

Knowledge of Pakistani Nurses about Theory Practice Gap in Nursing

ALINA HAMEED¹, KABIR OZIGI ABDULLAHI², ADNAN YAQOOB³

¹Student of Master of Science in Nursing, Lahore School of Nursing, The University of Lahore

^{2,3}Assistant Professor, Lahore School of Nursing, The University of Lahore
Correspondence to Alina Hameed, Email: alina.hameed95@gmail.com

ABSTRACT

Aims: To evaluate the knowledge of the participants about theory practice gap and to determine the association of knowledge with demographic variable like age and educational level of the participants.

Methodology: A cross sectional study design was used to conduct this study. This study was conducted at Government and private Universities or Hospitals Lahore. Approximately 09 months after the approval of synopsis from Research Ethical Committee (REC). Sample size of 192 cases is calculated with 95% confidence interval, 7% margin of error and convenient sampling was used. Target population of the present study was nursing instructors and clinical nurses. SPSS version 21.0 was used for data analysis. Quantitative variables mean and standard deviation was be used. For categorical variables frequency and percentage was used. Chi-square test was be used. P-Value ≤ 0.05 was being considered statistically significant. The study was conducted in private and public sector in Lahore.

Results: In out of 192 respondent about 65.63% having score less than 13.8 and 34.38% scored between 13.8-18.4. However non of the participants have score greater than > 18.4 . Its mean that most of the study partecpents fall in the poor knoweledge score. It further illustrated that regarding to assess the knowledge level of the participants about theory practice gap; show that there were no awearness regarding the thory practice gap in nursing. The finding of this study as helpful for the future researcher and educational institute how to reduce this theroy practice gap.

Conclusion: It is not enough to have good knowledge about the existence of the gap; efforts must be made to minimize it in order to close the theory-practice gap. The theory-practice gap can be reduced or minimized through effective collaboration, improved knowledge acquisition, continuous education, periodic curriculum updates, and the incorporation of evidence-based practices into the curriculum of learning.

Keywords: Theory-Practice Gap, Knowledge, Pakistani Nurse, Educators, Private and Government Institute

INTRODUCTION

The theoretical knowledge drives and supports nursing practice, which delivers the best possible patient care and maximizes patient safety based on rigorous scientific evidence; the knowledge–practice gap is significant in the area of nursing¹.

A lack of ability to relate and apply knowledge gained via academic and research work to practice is known as the theoretical practice gap. Its effects make nurses vulnerable, putting any country's health-care system at risk².

The knowledge–practice gap is the distinction between theoretical and practical knowledge. The gap between theory and practice in nursing is expanding without a doubt, and this is considered as a roadblock to the profession's growth³.

According to the majority of respondents (67.2%), the summative evaluation took place at the course's conclusion. Respondents notice a mismatch between theoretical understanding and actual clinical procedures on the wards (54.1%)⁴.

Nursing education consists of two basic components: theory and practice. The goal of nursing education is to produce skilled and knowledgeable nurses who are prepared to work in a variety of settings. While in Pakistani context most of the study identified that nurses have a degree but fail to relate their knowledge with practice⁵⁻⁷.

The conflicting results of these studies the researcher need to it dig out further what are the factors that are responsible for the increasing gap between theory and practice in order to recommend the possible solution to minimize the TPG⁸.

According to the findings of this study, 83.80% of respondents said they had good knowledge, while 89.10% said they had good perspectives. A Fischer exact test revealed that respondents' levels of knowledge were substantially different in relation to their educational level ($2=13.88$, $df=6$, $p=0.022$). Also, when the type of the task people did was considered ($X^2 = 7.65$, $df = 2$, $p=0.022$)².

Most of the studies find out that student nurses had a strong consensus on the important of instructors in closing the theory practice gap. However such type of study was conducted to find out the knowledge and perception of nursing instructor and clinicians that why there is theory –practice gap in nursing profession of Pakistan⁵.

RESEARCH METHOD

Method: A cross sectional study conducted at Government and private Universities or Hospitals Lahore.

Population: Target population of the present study was nursing instructors and clinical nurses.

Sampling: A convenient and universal sampling technique was used.

Sample Size: Sample size of 192 cases is calculated with 95% confidence interval, 7% margin of error.

Development of instrument: A validated questionnaire was used to assess the knowledge about theory practice gap. The questionnaire was used after CVI approval. This questionnaire was two parts, section a socio demographic, Section B 16 questions on knowledge.

Reliability and validity: The Content Validity Index= (CVI) for knowledge questionnaire is $14/16=0.87$.

Data collection procedure: A self-administered questionnaire will be distributed to nursing instructors and nurse's practitioners to examine their knowledge.

Data analysis plan: Data were analyzed by frequency and percentage and display in form of graph and tables. To compare categorical variables used chi-square test.

RESULTS

A total of 192 sample size were 67.7% of the study participants having age between 21-30, 25% were 31-40 and 6.8% were 41-50 and only 0.5% are above 50 years. The mean age of the participants was (1.40 ± 0.640) . It means that most of the participants were in young age. Out of the 192 respondents, 5.2% were male and 94.8% were female. According to designation 90.1% respondents were Clinicians, 9.4% were nursing Instructor.

Received on 10-10-2022

Accepted on 17-02-2023

On the level of education 47.4% having General Nurse (RN) / Diploma and 46.4%Bachelor while6.3%were Master's Degree. Regarding the experience level of the study participants about 49% were fall in the 4-7 years, below 3 years 30.7%, 8-10 years was 13% and only 7.3%, having experience above 10 years. The mean experience of the participants was (1.97±0.856). It means that most of the participants have experience 4-7 years.

Table 1: Percentage and frequency of demographic variables

Variables	Frequency	%age	Mean	SD
Age (years)				
21-30	130	67.7	1.40	0.640
31-40	48	25.0		
41-50	13	6.8		
Above 50	1	0.5		
Gender				
Male	10	9.4		
Female	182	90.1		
Level of education				
Masters	12	6.3		
Bachelor	89	46.4		
General Nurse (RN) / Diploma	91	47.4		
Experience				
Below 3 years	59	30.7	1.97	0.856
1-7 years	94	49.0		
8-10 years	25	13.0		
Above 10 years	14	7.3		

Descriptive statistics, frequency, percentage $\bar{x}\pm S.D.$

In out of 192 respondent about 65.63% having score less than 13.8 and 34.38% scored between 13.8-18.4. However non of the participants have score greater than >18.4. Its mean that most of the study particepents fall in the poor knoweledge score. It further illustrated that regarding to assess the knowledge level of the participants about theory practice gap; show that there were no awareness regarding the thory practice gap in nursing as shown in the above figure 1.

Table 2 basically indicated that regarding a study question; what do you think is responsible for the theory practice gap. 38.5% response stated that poor resources and funding of infrastructure is a main responsible factor for the gaps .While 36.5% Ineffective collaboration between training school and the clinical areas, 26.6% agree with that Lack of periodic Curriculum update is the main reason, 13.0% agree that Inculcating evidence based practice in to

Table 2: Knowledge Question what do you think is responsible for the gap?

Questions	Frequency (n)	%age	Mean	SD
Ineffective collaboration between training school and the clinical areas	70	36.5	0.36	0.483
Lack of periodic Curriculum update	51	26.6	0.27	0.443
Poor resources and funding of infrastructure	74	38.5	0.39	0.488
Inculcating evidence-based practice into care	25	13.0	0.13	0.337
Others Specify	16	8.3	0.08	0.277

Table 3: Knowledge question what ways do you think theory practice gap be minimized?

Intra and Inter sectorial collaboration	92	47.9	0.48±0.501
Proper and adequate funding of research by the government and involvement of the training school and the Nurses in practical/Clinical areas	121	63	0.463±0.484
Use of KWL chart (know, want to know, and learned chart)	72	37.5	0.38±0.485
Frequent update of the curriculum to take care of changing need and demand of health care of the populace.	120	62.5	0.63±0.485

Table 4: Association of knowledge level with the age and level of education of the respondent

Variables	Knowledge				P value
	Total	Poor <13.8: n (%)	Moderate 13.8-18.4: n (%)	Good 18.4: n (%)	
Age (years)	21- 30	130	94 (72.3)	36 (27.6)	0.022
	31- 40	48	44 (91.6)	4 (8.3)	
	41- 50	13	12 (92.3)	1 (7.6)	
	Above 50	1	1 (100)	0 (0)	
Level of Education	General Nurse (RN) / Diploma	91	54 (59.3)	37 (40.6)	0.000
	Bachelor	89	70 (78.6)	19 (21.3)	
	Masters	12	2 (16.6)	10 (83.3)	

Chi - square test, p is significant at the level below $\alpha=0.05$; Ageand education level of the participants * Knowledge score of the nurses

case is needed and only 8.3% were different views regarding the theory practice gap.

Fig. 1: Total knowledge score of the participants about theory practice gap.

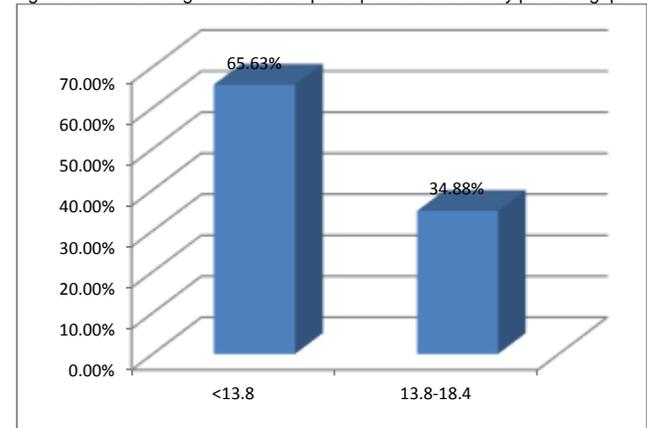


Table 3 show that regarding to the study question; what ways do you think theory practice gap be minimized? Out of 192 respondents; 63% of the participant's agree that we should minimize the gap by proper and adequate funding of the research by the government and involvement of the training school and the Nurses in practical/Clinical areas. However 62.5% agree that frequent update of the curriculum to take care of changing need and demand of health care of the populace, 47.9 % agree with Intra and Inter sectorial collaboration and only 37.5% were agree with that Use of KWL chart (know, want to know, and learned chart).

Table 4 showed that there were significant association between the age and the knowledge level of the participants regarding theory practice gap with a $p=0.022$. Means that those participants having age in between 21and 30, were good knowledge as compare to the other age group. Furthermore there were a high significant association between the education level of the participants and knowledge level with a $p=0.000$. Mean that those having a Master Degree were a good level of knowledge compare to these have Bachelor and Diploma.

DISCUSSION

According to the findings of this study, there is a general moderate level of knowledge regarding the existence of a gap between theory and practice. This knowledge is seen to be highest among MSc holders, followed by Diploma nurses^{9,10}.

This study findings shows that the bachelor degree holders had the lowest knowledge levels. Because they are fully involved in both teaching and hospital-based care, this result demonstrates that the majority of MSc nurses are clinical and academic nurses¹¹. The clinical and academic task collaboration provides a better understanding of the gap's existence, highlighting the urgent need for professional collaboration to close the gap between theory and practice².

The demographic is age and level of education shows the high significant relationship in this study. This study is supported by previous researches studies the theory practice gap is more effect on the academic and clinical practice¹².

This is in line with a study that was carried out in the United States (University of Calgary) they suggested a protocol for planning and design, training, competency maintenance, knowledge dissemination, policy implementation, and change. Despite their high educational status, nurses with a bachelor degree or higher demonstrated lower knowledge of the theory-practice gap than participants with a Diploma nurses¹³.

Results of this study shows the may be due to the fact that the majority of bachelor degree holders, who are normally nursing college faculty, do not consider it appropriate to travel to hospitals with their students for clinical coaching or supervision¹⁴.

This is consistent with a study that was carried out in Ethiopia. The study found that only a small percentage of educators (less than 50%) were knowledgeable about clinical preceptorship and clinical trials because they employed the services of a clinical instructor who typically took on that responsibility, which is the source of the gap^{15,16}.

Another study results found that bachelor's student nurses in Scotland were irritated because their skill training and how much they saw in the clinical setting did not correlate. Contrary to the theoretical education the students had received, RNs regularly employed peculiar and straightforward techniques to diagnose patients and offer care^{17,18}.

CONCLUSION

This study demonstrates that nursing educators and practitioners are fully aware of the theory-practice gap in nursing based on their knowledge and perceptions. It's anticipated that efforts should be made to investigate the study's suggestions and recommendations at the individual and organizational levels. Since nurses make up the majority of Pakistani health care workers, closing this gap will result in improved quality of care. It has been concluded that is not enough to have good knowledge and perceptions about the existence of the gap; efforts must be made to minimize it in order to close the theory-practice gap. The theory-practice gap can be reduced or minimized through effective collaboration, improved knowledge acquisition, continuous education, periodic curriculum

updates, and the incorporation of evidence-based practices into the curriculum of learning.

Conflict of interest: Nil

REFERENCES

- Gassas RS, Ahmed MEJNO. Development and psychometric evaluation of nurses' perception towards the gap between knowledge and practice. 2022;9(2):1497-505.
- Abdullahi KO, Ghiyasvandian S, Hasanpour M. Theory-practice gap: The knowledge and perception of Nigerian nurses. *Iranian Journal of Nursing and Midwifery Research*. 2022;27(1):30.
- Salifu DA, Gross J, Salifu MA, Ninnoni JP. Experiences and perceptions of the theory-practice gap in nursing in a resource-constrained setting: A qualitative description study. *Nursing open*. 2019;6(1):72-83.
- Mortell M. Is there a theory-practice-ethics gap? A patient safety case study. *International Journal of Africa Nursing Sciences*. 2019;10:38-42.
- Akram AS, Mohamad A, Akram S. The role of clinical instructor in bridging the gap between theory and practice in nursing education. *International Journal of Caring Sciences*. 2018;11(2):876-82.
- Barber LAM, Schuessler JB. Standardized patient simulation for a graduate nursing program. *The Journal for Nurse Practitioners*. 2018;14(1):e5-e11.
- Ahlstedt C, Lindvall CE, Holmström IK, Athlin ÅM. What makes registered nurses remain in work? An ethnographic study. *International journal of nursing studies*. 2019;89:32-8.
- Blakeslee JR. Effects of high-fidelity simulation on the critical thinking skills of baccalaureate nursing students: A causal-comparative research study. *Nurse Education Today*. 2020;92:104494.
- Cant RP, Cooper SJ. Use of simulation-based learning in undergraduate nurse education: An umbrella systematic review. *Nurse education today*. 2017;49:63-71.
- Günay U, Kılınc G. The transfer of theoretical knowledge to clinical practice by nursing students and the difficulties they experience: A qualitative study. *Nurse education today*. 2018;65:81-6.
- Hussein M, Osuji J. Bridging the theory-practice dichotomy in nursing: The role of nurse educators. *J Nurs Educ Pract*. 2017;7(3):20-5.
- Gassas R. Sources of the knowledge-practice gap in nursing: Lessons from an integrative review. *Nurse Education Today*. 2021;106:105095.
- Barrett M, Oborn E. Bridging the research-practice divide: Harnessing expertise collaboration in making a wider set of contributions. *Information and Organization*. 2018;28(1):44-51.
- Greenway K, Butt G, Walthall H. What is a theory-practice gap? An exploration of the concept. *Nurse education in practice*. 2019;34:1-6.
- Bril I, Boer HJ, Degens N, Fleer J. Nursing students' experiences with clinical placement as a learning environment for assertiveness: a qualitative interview study. *Teaching and Learning in Nursing*. 2022;17(4):383-91.
- Tanriverdi G, Ozyazicioglu N, Atay S, Sivrikaya SK, Gursoy MY, Cetin A. The recommended solutions of nursing students to bridge the gap between the school and practice areas. *International Journal of Caring Sciences*. 2017;10(1):199-208.
- McSharry E, Lathlean J. Clinical teaching and learning within a preceptorship model in an acute care hospital in Ireland; a qualitative study. *Nurse Education Today*. 2017;51:73-80.
- Parish A, Kim J, Lewallen KM, Miller S, Myers J, Panepinto R, et al. Knowledge and perceptions about aging and frailty: An integrative review of the literature. *Geriatric Nursing*. 2019;40(1):13-24.