

A Qualitative Study on Experiences of Nursing Science Major Graduate Candidates in South Korea

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Abstract

Purpose: This qualitative study was carried out to understand the experiences of nursing graduate candidates as a group. *Methods:* Experiential data were collected by means of in-depth interviews with seven experienced graduating student nurses. *Conclusion:* The results showed the following theme clusters in terms of the experiences of nursing graduate candidates: Feelings as a novice, lack of confidence in performing the job as a preliminary nurse, vagueness and anxiety about human relationships, conflicts in the process of becoming a nurse, and strengthening competence in the process of becoming a nurse. Therefore, it is necessary to change negative elements, such as conflicts and pressures experienced as a graduate candidate, and a strategy is needed to strengthen the positive elements of a student becoming a nurse; such changes may have a positive influence on nursing students' academic success and their role performance as new nurses after graduation.

Keywords: Qualitative research, Nursing student, Graduation, Experience

1. Introduction

1.1 Necessity for Research

As people experience various problems and stresses throughout life, they sometimes adjust to the given environment and sometimes manipulate and modify the environment to satisfy their desires. During such times, an individual applies psychological processes to cope with various demands from the environment, in order to survive in the social and physical environment [1].

Nursing students in graduating classes face challenges in terms of opinions and values that are different from those they had in lower classes, and need to actively respond to these. Accordingly, the college life of nursing students in graduating classes leads them to experience a range of things that could cause various difficulties. For example, they may experience difficulties responding appropriately to issues related to college life, such as academic achievements, interpersonal relationships, and psychological and emotional adjustments. Such adjustment to college life is one of the most important problems in finishing college. Nursing students experience academic stress not only in terms of their strict curriculum, heavy workload, national examination, and classroom lectures, but also

as they complete their practical training in a clinical environment with a range of organizational systems. In addition, they may experience a range of difficulties and stresses, such as coping with a strict code of conduct, taking responsibility for patients, and establishing their views and values of their occupation as future nurses [2]. Moreover, nursing students are to be employed in clinical settings after completing their studies. Despite nursing science being in the limelight as one of the most highly employed majors following the 1997 financial crisis in South Korea, nursing students also suffer stress regarding employment. Graduate candidates of nursing science as a major have a moderate degree of employment-related stress, and their average psychosocial health scores fall in a potential risk group [3]. Lower self-efficacy among senior than sophomore nursing students has been reported to be due to concerns about various difficulties and stresses they may experience in a complex clinical environment as new nurses [4]. Recent reluctance among hospitalized patients to receive direct nursing treatments from nursing students, and conflicts due to limitations in nursing services performable by students in clinical contexts due to legal issues [5], are factors that lead to great pressure among graduating students who are to work in such clinical contexts immediately following graduation.

From this perspective, research on the experiences of nursing graduate candidates during their final year of college life and during the adjustment process is sorely needed. Despite studies focusing on final year nursing students in terms of factors perceived by them as influencing nursing professionalism [6], employment stress [3], nursing roles of nursing students [7], perceptions on major and career [8], career satisfaction factors [9], learning experiences of core basic nursing techniques and confidence in performing these [10], and experiences of graduate candidates [11], there is not an adequate understanding of the overall experiences and current situations of nursing students. Accordingly, the present study attempted to investigate the issues comprehensively, and to understand the current situations and experiences of nursing students in their graduating class within their natural context. Based on the understanding gained from the present study, foundations for educating and guiding nursing students may be established.

2. Method

2.1. Research Design

The present study is a phenomenological study that investigated the nature and meaning of the experiences of nursing students in their graduating year.

2.2. Research Participants

The students who participated in the present study from among nursing graduate candidates who were seniors in a four-year system and juniors in a three-year system. Students were invited to participate in the study after being informed of the following: Their personal confidentiality and anonymity were guaranteed, data would be used only for research purposes, they could stop participating at any time they wished, and that data may be audio recorded may be used. Seven students agreed to participate and were asked to choose a place and time for their interviews with which they would be comfortable. Permission was obtained for the study from the IRB of Dongsan Medical Center of Keimyung University (Approval number: 12-01).

2.3. Data Collection

Data were collected for the present study by means of interviews conducted from October 7, 2011 to December 9, 2011. The interviews started with open questions such as “Could you tell us what meaning do graduating students ascribe to their current situation

of being in their graduating year?” and “What is the difference between the graduating year and other years in college?” so that inferences could be drawn from their spontaneous explanations. The recordings were transcribed verbatim within a short period of time following the interview. Written notes were made of the circumstances within the interviews and participants’ nonverbal expressions, and utilized in the analysis. Each interview lasted for 60 to 90 minutes.

2.4. Data Analysis

Data were analyzed according to Colaizzi’s [12] method. To ensure the reliability and validity of the findings of the present study, the four evaluation criteria of Lincoln & Guba [13] for qualitative research were considered, namely truth value, applicability, consistency, and neutrality.

3. Results

The present study aimed to complete understanding of the experiences of nursing as a group. The analysis revealed 5 theme clusters and 12 topics. The theme clusters of the experiences of the participants as graduating students were feelings as a preliminary nurse, lack of confidence in performing a job as a preliminary nurse, vagueness and anxiety about human relationships, conflicts in the process of becoming a nurse, and strengthening competence in the process of becoming a nurse. The theme clusters and the themes within each are summarized in Table 1.

3.1. Feelings as a Novice

Three sub-thematic phrases occurred within this theme cluster, namely the burden of a preliminary nurse, fear of entering into society, and expectations about being a preliminary nurse. Meaningful participant statements relating to each theme are given below.

1) The burden of a preliminary nurse

The participants reported experiencing psychological pressure due to their nursing duties as preliminary nurses, as they take the first step into the work environment.

I will be working as a new nurse next year, and frankly, as you know, new nurses face a lot of difficulties. I think a lot about what if I do not do well in my work.... What if I forget everything I learned in clinical practicum once I start working at a hospital after the national examination.... I have this worry. Since what I do is directly related to the safety of patients, a greater responsibility is given to me once I become a nurse, and I am fearful about the possibility of making a mistake. (Participant 4)

Due to the nature of our profession, I will be working in a three-shift system and deal with people from many departments, and my biggest worry is that whether I will do well with flexibility in such an environment. And when I am a student and make a mistake, somebody will help and protect me, but now I feel at a loss with the thought that I have to do everything all by myself. (Participant 5)

2) Fear of entering into society

The interview data show that nursing graduate candidates experience a lot of fear about new environments, such as having to begin a new social life as a member of society when they graduate, separating from their familiar environments of living with their parents, and handling their finances.

Now a member of society becomes a real member of society. Up until now, I have been protected by the boundaries of the university, but I get a lot of anxiety about the thought that I am really entering into the society. I have to manage everything by myself and mom and dad don't give me allowances anymore.... I have to live on my salary.... (Participant 1)

Because I am graduating, I feel more responsibility. By the way, college graduation means entering society..., becoming a member of society. So, instead of just getting excited, I feel I have more of a sense of responsibility. Now my protection is gone, and I have to make money by myself.... Now I am not a student but a member of society (omitted). Other friends may have a difficult time because of employment, but I envy them a bit. They go abroad to study under the name of employment preparation, take a leave of absence, and are able to lean on their parents. But I have to go to the hospital right away whenever my hospital needs me, and I am also worried about whether I will be doing ok as a society member. (Participant 7)

3) Expectations about being a preliminary nurse

Nursing graduate candidates showed that they feel excitement about being preliminary nurses after graduation, and confidence that they will do well on given tasks.

Being a graduating student means that I become a nurse. So, I feel some pressure and a bit excited at the same time. It is scary and bit burdensome, but the thought of doing the job that I really wanted makes me excited and feel good, too. Also, now as a professional nurse, it is good that I can be of help for patients wherever I go (omitted). I did not know when I first came into the nursing program, but as time goes by my pride for becoming a real nurse has gotten stronger, and now the excitement of participating in clinical settings is a little stronger. (Participant 6)

3.2. Lack of Confidence in Performing the Job as a Preliminary Nurse

This theme cluster is composed of two themes, namely lack of job performance capability and lack of context-dependent judgments and coping abilities, and illustrative statements of participants for each are given below.

1) Lack of job performance capability

It was found that nursing graduate candidates felt that fast and accurate performance in carrying out real nursing tasks as a preliminary nurse would be difficult once they were employed, and they were fearful about being blamed due to slow job performance and a lack of nursing knowledge.

I thought I should train my eyes to see patients as a whole. Because that's not taught at school, I should do it by myself. However, what I can do to train myself is limited. (During class) I felt a lot of pressure for seeing so many patients that I'm responsible for during the integrated clinical nursing practice. (Participant 1)

I haven't done 3-way injections. I haven't done intramuscular and hypodermic injections.... All the hypodermic injections I did were the ones we did among students when I was a sophomore. I had a couple of suction experience when we went to ICU but I only had observations on foley or nelaton catheterization. Even though I tell myself that I will do well over and over, the thought of 'what if my senior asks me to do something that I don't do well' pops up in my mind. All we were asked to do at the hospital was to take vital signs. Even though we practiced on mannequins at school, I am worried that I might not do well on real patients when I become a nurse. (Participant 3)

2) Lack of circumstantial judgment and coping abilities

It was found that nursing graduate candidates feared that they might not respond rapidly and appropriately when unexpected situations developed, as they would directly nurse patients with severely restricted practical experience when employed as preliminary nurses.

I have to pay attention to this patient, but if I did, other patients in other rooms would not get my attention and nursing. So I worried a lot as to how do I do it. Also, since I have no experience giving shots to elderly patients whose blood vessels are easily ruptured, what should I do if the patient is angry because I have to stick the needle in repeatedly. If I am treating a female patient, I feel that I will have difficulty asking in-depth questions as I am still very young. (Omitted) (During clinical practice on campus) I was tested on a meningitis patient and asked about the results of lumbar puncture, and also asked why I was taking blood pressure repeatedly, and I did very poorly. (Participant 1)

3.3. Vagueness and Anxiety about Human Relationships

This theme cluster is composed of two themes, namely vague fear about forming personal relationships with future nursing colleagues and anxiety and confusion about future self-image in terms of prejudice towards and reprimanding of new nurses. Illustrative statements regarding each theme are given below.

1) Vague fear about forming human relationships with future nursing colleagues

Nursing graduate candidates were found to expect difficulties in human relationships with fellow nurses upon becoming new nurses, and were fearful about forming human relationships with nursing colleagues due to difficulties regarding conflict and communication.

Even though I learned a lot and did a lot of practice, even with simulations, at school, I am very worried that I will be blamed and my character will be insulted by my seniors. Under the present condition, instead of worrying about whether I will be able to get a job and work well, I am very much thinking that I will be harassed a lot, scolded a lot, and wonder if I will be able to put up with it. I feel that nurses have very strong senior-junior relationships, and by its influence, nursing students also have very strict senior-junior relationships. (At the hospital) when seniors call my name and scold me with rough words that almost make me cry, I wonder whether I will do ok. (Participant 4)

2) Anxiety and confusion about future self-image in terms of prejudice towards and reprimanding of new nurses

Nursing graduate candidates reported being fearful about their own future images in terms of the expected training methods of senior nurses for new nurses, and the way they deal with new nurses performing their tasks.

Senior nurses were talking among themselves pointing fingers at a new nurse with the new nurse in front of them. They were saying they can't work with the new nurse. They teach the new nurse all the time, but she forgets. I guess the shame the new nurse felt must be beyond description. I will feel like dying if I am in that situation next year. I am not sure that it was because the nurse was new or because of territoriality, because even though the new nurse is a colleague, the new one is an intruder in her territory, and as the new one is not proficient, she would be frustrated and have to do more work, but I was very shocked as I was watching it. (Participant 1)

Senior nurses always say newbies are dumb, and they have to learn. I am not sure if I can handle it well. They think they've got a new dummy. When I was doing clinical practicum, two new nurses were compared, and one was treated well while the other was scolded all the time, and the scolded one eventually quit the job. If a new nurse had a senior nurse protecting her, she would be doing well.... It looked tough to have a senior nurse blaming you all the time. I am afraid that I might be in that situation after graduation. (Participant 3)

3.4. Conflicts in the Process of Becoming a Nurse

This theme cluster is composed of two themes, namely psychological pressure of passing the national examination and confusion about theoretical and practical processes. Illustrative statements for each theme are given below.

1) Psychological pressure of passing the national examination

Participants reported feeling significant pressure due to the heavy studying load and the stress of the national examination, which they must pass to become nurses.

I have the national examination coming and even though I have been preparing for it well I am quite anxious and pressured because if I fail it, I will have to wait for another year. Quite frankly, even though my seniors are telling me I will pass the exam without a hitch, it might not happen to me. If I miss the national exam, getting employed means nothing and I heard even very good students miss the exam. Almost all the talks with my friends are about the national exam and what it will be like when we become preliminary nurses. I won't fail it, will I? I hope I don't fail....(Omitted). My seniors keep telling me not to worry because the national exam will yield about 50 points higher than the mock test.... I wouldn't fail it, would I? I have so much to study. (Participant 6)

2) Confusion about theoretical and practical processes

It was found that nursing graduate candidates felt there were differences between what they had learned in nursing and applying this to clinical practice, and they experienced difficulties due to their lack of direct hands-on nursing experience.

I can do a lot, enough to be called comprehensive nursing care, at school but it is not the case at hospitals. I took twelve patients when I did the integrated clinical nursing practice, and it was quite different from what I did at school. Nursing a real patient at hospitals, not a mannequin at school, was quite different. For example, I know about injections theoretically but when I was doing it on a real patient my hands were not working well, which worries me. I memorized the order of manual techniques at school and went to a hospital only to find out that the nurses were doing it in a different order. At school, I was taught to put the gastric fluid back if it leaks, but I was severely scolded for doing that. I was forced to stick with aseptic performance but nurses at the hospital didn't even wash their hands well enough. (Participant 5)

3.5. Strengthening Competence in the Process of Becoming a Nurse

This theme cluster is composed of three themes, namely having faith in and taking responsibility for roles as nursing students, sense of satisfaction with improved nursing skill competency, and sense of pride in nursing science major. Illustrative statements for each of these are given below.

1) Having faith in and taking responsibility for roles as a nursing student

It was found that nursing graduate candidates gained feelings of worth through their curriculum, becoming confident in performing nursing tasks, and trying to do their best.

(Junior) I felt like I could do well as I was practicing foley, nelaton catheterization, and IM administration in the Fall semester. When I was a freshman, I had a lot of 'What am I learning?' Since we started out with physiology, pathology, and anatomy, it was very difficult. When I look back, though, I realize those were the real foundations. Nowadays, I tend to look at the bigger things first, then the smaller ones. As I was practicing things in the sophomore year that I did not know about in my freshman year, I think I realized what I had to do (omitted). During my first and second year, even getting up in the morning was difficult, and now I am in the third year, I can easily get up and find what I can do by myself at my practice site even though we are still learning. (Participant 3)

2) Sense of satisfaction with improved nursing skill competency

It was found that, even though nursing graduate candidates were at a loss when they faced new clinical knowledge and situations, they felt good as they realized that their role was becoming concrete as they performed their tasks independently.

My senior nurse told me just try the IV on a patient whose blood vessel was difficult to see. But, I was successful in just one try. So, I became a little more confident. I felt that my outlook was gradually broadening, and I think I learned the most while I was doing practice. As I learn more detailed diseases and pathology in adult and pediatric nursing, I know more about pathological physiology, and my vision is broadened and I know more now. And I think my strength is in building a good rapport with patients. In my first and second year, patients were difficult to approach and deal with, but now, if I open up my mind first and approach, I think I am able to form a better rapport with patients than senior nurses. Practice in the Spring semester of my junior year seemed to be different from that of my sophomore year. I worked a little harder and as I was doing so I was more confident, and since I could see what I learned in classes one by one, I felt I matured greatly. When patients got better and discharged from the hospital and thanked me, I was very happy. As the knowledge I learned in classes is falling into place one by one and taking on shape, I think I can do a lot more for patients. (Participant 7)

3) Sense of pride in nursing science major

It was found that nursing graduate candidates felt good about positive feedback regarding their major in nursing science, and as their employment was confirmed, and they felt the need for further learning to perform their tasks proficiently, trying to learn by themselves in deficient areas.

When a patient opened up his/her mind and thanked me so sincerely I almost had teary eyes with joy, and through this, I felt that I made the right decision to become a nurse. In fact, it is great to have a determined career path as we do while others of my age are worrying about their careers and employment. Also, the social perception of a professional occupation is very good. (Participant 2)

As I learn more detailed diseases and pathology in adult and pediatric nursing, I know more about pathological physiology, and my vision is broadened and I know more now. When I went to ICU, a chief nurse was passionate and she asked us a question about shock and systematically taught us, starting from what to focus on when nursing such patients. I thought, 'Ah! She is a very passionate and cool chief nurse,' and I thought I want to be like her. (Participant 6)

Table 1. Themes Identified within the Experiences of Nursing Graduate Candidates

Theme clusters	Themes
Feelings as a novice	The burden of a preliminary nurse
	Fear of entering into society
	Expectations about being a preliminary nurse
Lack of confidence in performing the job as a preliminary nurse	Lack of job performance capability
	Lack of circumstantial judgment and coping abilities
Vagueness and anxiety about human relationships	Vague fear about forming human relationships with future nursing colleagues
	Anxiety and confusion about future self-image in terms of prejudice towards and reprimanding of new nurses
Conflicts in the process of becoming a nurse	Psychological pressure of passing the national examination for nursing
	Confusion about theoretical and practical processes
Strengthening competence in the process of becoming a nurse	Having faith and taking responsibility for roles as a nursing student
	Sense of satisfaction with improved nursing skill competency
	Sense of pride in nursing science major

4. Discussion

The present study was an in-depth descriptive study that used the phenomenological research method to vividly describe the nature of nursing graduate candidates' experiences according to their expressed meanings. The data from seven nursing graduate candidates included 155 meaningful statements covering 12 topics in five theme clusters. The theme clusters involved the participants' feelings about work done during their training, work to come as they began their nursing careers, and others' reactions to their work and status as new nurses.

The feelings of nursing graduate candidates as preliminary nurses related to the burden of being a preliminary nurse, fear of entering into society, and expectations about being a preliminary nurse. Adulthood is a period during which one gains financial independence, makes a living, gains employment security, gets married, and has a family [14]. For students, college graduation also means the beginning of their career lives, their career being a task of adulthood. Nursing graduates appear to experience fear regarding expectations and uncertainties about carrying out such developmental tasks at the beginning of adulthood.

It was found that participants felt pressured by a lack of confidence in performing tasks due to insufficient job performance capability and insufficient ability to make circumstantial judgments and to cope. This may be related to the fact that, although these students are in a situation in which they have to be employed and perform nursing immediately after they graduate, a range of difficulties arise, such as the following: (i) patients refuse direct nursing treatments by nursing students, (ii) nursing services provided by students in clinical sites are limited due to human rights and stricter personal information standards, clinical practicum experiences as students are (iii) observation-oriented rather than hands-on due to insufficient practicum sites, and (iv) on-site nurses' lack interest in students' nursing education due to their own excessive workloads [7, 10]. In addition, this causes inadequacy in clinical performance capability, which puts great pressure on soon-to-be-graduating

students, who will be working in clinical sites immediately after graduation [15]. Such circumstances cause a range of problems, such as preventing nursing students from being placed into clinical nursing practice immediately after graduation, increasing the burden of job training for new nurses, and greatly increasing new nurses' turnover rate [16, 17]. To resolve such issues, improvements are needed in terms of sustained connections between colleges and clinical sites, so that the contents and methods of nursing education may be more field-oriented through such cooperative relations.

Nursing graduate candidates reported experiencing anxiety and confusion, as they saw new nurses when they were students, and considered these their future image. Nursing graduate candidates experience conflicts with fellow nurses, patients and their guardians, and medical staff, and felt particular difficulty adjusting to relationships with colleagues with whom they would spend most of their working hours. Because of this, their job satisfaction decreases, and they become sufficiently stressed to consider changing jobs [17-19]. Nursing graduate candidates become anxious, as they see such conflicts on-site and imagine such situation that they will unavoidably experience. In addition, dissatisfaction and stress in clinical practice within the curriculum damages students' self-esteem, giving nursing a negative image and threatening their sense of identity [20] [21]. Therefore, nurses at clinical practice sites ought to self-reflect on their roles as educators, and improvements in the work environment for new nurses, including subsequent intervention, are necessary.

Nursing graduate candidates reported experiencing conflicts in the process of becoming nurses, with the stress of the national examination for acquiring a nursing license, the burden of large amounts of studying, and the confusion regarding theoretical and practical processes. Obtaining a nursing license is a requirement in the process of becoming a nurse, and if the license is not acquired, a nursing qualification is not awarded, and planned employment at a hospital may be cancelled. Furthermore, nursing graduate candidates' concern about the difference between theoretical knowledge and applying it in practice may be an indication that they feel anxious about being unable to fulfil their roles as qualified nurses, despite theoretically being able to do so due to their certification following the national examination.

Therefore, strategies to modify the heavy curriculum by integrating courses and improving educational methods, and to reduce the divide between theory and practice by increasing case- and field-centered education for the nursing national examination is deemed necessary. In addition, research on managing stress and improving coping abilities is required to allow students to perform well on the tasks they are required to do as a rite of passage.

Participants appeared to feel largely successful in improving their qualification as nurses through the curriculum. After entering college, nursing college students show improved confidence in terms of nursing knowledge and techniques, increased satisfaction with their major, improved self-efficacy, efficient communication, and improved interpersonal relationships as they advance to upper classes [22, 23]. Such improvements produce positive images of the nursing profession and show growth as a nursing professional [6, 24].

5. Conclusion

The present study aimed to investigate the experiences of nursing graduate candidates by using a phenomenological method, which is a qualitative method. In terms of expectations about entering into a professional occupation, the nursing graduate candidates sympathized with the problems experienced by new nurses as

preliminary nurses. In addition, a decrease in confidence was observed due to a lack of job performance capabilities that may be faced in nursing sites, difficulties in allocating priority to nursing, lack of judgment in various situations that may occur when communicating with patients, and the ability to cope accordingly. The nursing graduate candidates imagined their own future images through those of prejudice against and reprimanding of new nurses, and expressed vague fear about events that could occur within human relationships with future nursing colleagues.

They expressed confusion and felt the burden of the curriculum and the national examination, which is a rite of passage in becoming a nurse, but these feelings were overcome by their accumulation of knowledge, improvements in techniques, and the establishment of confidence and nursing professionalism as they advanced to upper classes.

The results of the present study may be utilized in guidance and counseling strategies for undergraduate students, and as baseline data in developing programs for improving role adjustment among new nurses after graduation.

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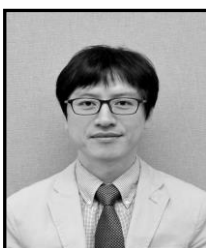
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