# EXPLORING NURSING STUDENTS' EXPERIENCES WITH FACULTY CARING BEHAVIORS IN LEARNING

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## ABSTRACT

The caring behaviors of faculty members are one of the most important and influential factors for effective learning. If caring is only left as an assumption, this behavior will not be implemented in professional nursing practice. This study aims to explore nursing students' experiences of the nursing faculty's caring behaviors in learning. Descriptive phenomenology was used to collect data from ten senior bachelor's degree nursing students at a private university in Bandung, Indonesia. Data were collected through in-depth interviews and ethical considerations were followed. The result was transcribed and analyzed by using a qualitative content analysis approach. Trustworthiness was established by Korstjens and Moser's criteria. Nel Noddings' three great means of nurturing ethical ideals were reflected in these subjects. The interview data analysis revealed three key themes reflected by all participants: tangible virtue, challenging interaction, and modeling. The following were the six subthemes that emerged: moral attitude, moral action, supportive interaction, disruptive interaction, personal model, and professional model. The results suggested that faculty caring behavior is a useful strategy for the development of nursing students' caring behavior during the program and before they enter their real professional roles. The exact levels of faculty caring behavior need to be measured to truly depict the faculty caring behavior in nursing education.

Keywords: *Learning; nursing faculty caring behavior; nursing students' experiences*

## INTRODUCTION

Caring is the essence of nursing, which encourages individuals to focus on nurturing, loving, and caring. Caring is at the heart of nursing theory and practice, it manifests as intentions, appreciation patterns, attuning oneself to dynamic flow, and is the most central and unifying focus of nursing practice (Watson, 2018). Patients' perceptions of nurses' caring behavior are influenced not only by the technical care provided but also by the quality of care in hospital settings (Calong & Soriano, 2018; Labrague et al., 2020). Furthermore, in practice, the standard of nursing excellence is determined by the patients' experience of care performed by nurse professionals (Perangin-angin et al., 2021). Professional nursing, as the largest health system discipline, continues to have quality problems perceived by the patients, families, and nurses themselves. In acute care hospitals, the culture of missing care has grown through time and appears increasingly common (Duffy, 2018; Modic, Siedlecki, Quinn Griffin, & Fitzpatrick, 2016). Workplace pressures, coping

methods, self-efficacy, and prior care experiences have all influenced nurses' caring behavior (Foster, Rochen, Giandinoto, & Furness, 2019; Oluma & Abadiga, 2020). On the other hand, caring experiences from learning programs regarding respectful behaviors among nursing faculty and students are essential; if caring is only left as an assumption, the behavior will not be implemented in nursing professional practice (Christoper, Tantillo, & Watson, 2020; Konuk & Tanyer, 2019).

Having experienced the importance of caring during their nursing education, students can then learn about the caring virtue (Monsen, Le, Handler, & Patrick J. Dean, 2017; Noddings, 2012). Being cared for early in the learning process gives students moral knowledge about what it is to care for and be cared for. Students who do not experience care in their learning often find it difficult to act in caring ways. Furthermore, students that have had caring experiences can apply this to their careers; therefore, role models are essential

to establishing effective caring habits (Wei, Henderson, Peery, & Andrews, 2021). In addition, Duffy (2018) stated that faculty role modeling and caring interactions during the educational process may be the most effective way to learn professional caring. Students learn caring through copying faculty caring behaviors and experiencing caring within their interactions with faculty and other students (Fifer, 2019; Noddings, 2010; Salehian, Heydari, Aghebati, & Karimi Moonaghi, 2017). Moreover, nursing students' knowledge of the needs and necessity of caring may improve as a result of caring education, and they may become caring ambassadors in healthcare (Li et al., 2019; Noddings, 2012).

Previous studies showed that caring behavior played an important role in the dynamism of the faculty-student relationship (Labrague, McEnroe-Petitte, Papathanasiou, Edet, & Arulappan, 2015). The existence of caring in actual interactions between faculty and students has developed the students' caring abilities. Numerous caring factors affect nursing students' perception of faculty caring, including instilling confidence, providing a supportive learning climate, allowing an appreciation of life meaning, balancing control versus flexibility, and respectful sharing (Moriña, 2019; Zamanzadeh, Shohani, & Palmeh, 2015). Based on Watson's theory of care, the caring moment is represented by an actual occasion that allows human caring to occur (Watson, 2018). Therefore, both faculty and students would determine the relationship of the moment and contribute to the acquisition of professional skills, caring attitude, self-confidence, learning competencies, and interpersonal interactions between students (Chipeta et al., 2021; Sitzman, 2016).

Furthermore, the nursing faculty must promote an environment of caring in learning to foster ethical integrity and professionalism. A review of studies has described faculty caring behavior as an encouragement, making students feel important, having respect for the diversity of learning, and understanding the students' struggles. As a results are a positive students' professional development and promote students' determination to continue their study. In addition, a learning environment that is comfortable, safe, without judgement, accepting of mistakes, and offsets institutional racism should also be maintained by faculty to facilitate caring pedagogy (Hunter & Stinson, 2018; Rojas & Liou, 2017). In contrast, the noncaring behavior of faculty fosters an unhealthy learning environment and negative feelings (Gultom & Tambunan, 2021; Situmorang, 2021). Examples of faculty noncaring behavior and its impact are ostracism, dissuasion, loss of confidence, hopelessness, emotional turmoil, and increased anxiety (Kerby, Branham, & Mallinger, 2014; Zamanzadeh et al., 2015).

Despite the caring behaviors of faculty members being one of the most important and influential supporting factors for the learning environment and the development of professional caring behavior in nursing students, this topic has received little attention. In Indonesia, there has been a lack of previous studies on this topic, such that the researchers of this study were unable to offer a clear picture of caring dimensions in learning. Therefore, this study was conducted to explore the experience of nursing students with the faculty's caring behavior in the nursing program at a private university in Bandung, Indonesia.

## METHOD
### Study design
The is a qualitative study with a descriptive phenomeno logical approach. Caring is a human experience and this justifies the need for a phenomenology inquiry (Elo & Kyngas, 2008). The "three great means of nurturing the ethical ideal" described by Noddings (2010), which included dialogue, practice, and confirmation, were used to structure the meaning of caring in educational experiences.

### Informants
By using a purposive sampling strategy, the principle of data saturation was used to recruit 10 study informants. The sample was comprised of 5 female and 5 male senior bachelor nursing students from a total population of 96 students. Their participation was based on their willingness to take part in the study. The sample was drawn from senior year students because they were regarded to have had adequate experience with faculty members and could ably provide rich data (Pollit & Beck, 2018).

### Data collection
Data was gathered through discourse by utilizing a semi structured interview guide that allowed participants to freely express their experiences. The following questions were asked: Tell me about your perception of faculty caring in a learning environment? What does faculty caring in a learning environment mean to you? What behaviors do you want to find in your faculty members? Additional questions were asked in response to the participants' expressions or reactions during the interview, in addition to the essential questions.

The participants were questioned to obtain detailed and specific information about their experiences, as well as to comprehend the meaning of their experiences in the context of the interview. An example of the key interview question is "Tell me more about it, what was that like?".

There were ten (10) face-to-face discussion sessions, each lasting about 45 minutes on average. The interviews were completed over one month in October 2019. The dialogue sessions were guided by the first author, and all data tapes were recorded and transcribed for each participant. The data collection occurred in a quiet room on the university grounds. The notions of bracketing, intuition, and reflexivity were used throughout the study to consider transcendental subjectivity.

### Data analysis
Qualitative content analysis was used in this study. It involved analyzing the content of narrative data to specifically identify prominent themes.

### Trustworthiness
To maintain the rigor of the study and ensure the credibility of the findings, the researchers utilized member checking. The dependability was achieved by maintaining consistency in the process of data collection by using the same main questions in the interview guide. The conformability was achieved by incorporating the participant's expressive language, which was presented as direct quotes from the transcribed data, to provide evidence of the research findings in the report. Lastly, the researcher supplied a detailed description of the research process and the research setting, and this allowed anyone interested in transferring data findings to determine whether or not such a transfer is conceivable (Korstjens & Moser, 2018).

### Ethical consideration
Ethical approval to conduct the study was obtained from the Faculty of Nursing Science's Research and Ethics Committee with the reference number 031/KEPK-FIK.UNAI/EC/XI/19.

## RESULTS

This study's findings depict the experiences of nursing students regarding faculty caring behavior in learning. The researchers of this explored the meaning of these experiences by transcribing the participants' direct words and slowly reading them repeatedly and independently. Next, significant statements related to the experiences of the nursing students from each transcript were deduced. The meanings of significant statements were then structured into themes. The last step was to compare the transcripts and themes multiple times to secure the justification of the results. The following themes emerged from the data collected: tangible virtue, challenging interactions, and modeling. While the six subthemes that emerged were moral attitude, moral action, supportive interaction, disruptive interaction, personal modelling, and professional modelling.

### Tangible virtue

Both female and male students perceived caring behavior as a tangible virtue. The moral values of caring are "moral attitude" and "moral action," which emerged as subthemes that reflect caring behavior.

### *Moral attitude*

The caring that was experienced by the students was a form of moral attitude. This may be described as something or someone that shows concern, love, respect, or warmheartedness to others. Examples of participants' statements regarding this subtheme are as follows:

"It's related to when someone or I have a willingness to be concerned about my friend's afflictions or hardship." (P1)
Another participant shared:

"I care about him because I know him and I want to show that I love him." (P3)

### *Moral action*

This form of caring was experienced as a moral action and may be evidenced by empathy. Educators' empathy is defined as the extent to which faculty attempt to truly understand their students' personal and social situation and transmit their comprehension and caring to students through their action. It is not only when someone has moral values that exhibiting empathy or compassion would be manifested as caring. An example of moral action is shown in the following statement:

"...the lecturer wants to help me when I need a further explanation about the learning material...." (P5).

"...testify and saying sorry without doing anything to change, it's not a caring expression...." (P2)
While another participant described:

"I practiced caring for others by doing good deeds such as assisting, respecting, not judging, and encouraging others. It's not caring if I just talk about it and don't back it up with action…." (P3)

### Challenging interactions

All ten participants described the faculty caring behavior that was experienced by nursing students during learning as a challenging interaction. Two subthemes were then derived from this theme, these are: "supportive interaction" and "disruptive interaction."

### *Supportive interaction*

The participants stated that they experienced supportive interactions with the faculty during learning. The caring behavior performed by the faculty has enhanced the students' academic and nonacademic performance. Nevertheless, these interactions were challenging for the students. As depicted through statements:

"When I saw one faculty member consistently urge us in class, at every meeting, and when I received a low mark, I felt compelled to improve my performance." (P1)

"...they trusted us to do individual assignments or in a group." (P2)

"...sometimes when I hear a person's story or experiences that he revealed in class, it would change me." (P4)

"When I'm having financial difficulties, I talk to her to see if there's a path out...rather than taking a step back." (P6)

"He called my name frequently in class, which made me feel flattered...ehhmm...but when I first admitted to his habit of calling a student's name frequently, I felt disrespected...." (P7)

"Faculty feedback on assignments, in my opinion, offers us an opportunity to rectify our comprehension of the topic acquired and boost our self-confidence..." (P8)

"I was once mortified when a female faculty member offered me money for a haircut...hahaaa…." (P10)

### *Disruptive interaction*

The participants were also challenged by the uncaring behavior of the faculty during learning. The forms of uncaring behavior of faculty such as disruptive interaction, have been proven to destroy the learning environment and hinder student self-development. Disrespect, less empathy, anger without reason, and other such uncaring behavior disturbed the interaction between faculty and students. One participant reported:

"…the way she was angry...I felt that she had no reason to be angry, she was not performing care... This eliminated my desire to finish the assignment." (P2).
Another stated:

"…I once felt one faculty member was generalizing her distrust of every student, I felt that I had tried to stay away from her…." (P6)

However, one participant stated a faculty member's uncaring behavior has developed his personal growth. He claimed: "I am motivated to be more independent in learning, at a time when lecturers often call the names of other students who are smarter than me." (P8)

"I felt more independent in several learning tasks when I was junior and was less sensitive about my lower performance than in the first level... However, I am aware that this is how they exercise my decision-making process." (P8)

### Modeling

This theme was divided into two subthemes: "personal model" and "professional model." All ten participants discussed how the faculty's caring behavior they experienced would tend to be demonstrated in their personal and professional life. However, some participants realized that uncaring behavior should not be implemented in both their personal and professional life.

### *Personal model*

This model refers to the individual responses to the caring and uncaring behavior performed by faculty varying among participants. Generally, when participants are nurtured by their own experiences of being cared for or uncared for, they would exhibit and grow similar behavior. Imitating, exemplifying, replicating, and patterning exist as one's learned behavior. Participants described:

"...I imitate their caring behavior automatically, because they continuously perform that, such as asking about my condition, calling my name...." (P5)

"...I care for my classmates, and they offer the same in return…." (P7)

"...I was able to put care into clinical practice, and the instructor helped me get started with new patients." (P8)

"...I didn't pay attention to my junior while in clinical practice, I did this because I was never paid attention by one faculty member…." (P9)

"...and was trying to avoid a meeting when she called me for an advisory meeting." (P10)

### Professional model

The impact of being treated by different behaviors could motivate someone to be better in their future professional life. For instance,

"... because of the way I was treated, I learned to shape better behavior in the future. I believe that correct behavior should be exemplified, but wrong behaviors should not." (P1)

"…when I observed the uncaring behavior performed by faculty, I understand that there might be some reason as to why they behave like that, I know that was not professional behavior." (P4)

"...as I learned about caring through courses and also as demonstrated by faculty, I now really understand how to implement it in both my personal and professional life in the future." (P6)

## DISCUSSION

Many previous studies have explored faculty caring behavior in nursing education. This study adds to this existing body of knowledge by adding Indonesian nursing students' experiences with caring behavior. From this study, three themes were obtained. The results were interpreted and discussed based on a literature review.

### Tangible virtue

Moral caring is evidenced by the lecturers' caring actions in the learning environment. This finding reinforces previous research which showed that caring value as a human trait is a tangible virtue. Humans display caring behavior as an innate characteristic, and everyone has the capacity to care. Caring involves showing feelings and requires action. Furthermore, caring is an action that is learned through the experience of being cared for (Lachman, 2012; Lee, Palmieri, & Watson, 2016). While the dictionary defines caring as "a feeling and exhibiting concern and empathy to others; showing or having compassion," caring is also considered as an attentive and helpful response to the condition and circumstances of a vulnerable human being in need of assistance (The Free Dictionary, 2018; Watson, 2018).

This study also considered caring as a moral attitude. In nursing education, the caring paradigm has a main impression on the teaching and learning process. Noddings (2012) researched how schools and educators understand and practice care in education. Noddings paved the way for many educators to understand the importance of making a moral decision to enter into a relationship that has both cognitive and affective dimensions. Specifically, the caring relationship is made up of the faculty's motivation to address the students' needs and in return, the student acknowledges the faculty's response to their needs.

The moral action perceived by nursing students is referred to as the caring concept by Gay (2018) in her book which describes caring as a moral value that transforms "self-determination into social responsibility" by combining information and strategy thinking to determine how to act in the best interests of others. This is depicted by nursing students as sympathy, empathy, and compassion (Leokuna & Tambunan, 2022). These are consistent with the findings of the study that stated that being present, acting to relieve suffering, getting the basics right, and going forward are elements related to caring. Moreover, placing oneself in others' shoes, understanding others' suffering, or taking time to listen carefully to others are also forms of caring (Hofmeyer et al., 2018).

Another study revealed that the technique of bodily touch has a specific pedagogical purpose. Therefore, faculty members need to use appropriate bodily touch in such a way to concern their student's needs, interests, and purposes in particular situations (Anderson, Ohman, & Garrison, 2016).

### Challenging interaction

Faculty caring behavior is essential in promoting either a supportive or disruptive learning climate. A positive interaction would build a constructive learning atmosphere for students. Previous studies have found that the quality of the learning environment is found to be the key influence on the emotional well-being of students (Bada, 2015; Tharani, Husain, & Warwick, 2017).

On the other hand, the negative interaction forms a disruptive learning atmosphere for students. Uncaring behavior by faculty members could include incivility, which in a previous study, consisted of general taunts or disrespect to nursing students. Furthermore, the academic environment, learning outcomes, and safety of students would be adversely affected (Muliira, Natarajan, & van der Colff, 2017). There was some influence of Indonesian culture where students as a younger generation must respect their elders wherever they are and are reluctant to complain directly, particularly to aged faculty. Ultimately, these two interactions have contributed to the personal and professional growth of students. A study by Haerens, Aelterman, Vansteenkiste, & Soenens, (2015), supported the hypothesis that an autonomy-supportive teaching style catalyzes and nurtures students' primary psychological needs for relatedness, competence, and autonomy.

This study's findings also reinforce the fact that nursing students want more than just support, they desire assistance with developing deeper relationships with faculty members. Students feel more successful and express greater levels of satisfaction when they are supported (Clark, 2016). Moreover, Salehian et al., (2017) stated two other principles in faculty-student caring interaction to enhance students' learning experiences, namely, human relationship and knowing. Based on humanitarian principles, respect, equality, and interaction, the processes of teaching and learning are sustained. On the other hand, determining methods to know the student better requires strategies because of the uniqueness of each student.

### Modeling

In nursing education, the emotional goal of learning is to develop the principles of caring value. Educators have the role of helping students to internalize caring values. In this way, the faculty's caring behavior can promote the personal and professional growth of students. This could be achieved by imitating or patterning the caring behavior (Nadelson, Zigmond, Nadelson, Scadden, & Collins, 2016).

It is necessary to consider the ideal performance such as caring behavior as a pattern that is planted and implemented during the program. It has been found that instructors' caring actions had a favorable influence on nursing students' caring behaviors. Nursing students can be professionally trained to acquire caring competence through positive faculty modeling and role modeling (Labrague et al., 2015). In other words, the faculty's demonstration of caring behavior would be the best

method to communicate a caring concept, which is essential in nursing.

Another study on nursing students' experiences with faculty's empathy as an expression of caring resulted in a positive impact on students' professional development in nursing (Mikkonen, Kyngäs, & Kääriäinen, 2015). Furthermore, the study showed that education and achieving learning experiences influence the growth and development of professional values positively. In this case, the emphasis on paying attention to value-based integrated education will be affected by practical, conceptual, and ethical learning. Therefore, the purposeful integration of value-based education such as caring, human dignity, and altruism all have strong positive points for nurses' work in the future (Parandeh, Khaghanizade, Mohammadi, & Mokhtari Nouri, 2014). Thus, the learning environment is one of the aspects that can influence nursing students' professional values. Professional values, such as caring, are the most crucial components in maintaining high-quality standards in the nursing profession. This caring value should be instilled in nurses earlier in their education to help them transition out of their student years (Ayla, Ozyazicioglu, Atak, & Surenler, 2018).

Paying attention to all three themes of faculty caring behavior experienced by nursing students can lead to a positive learning environment and professional caring development during the education program. One of the study's limitations was the possibility of participants being involved in daily activities, as well as time constraints for interviewing. To overcome this limitation, the researchers could coordinate and conduct interviews with lecturers too.

## CONCLUSION AND RECOMMENDATION

This study obtained three research themes that support the experiences of nursing students with faculty caring behavior in learning. Tangible virtue, challenging interaction, and modeling were depicted as the main experiences. Six subthemes were derived from the three main themes, including moral attitude and moral action, supportive interaction and disruptive interaction, and personal model and professional model. These experiences were delineated from the point of view of nursing students at a nursing school in Indonesia. The study obtained three main themes of faculty caring and caring manifested by nursing faculty during learning that was perceived by the nursing students. Faculty members' behavior has an impact on the caring behavior of students personally and professionally. This study suggested that faculty caring behavior is a useful strategy for the development of nursing students' caring behavior during the program before they enter their real professional roles. However, the exact levels of faculty caring behavior experienced by participants could not be measured in this study. Therefore, future studies should further explore faculty caring behavior itself to enrich the experiences of caring behavior in nursing education.

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