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**RESEARCH ARTICLE****The Clinical Instructors' Caring Behavior as Perceived by Nursing Students of Selected Medical Schools in China****WU, JINLI<sup>1</sup>✉ YANG, QUNYING<sup>2</sup>, YAN, LINA<sup>3</sup> and CHENG, FAN<sup>4</sup>**<sup>1234</sup>*La Consolacion University, Philippine***Corresponding Author:** WU, JINLI, **E-mail:** 1347983677@qq.com

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**ABSTRACT**

This study aimed to investigate nursing students' perceptions of the clinical instructors' caring behavior. The researchers tried to examine the role of socio-demographic profile in terms of age, gender, and year level in relation to the respondents' caring behavior perceptions. This descriptive correlational study used a thirty (30) item questionnaire as the main gathering tool. The said questionnaire was distributed to 72 nursing students who were enrolled at selected medical schools in China for the 2022-2023 academic year. Data results were statistically analysed and interpreted using appropriate statistical tools, including the Percentage-Frequency Distribution Method, the Weighted Mean Formula and the Chi-Square Test. The results showed that the majority of the respondents belonged to the age bracket of 20-25 years (46, 63.9%), most were females (58, 80.6%), and there were more third year (junior) nursing students (29, 40.3%). This suggested that the majority of the nursing students studying at the selected medical schools were females, aged between 20-25 years and there were more junior students compared to sophomores and seniors. Results of the questionnaire revealed that with the average mean score of 2.72 in level 2 (sophomores), 2.96 in level 3 (juniors) and 3.15 in level 4 (seniors), the respondents had rated slightly agree on all the observed indicators of clinical instructors' caring behavior perceptions. Thus, this depicted that the respondents had positive perceptions of their clinical instructors' caring behavior. The results of the correlation between the independent and dependent variables pointed out that aside from their year level, which has a p-value of <0.010, no other independent variables were significantly associated with the respondents' perceptions of the caring behavior of their clinical instructors since the p values of their age (0.081) and gender (0.689) did exceed the 0.05 level of significance. Thus, this revealed that only the year level of the students is significantly associated with caring behavior perceptions demonstrated by the clinical instructors, which has a p-value of <0.010. To all clinical instructors, this study suggests that further training of nursing students regarding the significance of caring is needed for them to be able to learn about the essence of caring in nursing and to be well-molded individuals who will give quality nursing care to individuals, families and communities. Thus, the care demonstrated by the clinical instructors will serve as a guide to nursing students in giving quality nursing care to their clients in various settings. One limitation of the present study is that only a few respondents were surveyed, and information regarding the impact of clinical instructors' caring behavior towards nursing students was limited; hence, for future studies, greater sample size is recommended, and other confounding factors should also be investigated.

**KEYWORDS**

Clinical instructor, Caring behavior, Nursing students and Perception

**ARTICLE INFORMATION****ACCEPTED:** 01 January 2024**PUBLISHED:** 20 January 2024**DOI:** 10.32996/bjns.2024.4.1.1

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**1. Introduction**

Nursing revolves around the essential principle of compassion, which must be nurtured in aspiring nurses. Nevertheless, there are significant apprehensions regarding the level of compassion displayed in the clinical setting and within nursing education. Clinical instructors are optimally situated to provide care for student nurses, enabling them to acquire the skills necessary to care for their

patients (Meyer, Nel, and Downing, 2016). The role of nursing education is crucial in molding skilled and empathetic healthcare professionals who possess the ability to provide exceptional patient care. The relationship between clinical instructors and nursing students has a significant impact on the quality of nursing education. Clinical instructors, esteemed as mentors and exemplars, have the duty of fostering the advancement and maturation of nursing students as they progress from theoretical education to hands-on clinical practice. At the core of this relationship lies the idea of "caring behavior," which includes not just the development of clinical expertise but also the offering of emotional assistance and guidance.

Caring is an essential principle in the field of nursing, and as such, it is a highly sought-after quality in student nurses (Mlinar, 2010). Providing support and attention to students during their nursing education is crucial, as it is during this time that student nurses acquire knowledge about the fundamental aspects of their profession (Begum and Slavin, 2012). Recently, there has been an increasing amount of literature dedicated to studying the influence of clinical instructors' compassionate conduct on the education and career advancement of nursing students. Given the increasing demand for skilled healthcare professionals, particularly in the changing healthcare environment, it is crucial to comprehend the opinions of nursing students regarding the compassionate conduct of their clinical instructors. The study backs up Smith et al.'s (2019) claim that caring behavior in nursing education is a complex concept that encompasses various components like emotional support, responsiveness, and mentorship. In our study, nursing students frequently emphasized the value of having their clinical instructors respect them, pay attention to them, and help them. This is consistent with the conclusions of Chang et al. (2020), who highlighted the crucial significance of emotional support in cultivating a favorable learning atmosphere.

According to Yang and Li's findings (2021), clinical instructors' caring behavior has a significant impact on student motivation and, as a result, learning outcomes. Our study found that students who perceived a greater level of caring behavior were more inclined to be motivated to excel in their clinical rotations and expressed higher levels of satisfaction with their educational experiences. These findings highlight the capacity of clinical instructors to motivate and direct students towards achieving high standards in nursing practice.

Liu et al. (2018) emphasized the impact of clinical instructors on the formation of professional values and identity in nursing students. A number of participants in our study highlighted the significance of clinical instructors in molding their comprehension of the nursing profession and inculcating ethical principles. This underscores the significance of compassionate conduct in fostering not only clinical proficiency but also the cultivation of a robust professional identity.

The study reaffirms the correlation between caring behavior and student satisfaction, as previously examined by Zhao and Wu (2023). Students pursuing a nursing degree who perceived a significant degree of compassionate conduct expressed higher levels of contentment with their educational encounters. This implies that the influence of clinical instructors' compassionate conduct goes beyond individual engagements and influences the overall educational experience of nursing students.

Wang and Zhang (2022) suggested that cultural factors have a substantial impact on how people perceive caring behavior. The collectivist values and Confucian principles that are inherent in Chinese culture have the potential to shape the expectations and interpretations of caring behavior in the field of nursing education. Hence, interventions targeting the improvement of compassionate conduct among clinical instructors should take into account the particular cultural subtleties of China.

This study sought to investigate and evaluate the perceptions of nursing students regarding caring behavior in specific medical schools throughout China. Through an analysis of this crucial element of nursing education, our aim is to augment the current reservoir of knowledge and offer valuable perspectives that can guide nursing education methods and improve the caliber of care delivered by upcoming nursing practitioners.

In this paper, the researcher examines important discoveries and discussions from relevant studies conducted during this time. These findings will establish a basis for comprehending the present state of clinical instructors' caring behavior as perceived by nursing students and will direct our own inquiry into this essential aspect of nursing education in the Chinese context. In essence, the research seeks to offer valuable perspectives on improving nursing education and fostering the development of empathetic, skilled, and compassionate nursing practitioners in China.

## **2. Review of Related Studies**

### **2.1 The Clinical Instructors' Caring Behavior**

Clinical instructors in nursing education play a crucial role that goes beyond simply teaching clinical skills. They also focus on fostering a sense of empathy and compassion among aspiring nurses. This study investigates the perspectives of nursing students in China regarding the compassionate conduct of their clinical instructors. Yang and Li's research (2021) demonstrates that clinical instructors' caring behavior has a significant impact on students' motivation and learning outcomes. Students pursuing a nursing

degree who perceive a significant level of compassionate conduct from their instructors are more inclined to be driven to excel in their practical training. This drive, in turn, enhances the achievement of educational goals. The results of our study highlight the importance of the emotional bond between clinical instructors and students in promoting a constructive and development-focused learning atmosphere.

The study conducted by Liu et al. (2018) highlights the significant influence of clinical instructors on the formation of professional values and identity in nursing students. Instructors not only convey clinical knowledge but also foster ethical principles, integrity, and a sense of professional identity through their compassionate actions. The participants in our study emphasized the significant impact of clinical instructors on their comprehension of the nursing profession, which strongly resonated with them.

The study confirms the relationship between caring behavior and student satisfaction found by Zhao and Wu (2023). Higher levels of perceived caring behavior among nursing students are associated with increased satisfaction with their educational experiences. This underscores the extensive influence of clinical instructors' compassionate conduct, as it contributes to the wider educational progression of nursing students, guaranteeing their active involvement and dedication to the program.

A study conducted in the Chinese cultural context aligns with the findings of Wang and Zhang (2022), who emphasized the impact of cultural factors on perceptions of caring behavior. Chinese culture, with its collectivist values and Confucian principles, presents intricate expectations and interpretations of caring behavior in nursing education. Hence, interventions targeting the improvement of clinical instructors' compassionate conduct should take into account these cultural subtleties and adjust accordingly to fulfill the particular requirements and anticipations of nursing students in China.

To summarize, the study emphasizes the crucial significance of clinical instructors in nursing education. Their compassionate conduct serves not only as a means for imparting clinical knowledge but also as a driving force for motivation, professional growth, and overall student contentment. The study adds to the current discussion on nursing education by emphasizing the importance of cultivating a culture of compassion within the clinical learning environment. Continued professional development and support for clinical instructors are necessary to enhance their capacity to offer meaningful support and mentorship to nursing students. This will ultimately foster a group of compassionate and competent nurses in China.

## **2.2 Students Perception of Clinical Instructors' Caring Behavior**

The study aims to understand how nursing students, in particular medical schools in China, perceive the compassionate behavior of their clinical instructors. The study's insights are consistent with and build upon the discoveries of various influential authors in the field. These authors' research has greatly contributed to the discussion on the experiences and viewpoints of nursing students in the context of clinical education.

The findings of this study align with the conclusions reached by Zhao and Wu (2023) regarding the significant influence of clinical instructors' compassionate conduct on student contentment. Their findings indicate that nursing students who perceive a substantial level of compassionate conduct from their clinical instructors express higher levels of contentment with their educational experiences. This is consistent with the general agreement in the literature that the quality of the clinical learning environment significantly influences student satisfaction (Zhao & Wu, 2023).

A study in China emphasized the influence of cultural factors on nursing students' expectations and interpretations of caring behavior, which is consistent with research by Wang and Zhang (2022). The collectivist values and Confucian principles that are inherent in Chinese culture have a substantial impact on the way students perceive things. Their research indicated that cultural subtleties influence how nursing students assess and value caring behavior during their clinical training. This emphasizes the significance of taking cultural context into account when addressing the needs and expectations of students.

The study emphasizes the significance of emotional support in nursing education, aligning with the findings of Chang et al. (2020). The nursing students in our study frequently highlighted the significance of experiencing support and appreciation from their clinical instructors. We have discovered that emotional support not only enhances students' emotional well-being but also serves as a catalyst, inspiring their dedication to their clinical rotations and cultivating a favorable learning atmosphere.

Liu et al. (2018) highlighted the significance of clinical instructors in influencing the formation of professional values and identities in nursing students. Instructors, by demonstrating compassionate conduct, not only impart clinical knowledge but also foster ethical principles and aid in the cultivation of a robust professional identity. This highlights the diverse and important role of clinical instructors as mentors and exemplars in shaping the future of the nursing profession.

In the end, the study produced important revelations regarding nursing students' perceptions of their clinical instructors' compassionate behavior. These findings support and expand on the conclusions made by respected authors in the field, highlighting the importance of clinical instructors' conduct in influencing students' satisfaction, motivation, and professional growth. This study emphasizes the importance of nursing educators and institutions giving priority to creating a clinical learning environment that is caring, supportive, and culturally sensitive. This environment should align with the expectations and experiences of nursing students in China.

### **3. Theoretical Framework**

The study employed Watson's theory of transpersonal caring (1999) and Peplau's theory of interpersonal relations (1952). The transpersonal caring relationship proposed by Jean Watson is a unique form of human care that relies on a moral dedication to safeguarding and improving human dignity as well as the innermost self. This relationship involves a caring consciousness that is expressed to maintain and respect the embodied spirit, with the potential to facilitate healing through the occurrence of shared experiences, perceptions, and intentional connections. According to Watson (1999), caring is the primary and unifying focus in nursing practice. Transpersonal refers to a human-to-human relationship that involves two distinct individuals at a specific moment. The relationship simultaneously surpasses individual perspectives, establishing a connection with elevated levels of existence and an enhanced awareness that taps into the universal domain and realms of inner enlightenment, the realm of the human spirit. The citation (Watson, 1999) According to Jean Watson (1985), the level of authenticity and sincerity displayed by the nurse during the act of caring directly impacts the effectiveness of the caring process. She asserts that a solitary act of compassion has the potential to become a moment of opportunity. The forces of love, faith, empathy, intention, awareness, and connection to a profound energy source are crucial factors in the process of healing. The reference "Watson, 1999" is provided. The objective of nursing is to facilitate individuals in achieving a heightened level of coherence between their mind, body, and spirit. This fosters the development of self-awareness, self-respect, self-recovery, and self-maintenance while also embracing diversity and potentiality. The objective is to achieve this goal by employing transpersonal care, establishing relationships, and utilizing the human care process. This approach acknowledges and addresses individuals' subjective experiences, allowing them to discover significance in their lives by examining the meaning behind their disharmony, suffering, and turmoil in their lived experiences (Watson, 1999, p. 292).

Hildegard Peplau (1952) defines nursing as an interpersonal process that entails the interaction between two or more individuals who share a common objective. Peplau's Interpersonal Theory (1952) primarily emphasizes the nurse-client relationship and the development of problem-solving skills. The nurse-client relationship is an interpersonal process that occurs between the nurse and the client, who is an individual experiencing a specific need. Psychodynamic nursing encompasses the comprehension of an individual's behavior, assisting others in recognizing emotional challenges, and applying principles of human relations to address issues that arise across various levels of experience.

The interactive process consists of four distinct phases: orientation, identification, exploitation, and resolution. The orientation phase involves identifying the problem and determining the specific type of service required. During this stage, an individual experiences a perceived need and actively seeks professional assistance. A nurse then responds and aids in identifying issues and utilizing accessible resources and services. The identification phase occurs when an individual starts to experience a sense of belonging and a capacity to handle the problem, thereby reducing feelings of helplessness and hopelessness. During the exploitation phase, the individual strives to maximize the benefits derived from the available options within the relationship and may experience fluctuations in their level of independence. The resolution phase follows the successful completion of the preceding phases. As a result, the relationship ends, and individuals exhibit improved emotional conduct and maturity. Hildegard Peplau published a work in 1952.

#### **3.1 Conceptual framework**

Watson's (1979) theory of human caring identifies the belief that caring is at the center of nursing. In the 1990s, research primarily focused on quantitative method and found that faculty members' caring attitude is crucial for establishing a favorable learning environment, fostering students' professionalism, and ensuring their continued enrollment in nursing programs or successful transition into the nursing profession (Amendola, 1998; Blackstock, 2003; Clark, 2006, 2008; Griffiths & Tagliareni, 2001; Langford, 2007; McManemy, 2002; Waterman, 2007).

This study examined the independent variables of nursing students, specifically age, gender, and year level. Research indicates that women are more prone to experiencing emotional responses when perceiving things in comparison to men (Nauert 2006). The gender of student nurses can impact their perceptions within a profession that is traditionally dominated by females. This may necessitate a reevaluation of student-instructor relationships. Nevertheless, according to Sherrod (1991), it remains unclear to what degree age-related factors influence individuals' perception of clinical instructors' caring behavior. Furthermore, the study considers the nursing students' perception of the faculty's caring behavior as the dependent variable. The student's perception of their clinical instructor's caring behavior contributes to the development of their own caring behavior in diverse contexts. As per

Kube's (2010) findings, nursing students had a positive perception of the impact of caring teaching behaviors on their learning in a clinical setting.

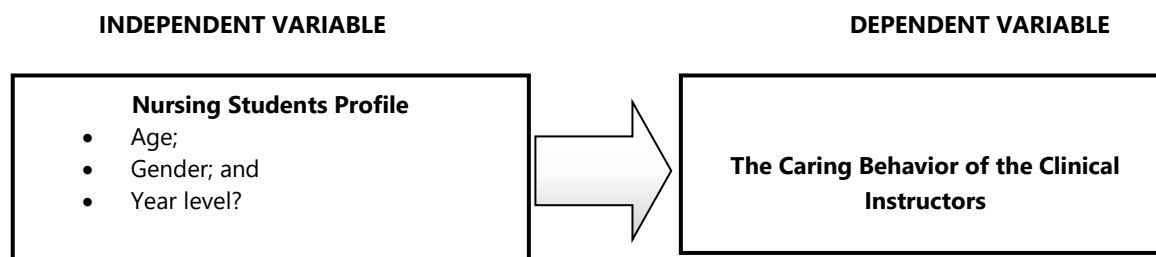


Figure 1 shows the interplay between the independent and dependent variables of the study.

### 3.2 Statement of the Problem

The study aimed to determine the nursing student's perceptions of the clinical instructors caring behavior among selected medical schools in China.

Specifically, it sought to answer the following questions:

1. What is the personal profile of the nursing students in terms of :
  - 1.1 Age;
  - 1.2 Gender; and
  - 1.3 Year Level?
2. What is the extent of the clinical instructor's caring behavior as perceived by the respondents?
3. Is there a significant relationship between nursing students' personal profiles and the perception of the extent of clinical instructors' caring behavior?
4. What action plan may be proposed to improve the caring behavior of the clinical instructors?

### 3.3 Hypothesis

The following null hypothesis was tested at the 0.05 level of significance.

HO<sub>1</sub>: There is no significant relationship between nursing students' personal profile and their perception of the extent of clinical instructors' caring behavior.

## 4. Significance of the Study

This study will be beneficial to the following:

**Nursing students.** This study will help nursing students promote awareness of their clinical instructor's caring behavior and emulate those caring behavior.

**Nursing education.** The outcome of the study will serve as the basis for nurse educators to use teaching moments as caring occasions to enhance students' learning both in the classroom and in clinical experiences. Assess students' adjustments in the nursing program in order for the students to grow as caring professional nurses.

**Nursing practice.** It is hoped that an enhanced caring behavior between the student and clinical instructors will help produce caring and competent nurses who will practice care for individuals, families and communities.

**Future Researchers.** The findings of this study will serve as the basis for future similar researchers and other related topics.

### 4.1 Scope and Delimitations of the Study

The primary concern of the study was to determine the profile of the nursing students in terms of age, gender, and year level with their perceptions of the extent of the clinical instructors' caring behavior. The respondents were all nursing students enrolled on selected medical schools in China.

### 4.2 Definition of Terms

The following key terms are operationally defined for clarity and better understanding of the study:

**Age.** This refers to the number of years a person has existed.

**Caring.** This denotes to a feeling and exhibiting a sincere concern and empathy demonstrated by teachers to students in clinical settings.

**Gender.** This connotes whether the respondent is a male or female.

**Nursing student's perceptions towards clinical instructors' caring behavior.** This refers to the views or opinions of students on clinical instructors' caring behavior and the caring actions demonstrated by the clinical instructor that facilitate the development of a caring attitude, clinical confidence and competence, and interpersonal caring interactions. It is rated depending on the student nurse's perception of caring behavior, such as enjoying nursing, being self-confident, being a dynamic, energetic person, encouraging a climate of mutual respect, understanding what students are asking or telling, taking responsibility for own actions, answers carefully and precisely questions raised by students, listens attentively, demonstrates clinical skill and judgment, is organized, and is accessible to students (Kotzabassaki, 1997).

**Year level.** This refers to nursing students who are currently enrolled among selected medical schools in China.

#### **4.3 Research Design**

The study used the descriptive correlational research design. Descriptive research "examines a situation as it is" and "does not involve changing or modifying the situation under investigation (Leedy & Ormrod, 2004). It is used to obtain formation concerning the current status of the phenomena to describe what exists with respect to variables or conditions in a situation. This is also correlating research that investigated the relationship between respondent's personal profiles and the extent of their perception of the clinical instructors' caring behavior.

The study employed the complete enumeration sampling technique to determine the sample. It is a sampling method of gathering presentation data from a group.

#### **4.4 Respondents of the Study**

The respondents of the study comprised 72 nursing students from levels 2 (sophomore), 3 (junior), and 4 nursing students (senior) currently enrolled in the 2022- 2023 academic year among selected medical schools in China.

#### **4.5 Research Instruments**

The study utilized 30 item survey questionnaire to assess nursing students' perception of instructor caring. Part I is composed of the nursing students' personal profiles, which include age, gender, religion, and year level. Part II consists 30 items questions based on Jean Watson's survey questionnaire of the nursing students' perception of clinical instructor caring behavior. The Likert scale was used in the questionnaire to determine the respondent's rating on the perception of the clinical instructors' caring behavior as follows: strongly agree (4), slightly agree (3) or slightly disagree (2), strongly disagree (1) in a given statement.

The questionnaire was scored by the respondents using these methods, and it vary according to its parts. The first part was answered by the respondents by checking the corresponding box that aligns the entry of each category.

The second part of the questionnaire was answered by ticking the number that corresponded to its answer. These numbers contain a specific description that identifies their level of knowledge. These are descriptive rating scales or perception scales, which were used and given below.

- 3.40 - 4.00 = Strongly Agree (SA)
- 2.60 – 3.39 = Slightly Agree (SIA)
- 1.80 – 2.59 = Slightly Disagree (SID)
- 1.00 – 1.79 = Strongly Disagree (SD)

#### **4.6 Data Processing and Statistical Treatment**

These are the statistical tools used in computing, analyzing, and interpreting the study data results.

**Frequency and Percentage Distribution.** This statistical tool is used to determine how many responses fall in each respondent's profile in terms of age, gender, religion and year level.

Formula:

$$p = f / n (100)$$

Where:

- p = Percentage
- f = Frequency
- n = total number of the respondents

**Weighted Mean.** This statistical tool is used by the researchers to compute the sum of all given values or items in distribution divided by the number of values or items summed. This is used to determine the actual perceptions of nursing students on the extent of the clinical instructors' caring behavior.

The formula is given below:

$$\bar{X} = \frac{\sum X}{N}$$

Where:

- $\bar{X}$  = Mean
- $\sum$  = Summation symbol
- X = each individual raw score
- N = the number of observation

**Chi-square.** This is used to investigate the relationship between respondents' personal profile and their perceptions towards clinical instructors' caring behavior.

Formula:

$$X^2 = \sum_{i=1}^n \frac{(o_i - e_i)^2}{e_i}$$

Where:

$X^2$  = Pearson's cumulative test statistic, which asymptotically approaches a  $X^2$  distribution

$O_i$  = an observed frequency

$E_i$  = an expected (theoretical) frequency asserted by the null hypothesis;

n = the number of cells in the table

#### 4.7 Presentation, Analysis and Interpretation of Data

**Table 1**  
**Distribution of the Respondents in Terms of Age**

Age (in years)	Frequency	Percentage (%)
12-19	18	25.0
20-25	46	63.9
26-64	8	11.1
<b>Total</b>	<b>72</b>	<b>100.0</b>

As shown in Table 1, it is evident that the majority of the respondents belonged to the group 20-25 years old (46 or 63.9%), 18 or 25 % of them were 12-19 years old, and only 8 or 11.1% belonged to the age bracket 26-64. The result implied that most of the students who enrolled at the nursing program were aged 20-25.

**Table 2**  
**Distribution of the Respondents in Terms of Gender**

Gender	Frequency	Percentage (%)
Male	15	19.4
Female	58	80.6
<b>Total</b>	<b>72</b>	<b>100.0</b>

The distribution of respondents in terms of gender is reflected in Table 2. The findings depict that the majority of the students who are enrolled under the nursing program are female (58 or 80.6%), and the rest are male (15 or 19.4%).

**Table 3**  
**Distribution of Respondents in terms of Year Level**

Year Level	Frequency	Percentage (%)
2	17	23.6
3	29	40.3
4	26	36.1
<b>Total</b>	<b>72</b>	<b>100.0</b>

Table 3 presents the distribution of respondents in terms of year level. The result revealed that there are 17 or 23.6% of students in the sophomore (second year level), 29 or 40.3% of students in the junior (third year level), and 26 or 36.1% of students are on the senior year (level four).

The findings show that the majority of the respondents are enrolled in the third year nursing program with more weeks of clinical experience in the areas of the Operating Room and Ward as compared to the sophomore, although less than in the number of weeks of clinical exposure as compared to senior nursing students.

Thus, the nursing students' clinical experiences in various hospital settings are more likely to determine the way they perceive the extent of their clinical instructors' caring behavior. The more occurrences of clinical instructor and student interactions, the greater the possibility of caring experiences that probably influence the nursing students' perception of their mentor's caring behavior in actual clinical situations (Jean Watson, 2006).

**Table 4**  
**Extent of Clinical Instructor's Caring Behavior**

Clinical Instructor	2 <sup>nd</sup> Year		3 <sup>rd</sup> Year		4 <sup>th</sup> Year		Overall	
	M	D	M	D	M	D	M	D
1. Shows genuine interest in patients and their care.	3.12	S/A	3.45	SA	3.38	S/A	3.35	S/A
2. Displays kindness to me and others.	3.18	S/A	3.34	S/A	3.54	SA	3.38	S/A
3. Makes me feel that I can be successful.	3.12	S/A	3.28	S/A	3.35	S/A	3.26	S/A
4. Makes me feel that I can be successful	3.06	S/A	3.24	S/A	3.12	S/A	3.15	S/A
5. Helps me envision myself as a professional nurse.	1.24	SD	1.66	SD	1.96	SiD	1.67	SD
6. Makes me feel like a failure.	1.59	SD	2.00	SiD	1.65	SD	1.78	SD
7. Does not believe in me.	3.24	S/A	3.28	S/A	3.65	SA	3.40	SA
8. Cares about me as a person	2.94	S/A	3.28	S/A	3.46	SA	3.26	S/A
9. Respects me as an unique individual.	3.12	S/A	3.31	S/A	3.31	S/A	3.26	S/A
10. Is attentive to me when we communicate.	1.82	SiD	2.97	S/A	2.88	S/A	2.67	S/A
11. Inappropriately discloses personal information about me to others.	2.41	SiD	3.03	S/A	3.04	S/A	2.89	S/A
12. Does not reveal any of his or her personal side	3.12	S/A	3.38	S/A	3.38	S/A	3.32	S/A
13. Acknowledges his or her own limitations or mistakes.	3.53	SA	3.38	S/A	3.35	S/A	3.40	SA
14. Makes himself or herself available to me.	3.06	S/A	3.41	SA	3.54	SA	3.38	S/A
15. Clearly communicates his or her expectations.	3.47	SA	3.34	S/A	3.50	SA	3.43	S/A
16. Serves as a trusted resource for personal problem solving.	3.29	S/A	3.17	S/A	3.35	S/A	3.26	S/A
17. Offers support during stressful times.	3.41	SA	3.34	S/A	3.23	S/A	3.32	S/A
18. Accepts my negative feelings while helping me to see the positive	3.18	S/A	3.21	S/A	3.50	SA	3.3	S/A
19. Allows me to express my true feelings.	2.53	SiD	2.52	SiD	3.04	S/A	2.71	S/A
20. Discourages independent problem solving.	3.12	S/A	3.21	S/A	3.15	S/A	3.17	S/A
21. Inspires me to continue my knowledge and skill development.	2.88	S/A	2.93	S/A	2.85	S/A	2.89	S/A
22. Makes me nervous in the clinical area.	2.24	SiD	2.69	S/A	2.65	S/A	2.57	SiD
23. Does not trust my judgment in the clinical area.	1.71	SD	2.34	SiD	2.85	S/A	2.38	SiD



24. Seems caught up in his or her own priorities, rather than responding to my needs.	1.88	SiD	2.55	SID	2.85	SIA	2.50	SiD	
25. Makes demands on my time that interfere with my basic personal needs.	2.29	SiD	2.66	SIA	3.15	SIA	2.75	SIA	
26. Focuses on completion of patient care tasks rather than the patient's needs.	3.18	SIA	2.86	SIA	3.42	SA	3.14	SIA	
27. Helps me find personal meaning in my experience	3.00	SIA	3.07	SIA	3.50	SA	3.21	SIA	
28. Encourages me to see others' perspectives about life.	2.88	SIA	2.97	SIA	3.58	SA	3.17	SIA	
29. Helps me understand the spiritual dimensions of life.	2.29	SID	2.48	SID	3.27	SIA	2.72	SIA	
30. Is inflexible when faced with unexpected situations (happenings).	1.82	SID	2.52	SID	3.00	SIA	2.53	SiD	
<b>Average</b>		<b>2.72</b>	<b>SIA</b>	<b>2.96</b>	<b>SIA</b>	<b>3.15</b>	<b>SIA</b>	<b>2.97</b>	<b>SIA</b>
<i>Note:</i>	1.00-1.79	Strongly Disagree (SD)		2.60-3.39	Slightly Agree (SIA)		M-Mean		
	1.80-2.59	Slightly Disagree (SID)		3.40-4.00	Strongly Agree (SA)		D-Description		

Table 4 presents the distribution of respondents' perceptions towards clinical instructor caring behavior. The result revealed that nursing students do slightly agree that clinical instructors portray dominant role models that play an influential aspect in the development of a student's caring behavior. Due to different lengths of time in clinical exposure, this verifies regardless of age, gender, and religion; there is a significant relationship between year level and nursing students' perception towards clinical instructor caring behavior.

The results showed that the second year level has an average score of 2.72, the third year level has an average score of 2.96, and the fourth year level has an average score of 3.15, with an interpretation of slightly agree. Thus, on average, the respondents rated slightly agree (2.97) on all the questions relating to the extent of the clinical instructor's caring behavior.

According to Lee, the category of interpersonal relationships was rated highest by both students and instructors as the most important. Nursing students rated the specific items of "good role models" that "encourage a climate of mutual respect" as most important in the most effective clinical 53 instructors (Lee, 2002, p. 417).

**Table 6**  
**Relationship between Nursing Students' Profile and the Perception on the Extent of Clinical Instructors' Caring Behavior**

Nursing Students' Profile	Extent of Clinical Instructors' Caring Behavior			Remarks
	Likelihood square	Chi- df	P-value	
Age	8.291 <sup>ns</sup>	4	0.081	Not significant
Gender	0.745 <sup>ns</sup>	2	0.689	Not significant
Religion	11.051 <sup>ns</sup>	6	0.087	Not significant
Year Level	13.208 <sup>**</sup>	4	0.010	<b>Significant</b>

*Note: ns-not significant at 0.05 level*

*\*\*-significant at 0.01 level*

Table 5 reveals that the age, gender, and religion profiles of the respondents are not significantly associated with their perception of instructors' caring behavior since the observed p-value of 0.010 does not exceed the 0.05 level of significance. This shows that regardless of their age, gender, and religion, it has no significant influence on the way they perceived the extent of their clinical instructor's caring behavior.

However, nursing students' year level significantly influenced the way they perceived the caring behavior of their clinical instructors since the observed p-value of 0.010 exceeded the 0.05 level of significance. The finding revealed that the more exposure nursing students had in the various clinical areas under the supervision of their clinical instructors, the more they observed and experienced the extent of the clinical instructors' caring behavior.

Each year level has a different length of time in clinical exposure. This table probably reflects that the more time of exposure to the clinical instructor during clinical duties, the more the students perceive and recognize the clinical instructors caring behavior. Such caring behavior will help them emulate or develop their personal caring behavior as they practice the nursing profession without the close supervision of their C.I (Dillon, 1996).

## **5. Summary of Findings**

Based on the analysis and results of the data gathered. The following findings are given below.

1. The total number of respondents were aged 20-25 years old (n = 46, 63.9 %), all were notably female (n = 58, 80.6%), and third year nursing students (n= 29, 40.3%) out of the total 72 respondents.

2. The respondents rated slightly agree (mean score of 2.97) on their perceptions about the caring behavior of the clinical instructors. Each statement have been rated differently by the respondents depending on their perception towards their clinical instructor's caring behavior; these were defined as either positive or negative perceptions. In the second year level, the statements that were ranked positively were the following: acknowledges own limitation or mistakes (mean score = 3.53) and serves as a trusted resource for personal problem solving (mean score = 3.29). The rated negative statements were; does not believe in the students (mean score = 3.24), and they rated poorly on the statement "help students understand the spiritual dimensions of life" (mean score = 2.29). In the third year level, the statements that were rated positively were: shows genuine interest in patients and their care (mean score = 3.45) and makes herself available to students (mean score = 3.41). The statements that were rated negatively were as follows: discourage independent problem solving (mean score = 3.21) and make demands on the students' time that interfere with their basic personal needs (mean score = 2.66). Lastly, the fourth year respondents have rated positively on the following statements, which were: encourages students to see other perspectives about life (mean score = 3.58), makes herself available to students (mean score = 3.54), and accepts negative feelings while helps to see the positive (mean score = 3.50), whereas, the statements that were rated negatively were; does not believe in students (mean score = 3.65), does not reveal her personal side (mean score = 3.38), discourages students from solving their problem independently (mean score = 3.1) and is inflexible when faced with unexpected situations (mean score = 3.00). Based on the results of the study, all respondents perceived caring clinical instructors as those who clearly communicate their expectations, offer support during stressful times and display kindness towards students. In contrast, uncaring mentors are those who do not envision students as professional nurses, focus on the completion of patient care tasks rather than the patients' needs, and do not let students express their true feelings.

3. There is a positive and significant relationship in the year level profile of the respondents related to their perception of the extent of clinical instructors' caring behavior since the observed p-value of 0.010 does not exceed the 0.05 level of significance. However, the age, gender and religion profiles of the respondents are not significantly associated with their perception of instructors. Each year level has a different length of time in clinical exposure. The more hours of clinical duty there are, the more the nursing students perceive and recognize the clinical instructor's caring behavior.

4. No other variables were significantly associated with their perceptions of clinical instructor caring behavior. In terms of age (p-value= 0.081), gender (p-value= 0.689), religion (p-value= 0.087), and year level (p-value=0.010), the observed p-values exceeded at the 0.05 levels of significance.

## **6. Conclusions**

Based on the results and findings derived from the study, the following conclusions are formulated below:

1. The study involved 72 respondents aged 20-25, predominantly female (80.6%) and third-year nursing students (40.3%), out of a total of 46 respondents.

2. The study found that most respondents slightly agree with the caring behavior of clinical instructors. Positive statements included acknowledging mistakes and serving as a trusted resource for personal problem-solving. Negative statements included not believing in students and not helping them understand spiritual dimensions. Positive statements included genuine interest in patient care and being available to students. Negative statements included discouraged independent problem-solving and demanding time. Positive statements included encouraging students to see other perspectives and accepting negative feelings. Uncaring mentors were rated negatively, such as not envisioning students as professional nurses, focusing on patient care tasks, and not allowing students to express their feelings.

3. The study found a significant positive relationship between respondents' year level and their perception of clinical instructors' caring behavior, with greater clinical exposure indicating a greater recognition of caring behavior by nursing students. Age, gender, and religion were not significantly associated.

4. The study found no significant association between age, gender, religion, or year level with their perceptions of clinical instructor caring behavior.

## 7. Recommendations

Based on the conclusions given, the following recommendations are listed below:

1. Nursing students should realize the significance of caring behavior in the nursing profession. Care demonstrated by the clinical instructors should serve as a guide for the nursing students in the development and practice of caring behavior in giving nursing care to clients in different clinical and community settings.

2. Students majoring in health-related courses, particularly nursing students, should be trained and well-moulded to be caring individuals. Thus, they will be able to learn about the essence of their profession and give quality nursing care to individuals, families and communities. Clinical instructors should be role models of caring behavior in nursing practice.

3. Clinical instructors and staff nurses in various nursing areas are ideally positioned to nurture caring behavior in nursing students. This study suggests the need for nurses to demonstrate caring behavior towards nursing students, so they can be sharing and competent nurses who will focus on the care of individuals, families, and communities.

4. One limitation of the present study is that only a few respondents were surveyed, and information regarding the impact of clinical instructor's caring behavior towards nursing students was limited. Hence, for future studies, a greater sample size is suggested. Other confounding factors should also be investigated for possible relationships in enhancing caring behavior in nursing.

**Funding:** This research received no external funding.

**Conflicts of Interest:** The authors declare no conflict of interest.

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