

Explanation of Educational Justice Status in the Clinical Nursing Education in Iran: The Content Analysis of Previous Studies

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Abstract

Introduction: educational justice can transform all the dimensions of nursing and provide a background for developing its talent and ability in national and international levels. This study has aimed to explain the status of educational justice in nursing education in Iran.

Methods: This study is a review with a qualitative content analysis method; the data were collected with the search keywords clinical education, educational justice, clinical education challenges, educational equality, fairness in evaluation, in Persian and English separately and were combined in databases PubMed, Elsevier, Medline, Google Scholar, Scopus, SID, IranMedex and Magiran. Thirty five articles which had full-text access, published in Persian and English between 2000 -2014 were included in this study.

Result: Five categories were extracted including: "educational justice in the clinical evaluation", "educational justice in having an appropriate physical environment for clinical training", "educational justice in having equal rights for all students from different disciplines", "educational justice in having the experienced trainers regardless of geographic location", "educational justice about communications at the bedside".

Conclusion: Educational justice in clinical situations is not appropriate and the most important aspect of this injustice is lack of fairness in the clinical evaluation. Given that many studies have been done in this regard, it is time to shift research to assessing and implementing strategies to improve educational and evaluation justice in true settings. This is because students cannot tolerate injustice in the clinical settings and thus motivation, commitment and professionalism is marred in injustice atmospheres.

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Introduction

As a clinical discipline, nursing requires promoting areas of cognitive, affective, psychomotor and technical skills (1). Nursing education should raise an efficient and expert force work to meet the community health needs (2). It focuses on providing a good setting of knowledge, attitude and skills of nursing students and training nurses who have an important role in individual health and quality of life (3-6). To accomplish this goal theory and theoretical knowledge is not enough alone, and so the promotion of education and the clinical skills is required (1, 6). Therefore the clinical training is an essential part of nursing education that more than half of the nursing curriculum is dedicated to (7, 8). Professional clinical training include a practical dimension in which students get competencies and qualifications to improve patient care and learn to think and act like professionals(1), and convert and apply theoretical knowledge to mental and psychomotor skills which is needed for patient care(9, 10). Achieving to basic skills in nursing depends on the quality and quantity of clinical training (10). The clinic is where all space that surrounds nursing students, including the clinical environment, the equipment, the staff, the patients, and the mentors, it can be divided into two separate

environments (Education and physical Environment). When the nursing students at work usually melt together these two environments (8). In such an environment, the students develop their attitudes, competencies and psychomotor and interpersonal skills, getting critical thinking and problem solving skills (11-14). Generally, without good environmental elements satisfying learning will be more difficult (15, 16). Because, more than anything an effective learning is the result of good teaching that occurs in special condition such as fairness and justice (16, 17). Justice is the core of ethics in nursing education(18).The educational justice is utilizing of all the talents from equal opportunities tailored to their needs; create the same conditions for the talents, similar efforts to empower students(19, 20). This form of justice implicate the interactions, behaviors, and practices based on fairness, dealing without bias, guidance tailored to students' abilities, and fair assessment and grading(5, 20, 21). In the clinical training when justice is achieved through the inputs (fairness in resources) and the process in the educational environment (university experience, program, content, availability) students are able to acquire outcomes (learning acquisition, impact on the future) and in the execution path does not lead the student to another(19). Educational justice can improve the performance of students with



individual differences in the various fields of education, socio-cultural and economic (20, 22). Justly distribution of trained workforce, access to capable and interested professors, access to facilities and equipment, and same rule for all students, fairly clinical evaluation, and arisen expert nurses with Islamic ethics that can affect personal and social growth, in the pursuit of justice in clinical training is essential(23). although respect to the principles of justice and fairness in clinical learning environments by creating a sense of worth and confidence to achieving equitable outcomes commensurate with the efforts and competence of nursing students result in student satisfaction and an increase in the commitment to education and professionalization and fairness in patient care(21, 24, 25). So this study aimed to explanation of educational justice status in the clinical nursing education in Iran.

Methods

This study is a review with a qualitative content analysis method; the data were collected with the search keywords clinical education, educational justice, clinical education challenges, educational equality, fairness in evaluation, in Persian and English separately and were combined, in databases PubMed, Elsevier, Medline, Google Scholar, Scopus, SID, IranMedex and Magiran. Thirty five full-text Access articles published in Persian and English between 2000 - 2014 were included, with the content analysis method has been deeply studied and data were extracted by tow researcher, so that the studies were classified as subject, finally, after a careful reading, codes in relation to educational justice extracted then by comparing the similarities and differences category and sub-category was extracted. Categories and sub-categories were checked by pear and modified.

Finding

Five categories were extracted, for conformability of the results points some sample are extracted from the literature. Categories and subcategories showed in table1.

Table 1- Categories and Subcategories of Educational Justice Status in the Clinical Nursing Education in Iran

"If factors such as gender, ethnicity, self-esteem, discipline, appearance and social impact involved in assessment, there is challenging in educational Justice."(19)
 "My teacher added three scores to all of students, so one of my classmates get twenty, it is an injustices."(19)

In Borhani, et al study the most of participants believed that more evaluation isn't accurate and is superficial. "Currently, evaluation was done based on appearance and general criteria; for example, a student who had a good appearance and coverage, this is the point. We haven't an evaluation tool is based on the objectives."(5)

"Grading based on teachers opinion and students' sense of injustice in this type of evaluation result in dissatisfaction."(26)

"I disagree with the theory exam at clinical wards; instead of the emphasis on practical work the theoretical content is placed on and is not suitable for clinical evaluation"(5)

ii. Different trainers for a same sections setting out of injustice evaluation

"One of the requirements of fairness in the evaluation, there is a coordination in the clinical trainers. For clinical education, when students are divided into several groups, for groups in the same ward, may be different trainers have had different methods of teaching and assessment that lead to differences in the assessment of student."(27)

iii. Clinical training negligence setting out of injustice evaluation

In some studies, some teachers argued clinical courses are not being given the importance, insufficient time and student's indifference contributes to the problems. "Most [students] are not paying attention to practice as they consider the theatrical lessons and believe that eventually passes. Training time is too low, 3 days at some ward, it may take one or a couple of days to shut down. Students also tend not to stay at clinical wards and need to force them to keep. So what I teach and what I want?! This is where the evaluation is contested and there are concerns about the unfair assessment. In fact, justice and morality act when the situation is almost the same for all, otherwise, despite my propensity, it is unfair to judge."(5)

iv. Parallel evaluation by student and trainer of each other
 Teacher evaluation by students and conservative and retaliation assessment of student and teacher of each other also are problematic. Most teachers believe that "there is currently student and trainer having each other's back."(5)

2- Educational justice in having an appropriate physical environment for clinical training

"As a nursing student we haven't place, no conference room, no place to rest, no dressing room, and I think if the problems was solved training time can be better."(28)

Categories	Subcategories
Educational justice in the clinical evaluation	<i>Clinical evaluation based on non-academic criteria different trainers for a same sections setting out of injustice evaluation different trainers for a same sections setting out of injustice evaluation clinical training negligence setting out of injustice evaluation</i>
educational justice in having an appropriate physical environment for clinical training	
educational justice in having equal rights for all students from different disciplines	
educational justice in having the experienced trainers regardless of geographic location	
educational justice about relationships(communications) at the bedside	

1- Educational justice in the clinical evaluation; this category can be explained in the following Sub-categories:
 i- Clinical evaluation based on non-academic criteria

"In our opinion the main disadvantage of clinical education is the lack of teaching aids and Lack of facilities."(29)

"Expected to provide opportunities to bring into practice what we learned in theory till this information along experience and practice keep in mind for ever, but, this action failed because of a severe shortage of equipment."(30)

"In terms of environmental dimension the main problem is lack of amenities, for example, a room for nursing students at the hospital according to student dignity."(31)

"If I want let me conference or something, I do so in a clinical setting as a second-class citizen compared to physicians who use the conference room and other ward facilities."(32)

"Insufficient facilities and being drained training centers, prevailing atmosphere of physicians superiority and nursing students' indifference to their field are the most significant inhibiting clinical learning factors."(33)

3- Educational justice in the equal rights of all students from different discipline

"We can say there is educational Justice when students haven't superiority over another student. Educational justice is considering equal to all discipline..."(19)

"Discrimination between nursing and other medical students, lack of access to a conference room is the most problems in the clinical setting."(2, 34)

"Negative attitudes of medical team to nursing, unfavorable clinical environment, social gap between physicians and nurses are reasons for leaving nursing."(35)

"Some staff, particularly in the internships courses do not provide good emotional atmosphere for the nursing students, in some ward they snub our hello. We are not allowed to sit in the station while the medical students are very respectful."(28)

4- Educational justice in having the experienced trainers regardless of geographic location

"Lack of qualified teachers in deprived areas is examples of non-compliance Educational Justice."(36)

"If by chance given our experienced trainer, the day will be very useful for us, unfortunately, some of the clinical educators, because of their lack of skill, let us not do as do others!"(30)

"Having a qualified and knowledgeable trainer has been pointed as the theme of justice."(37)

5- Educational justice about relationships (communications) at the bedside

"Good communication will be, if students feel that teacher's communicate or pay attention to them with no discrimination or difference between the students.... For example, this semester I had a professor who saw another person better than me, it was really bothering."(38)

"Instructor must be on a respectful way to communicate to our then students learn without fear of them... some educators punish you in crowd and then you stay away from him to preserve your respect"(28)

" Having respect, whether in a clinical environment or by the staff, the patient and his visitors is very important to me... unfortunately, it does not matter that apart from being a student, I'm a human and I like that behave me correctly."(30)

"Nursing staff, in some wards, have not a good attitude and behavior with us so caused student disappointing and frustration."(32)

Discussion

Justice, the highest values and ideals for mankind's salvation, nowadays its performance requirements for progress in any society, particularly Muslim society, and in fact, all the effort is a means to achieve justice (39). In our religious culture justice is emphasized as much as science and education (23). In educational environments, especially universities, fair and justice result in students feeling valued and provide a good understanding of justice and dispel the fears and doubts about discrimination (5, 20, and 40). According to the results it should be said about the theme of educational justice in clinical evaluation that this has had a significant presence in most of the studies related to educational justice so many students knows educational justice as evaluation justice and numerous research results showed that most students take the herd of inappropriate methods of teacher evaluation(19). Misunderstanding of justice in the educational environment results in dissatisfaction and eliminates students' motivation to learn. In the clinical education experience of injustice arising from students perception of evaluation methods or differentiate between students in terms of discipline or individual characteristics. So that even favoring the teacher to all students cannot decrease this feels because of one reach twenty and others believe it is unfair (19). The most of them emphasize on necessity of justice and fairness in evaluation and grading by teachers (27). In Sanagoo and et al study the most of students have mentioned educational justice as no differentiate between the students from the faculty and the staff, and them wanted provision of same learning condition, developing of the talents and empowerment (19). In Pazargadi and et al study the most of students believed that justice and fairness are not observed in the clinical evaluation (27) and some believe that the friendly relationship between the instructor and students could impact on evaluation (41). In addition, coordination of clinical instructors' performance is an essential feature for evaluation fairness. There are several instructors with different experience, ideas and other criteria, could result in not uniform evaluation (42, 43). As mentioned, evaluation method is the major issues that have challenging justice education (19). While, equality, stability and fairness in the clinical evaluation (43) and provision a coordinated and honest assessment of student performance is vital part in clinical evaluation (44). Therefore, teachers should consider individuality in learning (19) and making fundamental changes in the evaluation methods and use of combination of standard and valid methods, while achieving objective and comprehensive evaluation and provide an accurate judgment about students' abilities, improved their satisfaction (26). In this way, remove the sense of injustice and inequality among students, because justice is closely related to motivation (19).

The clinical physical factors are another themes related to, include amenities, training facilities and following the rules. More students know having a good environment is a fundamental for educational justice and unfortunately, most of

them rating its down (2, 6, 10, 30, and 31). Provide appropriate equipment, justice in student distribution, fairness in using hospital facilities such as libraries and conference rooms, amenities such as changing rooms and pavilion according to students' dignity are available strategies to improve the clinical learning environment as an influential element in educational justice.

It is necessary for equal rights to all students, education authorities uniform enforce rules and providing equal education facilities and amenities for all students, regardless of their discipline, to motivate them to achieve the goals, growth and development in all fields of education and professional(19, 23).

Having the trained and experienced trainers, regardless of the geographic location of the school is another theme; instructors should be qualified, expertise and experienced to provide an effective education (27). There are repeated subjects in clinical and ineffective instructors are two important causes of negative clinical learning outcomes (30). So instructors have a significant impact on enhancing the quality of clinical education, and they can make it enjoyable for students (10). According to literature, it is a need for educational justice that experienced teachers is distributed equally (23). In Masoumi study, students said lack of experienced professors at universities in underserved areas is a type of educational injustice (36).

About injustice in educational communication, the majority of students are expected to communicate in different clinical settings without discrimination; which this will depend on the ability and communication skills of instructors that suggested to them that to instructor no matter what the student's personality and situational characteristics, he will not be allowed discriminate in communication and attitudes between them (38). Ability to educational communication respectfully, education with compassion, understanding student and his problems, care to individual differences in educating are sub-themes explain good moral and educational justice (35). In Guzman and et al study students described Interpersonal communication skills are the most important characteristics of the effective trainer (45). So teachers can learn and use a good communication skills, in addition to conveying the experience or creating a better educational environment in the clinical setting, create more interest and motivation in students (46). There is a good communication, respectful interaction between teacher and student creates a pleasant environment to learn and increases the likelihood of success of any learning experience (27, 47).

Conclusion

The study included five major categories, "educational justice in clinical evaluations", "educational justice in physical environments", "and educational justice in having the equal rights for all students from different disciplines", "having expert trainers regardless of geographical locations", "educational justice about relationships (communications) at the bedside". Based on a scoring system in our education system, justice in clinical evaluations is highlighted, which has a huge effect on their attitudes towards the learning environment and profession. Having better judgment about their abilities and improving their weakness, If students' confidence in their clinical evaluation. Some solutions have been

proposed by studies in this regard, such as training instructors about must to do and must not to do in clinical evaluation and different methods of evaluation. Although, there is not any trainers equalizing possibilities, but by educating, personal evaluation methods can be declined. The physical environment has an undeniable effect on the teaching - learning process that should be managed through close cooperation between hospitals and faculties. For instance changing rooms, rest rooms, and other amenities for nursing students in hospitals will help them to become more confident and improve their professional identity. The discrimination between students of different disciplines is an old subject in clinical training. Adopting policies are required so that the medical students take actual rights in the clinical environment regardless of their fields (nursing, medicine, midwifery, etc.). Using a systematic and integrated protocol for the recruitment and selection of faculty members across the country can somewhat reduce the problems associated with non-specialist teachers. However, in order to upgrade and strengthen the teaching skills in service training courses evaluation methods are essential.

References

1. Oermann MH, Gaberson KB. Evaluation and testing in nursing education: Springer Publishing Company; 2013.
2. Niknam F AF, Lotfi M, Aghazadeh A. Problems in clinical education from the perspective of teachers and students of Nursing and Midwifery, Tabriz University of Medical Sciences Journal of Nursing and Midwifery Tabriz. 2006;1(2):20-6.
3. Baldacchino DR. Teaching on< i> the spiritual dimension in care</i>: The perceived impact on undergraduate nursing students. Nurse education today. 2008;28(4):501-12.
4. Dolan G. Assessing student nurse clinical competency: will we ever get it right? Journal of Clinical Nursing. 2003;12(1):132-41.
5. Borhani F AA, Sabzevari S Try for educational equity: Clinical evaluation process in nursing students, A Grounded theory study. The Iranian Journal of Bioethics. 2013; 3(9):25-58.
6. Dehghany Zahra AA, Moattari Marzieh, Bahreini Masoud. Effective Reflection on Clinical Competency of Nursing Students in Shiraz University. Journal of Clinical Nursing. 2014;1(4):12-8.
7. Rahmani A, Zamanzadeh V, Abdullah-zadeh F, Lotfi M, Bani S, Hassanpour S. Clinical learning environment in viewpoint of nursing students in Tabriz University of Medical Sciences. Iranian journal of nursing and midwifery research. 2011;16(3):253.
8. Papp I, Markkanen M, von Bonsdorff M. Clinical environment as a learning environment: student nurses' perceptions concerning clinical learning experiences. Nurse education today. 2003;23(4):262-8.
9. Heydari M SS, Ali- Sheikhi R, Heydari K. Problems in clinical education of nursing students in clinical settings. . Iranian Journal of Health & Care. 2011;13(1):18-23.
10. Abedini S AS, Aghamolaei T, Jomehzadeh A, Kamjoo A Clinical education problems: the viewpoints of nursing and midwifery students in Hormozgan University of Medical Sciences. Hormozgan Medical Journal. 2009;12(4):249-53.
11. Ip WY, Chan DSK. Hong Kong nursing students' perception of the clinical environment: a questionnaire survey. International Journal of Nursing Studies. 2005;42(6):665-72.
12. Chan DS. Validation of the clinical learning environment inventory. Western Journal of Nursing Research. 2003;25(5):519-32.
13. Dunn SV, Hansford B. Undergraduate nursing students' perceptions of their clinical learning environment. Journal of advanced nursing. 1997;25(6):1299-306.

14. Pakpour V MN, Shakrabi R, Salimi S. Nursing Students' Perceptions Regarding Their Educational Environment of Tehran University of Medical Sciences. *Journal of Medical Education Development*. 2011;3(5):16-20.
15. Karimollahi M. An investigation of nursing students' experiences in an Iranian psychiatric unit. *Journal of psychiatric and mental health nursing*. 2012;19(8):738-45.
16. Haghani F HM. Challenges of clinical education in health system. *Journal of Ethics in Education*. 2013;2(3):9-19.
17. Naseri N, Salehi S, Khalifezadeh A. Proposing clinical nursing education standards in Iran. *Iranian journal of nursing and midwifery research*. 2009;14(2).
18. Drevdahl D, Kneipp SM, Canales MK, Dorcy KS. Reinvesting in social justice: A capital idea for public health nursing? *Advances in Nursing Science*. 2001;24(2):19-31.
19. Sanagoo A NM, Jouybari LM. Explanation of educational equity among Medical Sciences students: evaluation of Medical Sciences students opinions and experiences. *Horizons of Medical Education Development* 2011;4(3):39-44.
20. Marzooghi R HM, Heidari E. The Impact of Educational Justice on Students' Academic Burnout in the University of Social Welfare and Rehabilitation Science, Tehran, Iran. *Strides in Development of Medical Education*. 2013;10(3):328-34.
21. Golparvar M JZ, Mosahebi MR. Structural patterns related to educational equity and academic satisfaction, outcomes, education, civil behavior and academic fraud. *Journal of Modern Thoughts in Education*. 2011;7(1):87-102.
22. Eldridge C. Principals Leading for Educational Equity: Social Justice in Action. 2012.
23. Smrqndyan S KI. Discuss strategies for educational justice in medical education. *Horizons of Medical Education Development Journal*. 2011;4(2):379-80.
24. Golparvar M. The role of academic ethics, justice and injustice, civil behavior and academic training. *Journal of Modern Thoughts in Education*. 2010;5(4):25-41.
25. Golparvar M JZ, Esmailian Ardestani Z. Educational justice and civic-academic behaviors: the mediating role of academic ethics. *Quarterly Journal of New Thoughts on Education*. 2012;8(3):85-106.
26. Imanipour M JM. Nursing students' clinical evaluation in students and teachers views. *Iranian Journal of Nursing Research*. 2012;7(25):17-26.
27. Pazargadi M AT, Khosravi S. . Nursing students' experiences and perspectives on the clinical characteristics of instructors' in clinical evaluation. *Journal of Nursing Education*. 2012;1(1):1-13.
28. Hemmati Maslakkpak M kH. Nursing Students' Perspectives on Effective Clinical Education: A Qualitative Study. *Iranian Journal of Medical Education*. 2012;11(7):718-27.
29. Delaram M. clinical Education from the Viewpoints of Nursing and Midwifery Students in Shahrekord University of Medical Sciences. *Iranian Journal of Medical Education*. 2006;6(2):129-35.
30. Pourghane P. Nursing students' experiences of clinical teaching: A qualitative study. *Holist Nurs Midwifery*. 2013;23(2):16-26.
31. Shirazi M AF, Akbari L, Samiee sini F, Babaee M, Heidari F. Assessment of the condition of clinical education from the viewpoints of undergraduate nursing students: presentation of problem-oriented stratagies. *Journal of Nursing Education*. 2013;2(2):30-8.
32. Abbaszade A BF, Sabzevari S. . Nursing Teachers' Perception of the Challenges of Clinical Education and Solutions: A Qualitative Study. *Journal of qualitative Research in Health Sciences*. 2013;2(2):134-45.
33. Jouybari L SA. An effective instructor: A deep look at students and instructors' experiences and perspectives. *Strides in development of medical education*. *Strides in Development of Medical Education* 2009(6):2.
34. Mohebibi Z RMHF, Mohammadi HR, Setoudeh G, Najafi Dolatabad Sh. View point of the nursing students on challenges in clinical training, Shiraz, Iran. *Hormozgan Medical Journal*. 2012;16(5):415-21.
35. Joolae S MN, Bohrani N. . A survey on nursing student's opinions toward nursing and reasons for giving it up. *Iranian journal of nursing research*. 2006;1(1):21-8.
36. Masoumi R. Educational injustices of the graduate student's perspective: a qualitative study. *Horizons of Medical Education Development Journal*. 2011;4(2):439.
37. Mehravar F SA, Jouybari L. Explaining the concept of educational equity perspective, Golestan University of Medical Sciences in 2010. *Horizon Medical Education Development Journal*. 2011;4(2):438.
38. Yaghoubinia F HA, Latifnejad-Roudsari R. . Student-educator relationship in clinical nursing education: Qualitative content analysis. *Medical - Surgical Nursing Journal*. 2013;2(12):63-71.
39. Mosaffa N, editor. Role of education in achieving justice; justice-oriented education. *The second Meeting Book of Strategic ideas justice*; 2011.
40. Lind EA, Van den Bos K. When fairness works: Toward a general theory of uncertainty management. *Research in organizational behavior*. 2002;24:181-223.
41. Vaismoradi M, Parsa-Yekta Z. Iranian nursing students' comprehension and experiences regarding evaluation process: A thematic analysis study. *Scandinavian journal of caring sciences*. 2011;25(1):151-9.
42. Elcigil A, Yıldırım Sarı H. Determining problems experienced by student nurses in their work with clinical educators in Turkey. *Nurse education today*. 2007;27(5):491-8.
43. While AE. The problem of clinical evaluation—a review. *Nurse education today*. 1991;11(6):448-53.
44. Cassidy S. Subjectivity and the valid assessment of pre-registration student nurse clinical learning outcomes: Implications for mentors. *Nurse education today*. 2009;29(1):33-9.
45. de Guzman AB, Ormita MJM, Palad CMC, Panganiban JK, Pestaño HO, Pristin MWP. Filipino nursing students' views of their clinical instructors' credibility. *Nurse education today*. 2007;27(6):529-33.
46. Alavi M AH. Nursing Students' Experiences and Perceptions of Effective Instructor in Clinical Education. . *Iranian Journal of Medical Education*. 2008;7(2):325-34.
47. Mongwe RN. Student nurses' experiences of the clinical field in the Limpopo Province as learning field: a phenomenological study 2009.