

Study Problems As Seen By 1st And 2nd Year Nursing Students

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at the College of Nursing*

By

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When we strive for better reading and study habits, we also have to remedy some of the difficulties experienced. It is a help, therefore, to analyse what students feel to be their major difficulties. It is not enough for teachers to sum up what they, as teachers, feel to be the difficulties.

For example, we have been giving first year nursing students reading speed and comprehension tests for some years. In each case they were tested on general reading matter and on more professional material. From such tests we quickly find out who need help in reading, language and expression, but we also want to know the cause, in order to help them successfully.

Some clues are got by giving first and second year students un-structured compositions to write on what they feel are the greatest study difficulties. If we know how our students feel about study difficulties we are better equipped to help them. This is true, whatever the language used.

In order of frequency, one class of nursing students stated their difficulties as follows :

(Each student gave from 1 to 5 difficulties each).

Most frequent difficulties listed :

Poor concentration	(13)
Poor comprehension	(11)
Slowness	(11)
Vocabulary difficulties	(9)

In the next group by frequency we find :

Difficulty in picking out main points	(3)
Interest not maintained	(3)
Feeling of fatigue at the beginning of study.	(2)
Poor memory	(2)
Taking time to pronounce a word correctly.	(2)
Material not interesting	(2)
Print too small	(2)
Difficult matter or content	(2)

Less frequently mentioned difficulties :

Dislike of changing over from one subject to another too soon.	(1)
Missing meanings	(1)
Difficult language of the book	(1)
No survey of reading material by teacher.	(1)
Easily distracted	(1)
Very slow in understanding reading-having to re-read.	(1)
Lack of help in difficulties	(1)
Slow perception word meanings and having to re-read.	(1)
Lack of self confidence ("After I have finished reading, I ask myself if I have got the points clearly. I don't feel bold enough to answer")	(1)
Habit of postponing	(1)

What help is needed by post-adolescent learners and what sort of help do they want?

A great deal of the help needed is individual. Group work, while helpful in certain places, does not reach individual problems. Again, it may be helpful to consider some points made by learners: "I am too eager to know the end. I can't put the book down until I finish". "If it is interesting, I don't mind the difficulty. I don't mind reading". "I sometimes read for general knowledge". "I have to imagine things as I read". "Reading makes me critical."

Great differences are evident—not only in individual help needed, but also in help suited to the particular age group and maturity level.

Four Fundamentals in the Learning Process:

1. *Perception.* Let us remember our own days as students, and how we learned. First we needed a clear perception of the situation or word, for example, a picture of the disease (smallpox)—a vivid impression. Only then could we read with an understanding of the condition in mind. "I cannot read, unless I imagine", said one of these students. In the same way anatomical terms come to mean much more to doctors and nurses than to lay people; and botanists may appreciate a technical flower name, but that very name may hinder most of us from any vivid impression of the flower.

2. *Remembering.* After clear perception or understanding, the next step is remembering. There cannot be learning unless something is retained. The teacher, who makes the first impression vivid, helps the learner to remember.

In presenting material, voice, posture and manner are important, the friendly attitude towards our students, the interest in individuals and their welfare. Also wit and humour may stress important points. The teacher has a responsibility in helping her students know which are the important points to remember.

3. *Practice or Drill and Review.* There are three factors in memory: retention, recall and recognition. For retaining, practice and drill are helpful. Good classroom practice helps. But practice needs to be meaningful.

After practice or drill, review is important.

Purposeful practice or drill and review help students to raise the standard of their work. Students respect the teacher, who has high standards. They feel this is a teacher's responsibility. They respect the teacher who is expert in her field.

4. *Student Effort.* Lastly a conscious effort is needed on the student's side. "We can take a horse to the water, but we cannot make him drink".

Instruction in Better Study Methods:

1. *Use of Books.* For example, with the use of books, each teacher needs to make a conscious effort to help students to use the texts and references of her subject field. The books may seem strange and unconnected with their experience. There may be difficult words. We need to motivate our students in the use of the books they need. Otherwise many will never use them. Students also need help in learning how to use books. We, as teachers, need to put ourselves in the minds of each of our students to perceive their difficulties.

The "Survey-Q-3R" method is a better-study method. First Survey of the book or section, as a whole, should always precede study, finding out the author, subject, publisher, authenticity and up-to-dateness; finding out the aids such as table of contents, index, glossary, appendix, chapter summaries and use of headings and diagrams, marginal notes and author's organization.

Secondly the "Q" stands for questions in our minds as we use the book: "How much do I know about this subject?" "What do I want to find out from this book or section?" Again it is teacher's responsibility to help students read and

study with definite questions or problems in mind; definite aim in reading the chapter or section. It is her responsibility to help the student find the important sections, and help her know what to cut short.

Thirdly, the "3R's" stand for reading, reviewing and reciting or using the material. The first reading may be skimming to get a quick bird's-eye view of the material, or it may be slower, careful reading, depending upon the type of material. We need to have different ways of reading for different types of purpose and subject matter. Secondly after the first reading, there needs to be the careful reviewing or re-reading to get the main points or organization and relationships in mind. If a nursing student can get this habit of synthesis, or of seeing the organized pattern, as a whole, it will also help her to learn to analyse or break down the whole into its parts. It is very hard to go from the general to the particular, unless you have seen the general pattern or organization as a whole. This is an important part of learning to think and of learning to plan how to solve problems. Students need help from teachers in developing this habit. Lastly the third "R" is recitation or recall or use of the new learning. We need to help the student to get practice in using the new material she has read. By discussion, written reports, answering sets of questions, recall or important related points while doing things in practical class or ward work and exercises which involve knowledge of the material read, we can help the student to complete her learning, and learn more, in less time, more effectively. Unless the teacher takes this responsibility of planning to help the student make use of the material in assignments and practice, neither the text books nor references will be used by all students.

2. **Budgeting Time.** Not only do students need help with the use of books, with instruction in better study methods, but students need help in budgeting time, learning how to distribute time, including waiting intervals so apt to be wasted. Students of this age may like to enjoy

life. What should this mean for their study? It should help them to see the point of planning study priorities. It is up to us as teachers, to help them see the utility of material studies, to help them clarify their aims and learn to concentrate, and plan their study time.

3. **Words as Tools.** We also need to help them present material, become free to speak out, discuss and prepare reports. The teacher has a particular responsibility also, in helping the student to get over her emotional blocks. They must become confident and stage-free, able to trust themselves and their own memories. Here, also, we may remember that class-mates tend to point out the mistakes, rather than the strong points. Weak students, therefore, feel timid. It is for the teacher to point out and develop the strengths of the learner.

We have a great responsibility in helping each student learn effective ways of constantly increasing her vocabulary, for example, by learning the commoner stems of words (e.g., "*ren*" in renal and "*neph*" in nephritis), prefixes (such as "*trans*" in transfusion and "*in*" in infusion), and suffixes, such as "*itis*" "*ectomy*", "*otomy*", and the like. We need also to plan to help her with difficult spelling, e.g., the "*hth*" that go together in so many words such as diphtheria, the "*ery*" in dysentery. We soon learn which are the words in our subject, that are most often misspelt.

We can let them listen to words, also, helping them to ask, when they don't know. We can write up the word on the black board. Then we can plan to use the word a second time, in a different way. We can keep helping them to make use of their pocket dictionaries. Whether in reading, talking, writing or listening, we can encourage our students to use and make notes of new vocabulary, and to use drill lists of their own making if their need is great.

4. **Attention.** Attracting attention is easy, but holding attention is difficult. Attention is apt to vary and change, for example, we suddenly think of something else. Attention has its own span also.

Sometimes, students need to learn to change their position, look at a distant view, or to exercise briefly, at regular intervals, when studying. But in class, there are also the devices the teacher can use, to create interest. "Interest, like a policeman, can hold attention". Supposing I have planned to take up four points in my lesson, but after ten minutes, the students go to sleep. Yet I find, that if I suddenly appear to switch from my lesson to their experience this morning on the ward, they are suddenly wide awake. Now why have I suddenly caught their attention? And how can I make use of such a device?

By making them speak, I have activated them. So I must plan in a way to use such questions, to help the learner to speak and express herself effectively.

If the topic chosen is "The Faith of a Democrat", they may go to sleep, but if I try out topics such as "What happens to the child who went home from hospital this morning?" I may catch their interest and cover the planned ground.

In some subjects attention is less a problem than in others. In nursing subjects the purpose is clear, and attention less apt to wander for that reason. But in Hindi or English teaching or in Anatomy and Physiology, the purpose is once-removed, and has to be clarified in terms of professional success, or personal and cultural growth.

5. Learning to Read Quickly. We also need to help her to be critical of what she reads and sees, for example, of films, so that she develops certain criteria. "Was it cleverly photographed?" "Was the costume authentic for the period?" "Was the action in character?" "How were the emotional effects produced?" Our students need to develop criteria, as they read and observe, to learn to weigh, compare, contrast and analyse emotional situations.

7. Organizing thought. We need to help them to organize their thinking, to assimilate with discrimination and to be analytic in criticism. We should help them to talk, speak and write on every

subject, help them to be discriminating, use judgement and learn to appreciate fine accomplishment or performance.

To sum up, then, what are some of the more effective study habit areas in which we need to give our nursing students constant practice in every subject?

Each one of us needs to help our students to use books more effectively, to budget her time and plan her study priorities. Many students need help in building vocabulary. They need help in clarifying the aims and purposes of their study, learning to concentrate, focus attention and increase attention span. They need help in learning to read quickly, in learning to be critical and develop judgement.

The last appeal, I make to colleagues, is that there is no study problem that we, as teachers, cannot help our nursing students to overcome. Even a language problem where political implications may have motivated against interest and attention, can be tackled. Now that we have the products of our schools coming to us with less of this or that language such as English or Hindi, we need to make a conscious effort and systematic attack on the problem by teaching more effective study methods, by helping students to clarify their goals, and plan their time better. Lack of these are the three main causes of failure among students of this age group in schools and colleges.

To develop better study technique, instruction is needed, practice and time are needed, and for these the co-operation of every teacher is needed. The whole-hearted effort of the student is needed. It must be a joint effort to succeed, and we must begin with students where they are.

We can build traditions of good expression, wide reading, help our nursing students to be critical and to develop a sense of values both in professional matters and in leisure-time activities. In helping them build better study techniques we are helping them build stairways to success.