participation.

Forrester-Jones and Hatzidimitriadou (2006) pointed out that the educator's desire to balance theory / practice, class / clinic, and student / teacher roles is most often expressed in the overall curriculum rather than in an only course.

Conclusion

Theory and practice are two important components of nursing education. When the knowledge gained in theory transitions into practice, effective learning becomes in nursing education. However, research shows that there is a gap between theory and practice in nursing education.

Four main themes were determined in the study.

The first main theme is nursing education. The sub-themes determined in nursing education: The balance between theory and practice, interaction between theory and practice, experience and nursing image of the students. The second main theme is theory and practice gap in nursing education. The sub-themes identified in theory-practice gap: Gap impact on the students' learning experience and fears of students in the theory practice gap.

The third main theme concerns the reasons for the theory-practice gap in nursing education. The sub-themes determined in the reasons for the theory-practice gap in nursing education: Academic environment, clinical environment, student negligence for his learning and language barrier.

Finally, the fourth main theme is suggestion to close theory and practice gap. The sub-themes determined in suggestions to close theory and practice gap: Balance, students need to be more supported, preparing laboratories and solve the problem of the language barrier.

Students were asked about ways to narrow the gap between theory and practice. The need to balance or adjust the two aspects (theory and practice) of nursing education, as well as to open and improve the channels of communication between the teachers of theory and practice, between educators and students and between students and patients to further support students and improve laboratories for nursing students has been highlighted.

This is the first study in the Turkish Republic of Northern Cyprus with the title of gap between theory and practice. Therefore, the information raised in this study can be useful to nursing students, nursing educators, clinical nurses and other health actors at

this University. The results of this study could also be transferred to be useful for other countries with similar conditions. Students' perceptions about nursing education, the gap between theory and practice, the reasons and solution of the gap will contribute to the curriculum revision.

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BRIEF PRESENTATION OF THE NEAR EAST UNIVERSITY Enc. 1

The Near East University (www.neu.edu.tr), established in 1988, is located in Nicosia, capital of North Cyprus, and as an international higher education institution employing highly qualified staff, offers the most extensive undergraduate and postgraduate education opportunities to over 26 thousand students coming from over 100 countries. The Near East University has 19 faculties comprising 220 departments and programs, eight graduate schools with around 218 graduate and postgraduate programs, and four high schools, 28 research institutes, and has several international memberships. The University is already a full member of the European University Association (EUA), International Association of Universities (IAU) within the body of UNESCO, International Society for Engineering Education (IGIP), Joint Commission International (JCI), the Federation of the Universities of the Islamic World (FUIW), 118 other national and international institutions and foundations, and moreover, many more membership applications related to various disciplines are already in progress.

BRIEF PRESENTATION OF THE NURSING FACULTY OF NEAR EAST UNIVERSITY

The school has the characteristic of being the first educational institution providing nursing education at the undergraduate, graduate and doctorate level in Turkish Republic of Northern Cyprus (TRNC). This school, which was formerly a member of the Faculty of Health Sciences, was established as a Faculty of Nursing in 2018 and became the first Nursing Faculty of the TRNC.

The Near East University Faculty of Nursing is a privileged institution that has gained scientific understanding and is able to transform knowledge into a professional level; educate nurses to gain knowledge and skills to use comprehensive hardware and provide modern nursing services in health institutions in TRNC, Türkiye and third countries; In the field of nursing, create a human power with sufficient qualification to conduct research and examination in the scientific framework, and aims to train nurses who have the knowledge and sense of care, developing and upgrading community health and who will work in the fields required by the various health institutions and organizations in the country.

The mission of the institution is to protect, develop and maintain the health of the individual family and the community; developing and conducting basic nursing education and services using contemporary approaches and methods based on science and technology, developing care, education, research, management, consulting and leadership roles. The vision of the faculty is to continue to become a leading nursing education institution that is recognized and preferred at national and international level by students, lecturers, educational programs and researches.

Faculty is capable of conducting educational activities in advanced standards. School has well-equipped laboratories where students and nursing students can perform nursing applications. Students have the opportunity to conduct clinical applications in accordance with their courses at the Near East University Hospital, which is honored with many internationally prestigious awards and equipped with advanced technology in accordance with international standards and requirements.

In the Near East University Faculty of Nursing focus, education, projects and research activities are carried out in the fields of basic principles and practices in nursing, internal diseases, surgical diseases, child health and diseases, mental health and diseases, public health, women's health and diseases.

CONSENT OF THE PARTICIPANT **Enc. 2**

Information and Consent Form Concerning Participation in the Thesis

1. Title of the Thesis

Perception of Nursing Students in the Gap between Theory-Practice in Nursing Education

2. Responsible for the Thesis

2.1. Responsible

Julien Kisiata Feti

Student Number: 20177647

Phone: +905338379373

Email: julienfeti@gmail.com

2.2. Advisor

Assistant Prof. PhD Hatice Sen

Department of Nursing Education

Near East University

Phone: +95338215450

Email: haticesn@gmail.com

Preamble

We are soliciting your participation in this study. However, before agreeing to participate and sign this information and consent form, please take the time to read, understand and carefully consider the following information.

This form may contain words that you do not understand. We invite you to ask any questions you may find useful to the student researcher in charge of the thesis and to ask him to explain any word or information that is not clear.

3.1. Brief description of the Thesis

The research that you are asked to participate aims through a phenomenological qualitative descriptive study, to describe the perception you have as a student in nursing of the gap between the theory and practice perceived during of your education.

3.2. Research process

Participation in an interview lasting approximately 40 minutes would correspond to your involvement in this research. During the interview, the discussions will be led by the student researcher and will focus on your perception in the gap between theory and practice in your education. In more detail, the discussions will focus on the description of the educational method, the gap between theory and practice, the factors involved, the consequences and suggestions for closing this gap. These interviews will be digitally recorded and will be transcribed in verbatim (words) by the student researcher.

4. Benefits, Risks and / or Inconvenience Associated with the Participation of this Study

Your participation in the research is not a risk for you. On the contrary, it will allow you to give your point of view on the gap between the theory and practice to observe during your nursing education and to participate in the advancement of knowledge on this subject. The time you will take to participate in the interviews is the only drawback related to this study.

5. Confidentiality of Data

In order to preserve confidentiality, no name will appear in the data collected so that no information can be recognized during the analysis and disclosure of results. In addition, the data collected and transcribed in verbatim will be encoded. The data will only be accessible to the research supervisor (Julien Feti), the advisor (Hatice Sen) of the thesis who is committed to the NEU Research Ethics Committee to preserve the confidentiality of the participants. These data along with consent forms will be kept under lock and key in a binder located in NEU's Department of Nursing Education.

All data will be safely stored and destroyed after seven years. Please note that this information will only be used for this study.

6. Voluntary Participation and Right of Withdrawal

Please be free to agree to participate in this research. Please note that you may withdraw from the research at any time and will not need to justify the cause. No remuneration will be awarded to participants for participation in the research.

Consent of the Participant

I have read the information and consent form and I have a good understanding of the purpose of this study so that my consent is informed. I am satisfied with the answers to my questions and the time I had to make my decision.

I agree to participate in this study under the conditions set out therein. I understand that I am free to accept to participate and that I will be able to withdraw at any time from the research if I wish, without any prejudice or justification on my part. A signed and dated copy of this information and consent form has been provided to me.

Date

Name and signature of the participant

Signature and Commitment of the Researcher Responsible for the Thesis

I certify that an authorized member of the research team has explained to the participant the terms of the form, that he has answered his questions and that he has clearly indicated to him that he can at any time terminate his participation, without prejudice.

I commit myself, along with the research team, to respect what has been agreed upon in the information and consent form and to provide a signed copy to the research team.

Date

Name and signature of the researcher responsible for the research project

SOCIO-DEMOGRAPHIC PARAMETERS FORM **Enc. 3.**

Instruction: Dear Students, Below are the questions asking for your socio-demographic information related "Perception of Nursing Students in the Gap Between Theory-Practice in Nursing Education" topic. Please write your information in the spaces. The information will only be used to identify you in the research.

- **Country:**…….
- **Class:**..……
- **Gender:**…….
- **Age:**……

Enc. 4

PERCEPTION OF NURSING STUDENTS IN THE GAP BETWEEN THEORY PRACTICE IN NURSING EDUCATION

SEMI-STRUCTURED INDIVIDUAL DEPTH INTERVIEW QUESTIONNAIRE

I. WARMING EXPLANATIONS

a. Introduction (Opening-Introduction)

Explanation will be made according to the consent form.

II. PROCESS STEPS

a. Anything you tell me during the interview will remain confidential. This information will not be known to anyone except me and my teacher. In addition, your name will never be included in the report when writing the research results. The information you provide will be evaluated along with other information.

b. Your participation in the research depends entirely on your volunteering. You may not answer questions that you do not want to answer in the research, and if you do not want to continue the research, you can leave at any time.

c. During the interview, I will change the subject and make the directions. If there's anything you want to add, you can stop me.

d. I want to record the conversation on the voice recorder if you allow it. In this way, we can both use the time better and have the opportunity to get a more detailed record of your answers to the questions.

e. There is no distinction between right and wrong. Therefore, I sincerely hope that you will express your feelings and thoughts on the subject with all sincerity and sincerity.

f. The findings of the research will be used in my master's thesis.

g. Thank you in advance for agreeing to participate in this research. If there is a question you would like to ask before you start the interview, I want to answer it now.

h. I would like to start my questions if you allow me.

III. INTERVIEW QUESTIONS **Enc 4**

INTERVIEW QUESTIONS

General opening question

- What do you think about applying theoretical knowledge to practice?

Transition questions

1. Have you noticed a difference between theory and practice in your nursing education?

Key questions

2. What do you personally think of the gap between theory and practice in nursing education?
3. What is the difference between theory and practice in nursing education for you?
4. How and when does the gap between theory and practice manifest itself in nursing education?
5. What is your personal experience regarding the gap between theory and practice in your education?
6. What are the circumstances / situations / reasons why the gap between theory and practice is manifest in nursing education?
7. What impact does TPG have on your learning experience today?
8. Can you describe situations in which you identified TPG?
9. What fears or hesitations do you have about the gap between theory and practice in nursing education?
10. When you notice a gap between theory and practice, how do you manage it?
11. What do you think TPG's implications for nursing are?
12. What would be your needs as a student to be able to reduce this GAP?
13. What would you suggest to avoid this gap in nursing education?

IV. CLOSING

14. Do you have any questions to ask or something to say for this study?

- Thank you for taking the time and contributing to my research.

ETHIC FORM **Enc. 5**

EK: 927-2019
Enc. 5

YAKIN DOĞU ÜNİVERSİTESİ
BİLİMSEL ARAŞTIRMALAR ETİK KURULU

ARAŞTIRMA PROJESİ DEĞERLENDİRME RAPORU

Toplantı Tarihi :27.06.2019
Toplantı No : 2019/70
Proje No : 859

Yakın Doğu Üniversitesi Hemşirelik Fakültesi öğretim üyelerinden Yrd. Doç. Dr. Hatice Şen'in sorumlu araştırmacısı olduğu, YDU/2019/70-859 proje numaralı ve **"Perception Of Nursing Students İn The Gap Between Theory-Practice İn Nursing Education"** başlıklı proje önerisi kurulumuzca değerlendirilmiş olup, etik olarak uygun bulunmuştur.

1. Prof. Dr. Rüştü Onur (BAŞKAN)
2. Prof. Dr. Nerin Bahçeciler Önder (ÜYE)
3. Prof. Dr. Tamer Yılmaz (ÜYE)
4. Prof. Dr. Şahan Saygı (ÜYE)
5. Prof. Dr. Şanda Çalı (ÜYE) KATILMADI
6. Prof. Dr. Nedim Çakır (ÜYE) KATILMADI
7. Prof. Dr. Kaan Erler (ÜYE) KATILMADI
8. Prof. Dr. Ümran Dal Yılmaz (ÜYE)
9. Doç. Dr. Nilüfer Galip Çelik (ÜYE) KATILMADI
10. Doç.Dr. Emil Mammadov (ÜYE)
11. Doç. Dr. Mehtap Tınazlı (ÜYE)

CURRICULUM VITAE

Name	Julien Kisiata	Surname	Feti
Place of Birth	Kikwit	Date of Birth	Dec, 20th 1973
Nationality	Democratic Republic of Congo	Tel	+905338379373
E-mail	julienfeti@gmail.com		

Educational Level

	Name of the Institution where he/she was graduated	Graduation year
Postgraduate/Specialization		
Masters	Near East University	
Undergraduate	Higher Institute of Technic Medical of Kinshasa/DRC	2006
High school	Higher Institute of Technic Medical of Kikwit/DRC	2000

Job Experience

	Duty	Institution	Duration (Year-Year)
Assistant		Higher Institute of Technic Medical of Kikwit/DRC	2007-2016
Nurse		The Biamba Marie-Mutombo Hospital/Congo	2004-2006
Supervisor at the Health Area/Congo		Rural Health Area of Kasangulu/Congo	2001-2004

Foreign Languages	Reading comprehension	Speaking*	Writing*
English	Good	Moderate	Good
French	Very Good	Very Good	Very Good

Turkish	-	-	-

Foreign Language Examination Grade								
YDS	ÜDS	IELTS	TOEFL IBT	TOEFL PBT	TOEFL CBT	FCE	CAE	CPE
-	-	-	-	-	-	-	-	-

Near East University ENG020 ENGLISH PREP COURSE - II (G1) – Grade: CC

	Math	Equally weighted	Non-math
ALES Grade	-	-	-
(Other) Grade	-	-	-

Computer Knowledge

Program	Use proficiency
Office Programs, SPSS	Very good Moderate

*Evaluate as very good, good, moderate, poor.

Selected Publications

Feti Kisiata J. Analysis of the opinions of academic and scientific staff on the voluntary HIV / AIDS screening test. “Case of ISTM Kikwit” in Pistes et Recherches, ISP-Kikwit, 2008;25(1):127-137.
Munheye Nsusu T, Ndeba Labubor C, Feti Kisiata J. Level of transfusion safety in the health institutions of the Kikwit-Nord Health Zone. “Case of the Lunia / Kikwit3 Hospital Center, the Family Medical Center / Plateau and Polyclinic Esperencia and Fraternity / Lower City” in Pistes et Recherches, ISP Kikwit. 2010;27(1):29-48.

PLAGIARISM REPORT

julıen thesiis

ORIJINALLIK RAPORU

%16	%17	%8	%8
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