Motivation in the Clinical Education of Nursing Students: 
A Hybrid Concept Analysis Method

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Abstract

Background: Motivation is an abstract, construct and concept regarded important issue in nursing education. The clinical setting complicates the concept of motivation in the clinical education of nursing students.

Objectives: The present study aimed to evaluate the concept of motivation in the clinical education of nursing students.

Methods: The hybrid model by Rogers was used to develop the concept of motivation. In the theoretical phase, 105 articles were obtained, and 59 articles were selected after accurate assessments. In the fieldwork phase, in-depth, semi-structured, face-to-face interviews were conducted with 14 nursing students and instructors, and the interview data were analyzed. In the final analysis stage, the results of the theoretical and fieldwork phases were integrated and assessed.

Results: In the theoretical phase, a definition of motivation was provided based on previous studies. The determined categories based on the interviews in the fieldwork stage included 'spiritual satisfaction', 'attitude of the society toward the nursing profession', 'appropriate educational environments', 'professional knowledge', 'capabilities in clinical practice', 'independence', 'communications', 'values', 'Dignity and respect', 'role models', and 'working conditions of nurses'. In the final analysis stage, the results demonstrated that some of the antecedents and consequences of the theoretical phase overlapped with the fieldwork stage, and some were exclusively related to the field of nursing.

Conclusion: According to the results, in addition to interacting with individual psychological conditions, the concept of motivation is correlated with the spiritual beliefs of nursing students, clinical education environment, and professional conditions. Depending on the circumstances, motivation for clinical education in nursing students is within a dynamical range with occasional surges and declines.

Keywords: motivation, clinical education, concept analysis, hybrid method, nursing

Introduction

Motivation is essential to learning and education [1]. One of the goals of higher education is to enhance the motivation of individuals for long-term learning [2], where a significant attention has been paid to nursing education. Similar to other academic Discipline, motivation is of paramount importance in nursing education, and the significance of this issue has increased in clinical nursing education since it is recognized as the basis of nursing education [3,4]. Demotivation nursing students during clinical education is
associated with the reluctance of the graduates to initiate their nursing profession. In this regard, one of the basic concerns of the healthcare system is the high level of academic dropout of nursing students and an urgent need for motivated and qualified nurses [5-8]. The presence of motivated Nurses in the healthcare system depends on student-centered training [9]. The concept of motivation has been discussed in various studies in different fields of education with a diverse range of terms and perspectives. According to review of the literature, motivation has been emphasized in several areas of psychology and education. From an educational perspective, some of the main dimensions of motivation are educational goals, academic failure, life experiences, social communication, student-teacher interactions, and opportunities for accountability [10-14]. On the other hand, success motivation [8,11] is assessed based on the factors associated with personality in terms of psychology, recognizing personality traits as the key predictors of motivation [15-17].

Papers on nursing have been focused on the motivation of nurses and nursing students. However, most of the studies in this regard have mainly discussed the motivation of students' entry to the field of nursing. In other words, it seems that there is a correlation between the motivation to study nursing and entering the field of nursing by students. In a research by Boughn and Letini, the key motivations for female nursing students were reported to be a sense of empowerment toward oneself and others and caring for others [18].

In another study, Miers et al. concluded that while service provision remained a key factor for selecting nursing as a field of study, students sought valuable occupations with professional rewards [19]. In the study by Zysberg and Berry, both men and women reported self-excellence as the most important motivation in their career choice. Nevertheless, a higher number of men regarded vital needs as a basic motivation compared to women [20].

According to Jirwe and Rudman, there are three different motivations for entering the nursing profession, including genuine interest, default choice and practical reasons [5]. Moreover, Cohen et al. stated that their participants mentioned several differences between nursing and an ideal occupation due to limitations such as the low decision-making power of nurses, high preoccupation, inadequate income, and unsatisfactory position in the society [21]. Another research demonstrated that men selected the nursing profession due to financial pressures [22]. While this principle has a higher level of gender stigma than the other healthcare professions, it has been associated with low career progress [23].

Some studies have denoted the factors that may increase or decrease motivation after selecting a specific field of study. In a research by Rongstad, students were motivated by helping others and feeling helpful [24]. According to Lin et al., social interactions in actual situations had a direct impact on the internal motivation of students [2].

In addition, Nilsson et al. claimed that nursing students considered internal motivation factors (e.g., becoming a nurse) to be the root of positive motivation [25]. According to McLaughlin et al., the main influential factors in motivation are the tendency to provide care for others and having an opportunity for personal growth [26]. Another research indicated that high clinical exposure increased professional experience and motivation in nursing students [27].

Review of the literature indicated that most of the studies in this regard have assessed the internal and preservative motives of students in choosing the nursing profession. However, evaluation of other sources revealed that the concept and dimensions of motivation in the clinical education of nursing profession have not been investigated exclusively. Considering that concepts are the basis of progress in the nursing science and essential to effective communication and critical thinking [28], clarification of the significant concepts in clinical education (e.g., motivation) seems crucial. In challenging clinical settings, motivation is the key to the adequate learning of nursing students and their permanence in the healthcare system.

The present study aimed to assess the concept of motivation in the clinical education of nursing students using the concept analysis method.
Methods
The hybrid evolutionary method was used in the current research, encompassing the theoretical, fieldwork, and analysis phases. The first phase (theoretical) involved selecting and defining a concept based on knowledge and documentation. The second phase (fieldwork) involved collecting qualitative data for concept analysis. In the third phase (analysis), a new definition of the concept was presented through finalizing the analysis and presenting suggestions [28].

Theoretical Phase
In the theoretical phase, we searched for scientific articles and documentations using the keywords such as nursing, clinical nursing, motivation, clinical education, clinical learning, and student in valid databases, including ScienceDirect, Black Well, Ovid, PubMed, and Google Scholar, regardless of the time span based on the approaches matching each database. In total, 105 articles in different fields were retrieved which were published during 1993-2018. However, 59 articles were further evaluated after evaluating the articles and eliminating the duplicates and irrelevant contents. Furthermore, the concept of motivation was checked in dictionaries and encyclopedias (with the exception of scientific resources) in order to define the motivation of clinical learning and recognize its dimensions and related factors. At the end of the theoretical phase, the features, antecedents, and outcomes of motivation in education were determined.

Fieldwork Phase
At this stage, semi-structured, face-to-face interviews were conducted with 14 nursing students and instructors at Tehran and Zanjan universities of medical sciences in Iran. The interview questions were as follows:
-What comes to your mind when discussing motivation in nursing?
-How are nursing students motivated for clinical education?
-What are the influential factors in the motivation of clinical learning in nursing students?
Prior to the interviews, the study protocol was approved by the Ethics Committee of Iran School of Nursing and Midwifery (code: IUMS1475027). The participants were introduced by nursing professors as knowledgeable individuals in the field of nursing. The first encounter with the participants occurred in the work room of the researcher, school campus or workplace of the individuals.

The objectives of the research were explained to the subjects, and written informed consent was obtained. After the initial conversations to gain the trust of the participants, the time and place of the next appointment were specified based on an agreement with the participants in the same meeting. The participants were granted gifts at the end of the second session. In total, 14 participants (four nursing instructors, and seven and three female and male students, respectively) were selected via purpose full sampling. The nursing instructors were within the age range of 35-57 years and had work experience of 12-30 years in clinical and educational settings.

The inclusion criteria for the nursing students and instructors were being a sophomore nursing student and a minimum of five years of work experience, respectively. It is noteworthy that the interviews were recorded with the permission of the participants.

First, the interview contents were transcribed in Word Office 2007, and the codes were managed using MAXQDA 2007. Content analysis was used to assess the qualitative data. In addition, the interview transcriptions were reviewed repeatedly.

After data assessment, the exact statements of the participants were used as the primary or open codes for preliminary coding. The open codes were reviewed several times and compared for better comprehension. Finally, the codes with similar meanings were placed under the same categories. These semantic units were divided into two main categories of 'antecedents' and 'outcomes' based on their similarity. The initial analysis was carried out by the first author, followed by the review of the analysis results by the second and third author. Afterwards, the research team reached consensus on the contents and categories in the presence of all the authors.

Analytical Phase
In the final analytical phase, the results of the theoretical and fieldwork phases were assessed in an integrated manner in order to clarify the concept of motivation in the nursing students. In
this process, MAXQDA 2007 was applied to integrate the codes obtained from the theoretical and fieldwork phases. Following that, the categories were re-evaluated, and those capable of integration were assigned a common name after revision. The categories incapable of integration remained as separate categories.

Results
Theoretical Phase
In Oxford Dictionary, motivation is defined as "the reason why somebody does something or behaves in a particular way" [29]. In common language, motivation is regarded as an equivalent to goal-directed behavior [30]. In another definition, the term motivation refers to all the conscious and unpremeditated mental factors of mankind, intended to realize some of the actions, attitudes, and goals of individuals [31]. Motivation influences choosing how to spend your time and how much energy you put into any responsibility [32].

To define motivation, some psychology researchers have focused on individual, internal psychological factors that affect motivation, including personal attributes, self-efficacy, perceived ability, perceived control and competence, self-concept, intrinsic motivation, learning strategies, and goal orientation [10]. According to a report by Murphy and Alexander, the terms 'achievement', 'affection', 'attribution', 'self-competence', 'self-efficacy', 'goals', and 'engagement' have been used in several studies as an equivalent to motivation [30].

Motivation could be regarded as an internal and external factor [33]. Internal and external motivations are in opposite directions within a spectrum, which further complicates their association and affects the other success variables in students [2]. Some researchers have conceptually defined motivation as an inner motive for acquiring or doing something. In internal motivation, a task is performed to achieve an internal reward rather than a reward that is a result of an action [31]. In addition, internal motivation emerges when an individual takes pleasure in performing an activity [34], such as meaningful learning [1].

External motivation is the opposite of internal motivation. In general, external motivation perform a duty to obtain external rewards [30,35]. External motivations could strengthen or abolish internal motivations [12]. Considering the mentioned definitions, motivation could be defined as a variable [36] that is involved in passionately performing a behavior [34] and directing one's efforts toward achieving their desired goals [30,32,34]. Literature review revealed the use of the terms 'antecedents' and 'outcomes' in regards to the motivation of nursing students in education (Table 1).

Table 1: Antecedents and Outcomes of Motivation in Theoretical Phase

<table>
<thead>
<tr>
<th>Antecedents of Motivation in Education</th>
<th>Outcomes of Motivation in Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental abilities, learning approaches</td>
<td>Becoming interested</td>
</tr>
<tr>
<td>and personality [15,38]</td>
<td></td>
</tr>
<tr>
<td>Social and demographic characteristics</td>
<td>Active learning, independent learning, and self-direction [26,40,41]</td>
</tr>
<tr>
<td>[7,20]</td>
<td></td>
</tr>
<tr>
<td>Teacher-student relationship [23,43]</td>
<td>Problem-solving [39,40]</td>
</tr>
<tr>
<td>Mentors, role models, and peers [11,45,46]</td>
<td>Creativity [47,48]</td>
</tr>
<tr>
<td>Social relations, competent beliefs,</td>
<td>Better learning and academic success [43,51]</td>
</tr>
<tr>
<td>and goal structures [49,50]</td>
<td>Increased self-confidence, self-efficacy, autonomy and motivation [40,50,52,53]</td>
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</table>

Based on previous studies and the antecedents and outcomes determined for the concept of motivation, the operational definition of motivation for clinical education in nursing students, which had all the properties mentioned in the previous studies, was as follows: motivation is in fact the student's will to learn in clinical settings [53].

Motivation influences the thoughts and feelings of students toward their responsibilities, profession,
and duration of their insistence on performing a task [32]. In addition, motivation is a valuable component to explain behaviors, predict work results, and direct the attitude of students toward achieving their goals [11].

**Fieldwork Phase**

The antecedents and outcomes of motivation based on the results of the fieldwork phase are presented in Table 2.

| Table 2: Categories Obtained from Motivation Concept Analysis in Nursing Clinical Education in Fieldwork Phase |
|-------------------------------------------------|-------------------------------------------------|---------------------------------------------------|
| Motivation Antecedents | Motivation Outcomes | Interclass Relationship |
| Spiritual Satisfaction | Nursing entry factor | Feeing of inner satisfaction |
| | Motivation-maintaining factor after entering the field | Spiritual satisfaction is the antecedent of the positive attitude toward the profession. |
| Attitude of Society to Profession | Factor of entering/leaving the profession | Efficient performing of tasks in clinics |
| | Factor of motivation maintenance | Feeling of inner satisfaction is the outcome of spiritual satisfaction and antecedent of the positive attitude toward the profession. |
| Facilities of Educational Environment and Planning | Desirable/undesirable attitude toward nursing | Better/worse clinical learning |
| Professional Knowledge | Application of self-knowledge in clinics | Scientific performance of a task in clinics |
| | Ability of responding to the questions of patients | Increasing motivation for more clinical education and learning |
| | Improving the attitude of the society toward the profession | Proper attitude toward nursing is the outcome of a suitable educational environment, and spiritual satisfaction is the antecedent of effort to attain knowledge and improve professional knowledge. |
| Ability to Perform Clinical Tasks | Increased self-confidence | Increased self-confidence is the outcome of ability to perform clinical tasks and antecedent of performing tasks independently. |
| Sense of Independence | No sense of inferiority | Emergence of creativity |
| | No sense of inferiority | No sense of inferiority is the outcome of feeling independent and antecedent of increased self-confidence. |
| Communications | Less or more clinical education | More clinical education is the outcome of effective communications and antecedent of the positive attitude toward the nursing profession. |
| Sense of Dignity and Respect | Enthusiasm of students to attend clinics | Enthusiasm of students to attend clinics is the outcome of sense of dignity and respect and antecedent of more clinical education. |
| | Misconduct of student status in clinics | |
| | Leave of profession | |

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According to the results of the fieldwork phase, spiritual satisfaction was an antecedent of motivation in the nursing students, which emanated from the deep-rooted spiritual beliefs in the society. In this regard, one of the students stated:

“Knowing that you have the blessing of the patient lifts your spirit.” (Participant 8, student)

In terms of ‘spiritual satisfaction’, one of the instructors affirmed:

“I always tell my students that we do not deal with numbers. I do not work in a bank so that any miscalculation in numbers would only lead to the elimination of my salary as compensation. What would I do if something like that happened to a human being? My client requires me to teach him. If he leaves and comes back with complications, what is my reaction and how can I respond to that? In fact, we awaken their conscience. I try my best to reveal the reality of nursing both religiously and emotionally. For instance, there are 13 nurses in the companions of Imam Zaman, and there are no physicians or teachers among them. Then, I explain the Battle of Karbala and Zaynab bint-e Ali.” (Participant 11, instructor)

'Positive attitude of the society toward the nursing profession' was observed to influence the entry of the nursing students into this field, which was similar to 'spiritual satisfaction'. In addition, this dimension was an antecedent that increased the motivation of the participants to study the nursing profession, which could result in better clinical education. In this regard, one of the students remarked:

“Sometimes, in response to some people who ask me about my major and whether nurses even study or not.” (Participant 6, student)

Another dimension assessed in our research was 'proper educational environments', where facilities play a key role from the perspective of the participants. Suitable facilities of an educational environment was considered to be a motivational antecedent, whereas unfavorable facilities or the lack of educational facilities was an antecedent for low motivation. In this respect, one of the students asserted:

“If we break a peripheral venous catheter, we must send a request again with the name of the patient. This makes us feel bad. The faculty must provide sufficient facilities for the students and instructors.” (Participant 1, student)

'Proper educational planning' was an antecedent associated with the higher efficiency of the students. However, improper educational planning affected by educational facilities was regarded as an antecedent, leading to fatigue and lack of learning, which could subsequently decrease the motivation for clinical learning. In this regard, one of the students stated:

“Our studying hours are not appropriate. We have no free time. This is only due to inappropriate educational planning. All the students in the clinic are tired, which affects their learning. In addition, they are all bored and have no willingness to work. We have a class after internship from two to six p.m., where most of the students are asleep!” (Participant 7, student)

Another antecedent of motivation in the nursing students was 'adequate professional knowledge'. The participants believed that professional knowledge of students is one of the components and antecedents of motivation for clinical practice. The outcome of adequate theoretical and practical knowledge enables all students to feel empowered in clinical tasks. Furthermore, such knowledge results in appropriate professional communications. In this regard, one of the students claimed:
“I experienced this personally. When you have the right answer to a question asked by a patient, it increases your self-confidence, and you think that all the studying has paid off”.

On the same note, another participant asserted:

“When my student has a proper knowledge of what he/she is doing and efficiently performs the tasks in the clinic, he/she could be regarded as an efficient professional, which may increase their interest in the field.” (Participant 11, instructor)

The motivation antecedent of 'sense of independence' in performing professional tasks was associated with the outcome of not feeling inferior and even the emergence of creativity. In contrast, lack of independence in tasks and merely taking orders from physicians could lead to the lack of self-confidence. In this respect, a student commented:

“Accepting various methods to perform the same procedures is an important issue. For instance, a task may be done in many ways, where both sterilization and accurate implementation are observed in different ways, or a task is taught by the instructor to be performed in a particular way. I do the exact same task accurately, but in a different way. It should not lead to the punishment of the students, and the new methods applied by these individuals must be accepted. I believe that this can be interpreted as respecting the sense of independence in students while performing their duties.” (Participant 2, student)

According to the participants, 'dignity and respect' was another antecedent of motivation. In addition, the outcome of valuating and respecting students was reported to be their higher efficiency in the clinic. In this respect, one of the participants affirmed:

“When I go to the clinic, I feel that they valuate me, which increases my motivation to work in this area.” (Participant 4, student)

On the same note, another participant mentioned:

“I think 99% of motivations are created by social status. I see that when I work in the ward, I am constantly insulted and disrespected, even by educated people. This leads to unwillingness to properly perform a task or spending time only to finish my shift. It even results in leaving the profession. Social status is something that we do not have at all.” (Participant 6, student)

'Communications' was the outcome of the 'sense of dignity and respect' and students' status in the clinic. Nursing students work in a complicated system of communications in the clinic, which involves communication with instructors, nurses, patients and their companions, and other personnel, each of which directly or indirectly influences the motivation of students. In this regard, one of the participants declared:

“If you establish good relations with the patients, you can properly work with them, which increases motivation.” (Participant 9, student)

Regarding the communication between students and nurses, one of the students stated:

“Nurses pay no attention to the nursing students as if they do not accept us as one of themselves.” (Participant 4, student)

Constructive interactions of students, nurses, and instructors create strong motives; in other words, proper communications were observed to be an antecedent of motivation. In addition, these relationships are associated with the role of the antecedent of being turned into a role model for nurses and instructors. This role model could be either debilitating or constructive depending on the type of the relationship with students. The interviews indicated the presence of role models (e.g., instructors and nurses) in educational clinical settings to be among the most important antecedents of motivation in the clinical education of nursing students. Our participants believed that the behaviors and actions of nurses and instructors were their role model in increasing or reducing motivation. In this respect, one of the students stated:

“All the nurses I have seen so far have been ill-tempered. There are many people who hate nurses, including students like us. The attitude of the society toward us is negative only because of the bad attitude of some nurses.” (Participant 13, student)

Students see their future version in today’s nurses, so that even the work difficulties of nursing may affect their motivation level. Therefore, the working conditions of nurses was an antecedent of motivation not only in clinical education, but also in maintaining motivation in the students during the education process. In this regard, one of the students affirmed:
“I see nurses after their night shifts, and they are exhausted. Well, night shifts are very difficult with the high number of patients. When I experienced night shifts, I even considered leaving this profession.” (Participant 7, student)

Regarding the effect of work condition as an antecedent of motivation on clinical education, two instructors claimed:

“There is an imbalance between the workload and income level of nurses, which leads to their lack of motivation.” (Participant 12, instructor)

“The fact that graduates of other fields have no jobs but our students can immediately start their profession after graduation results in a sense of motivation in the students.” (Participant 14, instructor)

Analytical Phase

According to the results of the present study, some of the antecedents and outcomes of the theoretical phase overlapped with those inferred in the fieldwork phase, while some others were completely unique to nursing. As obtained in the theoretical stage, the willingness of students to learn in the clinic affected their spiritual satisfaction, while enhancing the positive attitude of the society toward the nursing profession, work conditions of nurses, and overall nature of this profession.

In the theoretical phase, our findings indicated that motivation affected the beliefs of students regarding their responsibilities and duration of their insistence on performing a task [32]. In the fieldwork phase, the ability for clinical practice, sense of independence, communications, and role models were among the antecedents of motivation, which increased the persistence of the students in clinical education. In addition, motivation was regarded as a valuable component to explain the causes of behaviors, predict work results, and improve behavioral leadership to achieve goals [11].

In the fieldwork phase, various antecedents, including the factors that were completely dependent on the nursing profession and unique factors associated with clinical education, could predict academic success and increase the tendency of nurses to succeed. Nonetheless, these antecedents were so varied that they were unable to predict the motivation of nursing student as easily as other fields of study. According to the classifications extracted in the fieldwork phase, the motivation for nursing clinical education was greatly influenced by the conditions of nursing profession. In the case of significant changes in these conditions, the students' motivation for clinical education may fluctuate.

The results of the fieldwork phase demonstrated a reciprocal association between the concepts extracted as the antecedents and outcomes of motivation. In some cases, the outcome of motivation created the conditions for another antecedent for motivation. For instance, 'spiritual satisfaction' was regarded as an antecedent that increased the students' motivation in clinical settings. Furthermore, the sense of inner satisfaction caused by 'spiritual satisfaction' resulted in the positive attitude of the students toward the nursing profession (Table 2).

In the current research, the participants considered 'spiritual satisfaction' to be one of the key motivations for entering the field of nursing and an antecedent to maintain motivation in nursing students during their academic education. Moreover, 'spiritual satisfaction' was introduced as an influential factor in the motivation to select nursing as a profession. In the theoretical phase, it was demonstrated that the motivational factor affected the perceptions of students toward their duties and profession [32]. In the fieldwork phase, 'spiritual satisfaction' was found to affect the thinking style of the students as a motivational factor. Deep religious beliefs in the Iranian culture enhance spiritual motivation, and Iranian nursing students are no exception in this regard. In Islam, the life of man is so valuable that the Quran considers saving a life equal to saving all lives [54].

In a study in this regard, inner beliefs, actions on values, and believing in God were reported to be among the factors that developed the professional values of nursing students [55]. In the theoretical stage, we concluded that sociodemographic characteristics were among the antecedents of motivation [56]. In the interviews, attitude toward the profession was also one of the antecedents of motivation.

Positive or negative attitudes are significantly affected by one's family and the society, as
claimed by the participants of the current research. In the previous studies in this regard, lack of proper social status and negative attitude of the society toward the profession, as well as the inaccurate or lack of understanding of a profession by the individuals and society, were recognized as the main causes of low motivation and leaving the profession [57,58].

In the present study, role models and mentors were considered to be the antecedents of motivation in the theoretical stage [45,59]. On the other hand, the concept of role model was extracted by the analysis of the data in the fieldwork phase. Accordingly, nurses increased the motivation of students to learn in clinics through their knowledge and competence. Nurses with higher self-confidence had an indirect influence on the students with their strength and authority.

In the fieldwork phase, favorable or unfavorable working conditions of nurses was regarded as an antecedent of motivation in clinical education. Unfavorable work conditions and difficulty of nursing tasks may lead to job dissatisfaction in these professionals, which might be transferred to students through disappointing remarks and discouragement.

In the theoretical phase, 'communications' were regarded as the antecedent of motivation. In other principles, communications are limited to the educational environment, as well as the relationship between professors and students and students with each other [10-14]. In the fieldwork phase, 'communications' were also regarded as an antecedent of motivation. Nevertheless, the scope of this connection was very wide, and each factor affected the motivation of the students variably. 'Communications' included interactions with instructors, patients and their companions, physicians, and other personnel and classmates. According to the results of the fieldwork phase, instructors or nurses and even physicians failed to have proper interactions with the students in some cases. When communicative problems arise from role models, the subsequent communication deficiency significantly affects the motivation of students for clinical education.

The majority of the participants complained about the inability of nursing students to communicate since they believed that in most cases, no proper communication model was presented by the instructors or nurses. Therefore, students failed to properly interact with patients, which caused problems in clinical tasks and adversely affected clinical education. The results of the previous studies have been indicative of difficulties in providing the necessary explanations to patients (e.g., disease description, telling the truth, and effective communications) by nursing students [60,61]. In this regard, communication skills training could be beneficial for nursing students [62]. Moreover, the improvement of communication skills may provide students with more learning opportunities through effective communication, thereby increasing their motivation.

According to the present study, the positive outcome of communication affected another antecedent of motivation in clinical education, which was the 'sense of dignity and respect' as inferred in the fieldwork phase. The 'sense of dignity and respect' for the students was regarded as being accepted by others. In other words, the sense of dignity and respect is the result of communication with the individuals present in the clinical settings. Feeling valued in nursing students could increase their motivation for clinical education, whereas feeling unworthy and experiencing insults are associated with low motivation for clinical education. In the theoretical phase, believing in competence was recognized as an antecedent of motivation [48,49]. Therefore, it could be stated that feeling valued in nursing students results in their believing in their competence, which encourages them to use their competence in fieldwork.

**Discussion**

According to the results, nursing education does not occur only by interaction with professors, students, and contents and is completely related to all the components in clinics. Motivation for clinical education was observed to be affected by the components in the categories extracted from the fieldwork phase. Considering the variety of these components and their placement within "good-bad" spectrum, maintaining a fixed level of
motivation in nursing students for effective learning is remarkably difficult. The motivation antecedents in the clinical education of nurses are covertly formed before the entry of students to the clinical field. These antecedents are the motivations that might even determine the entry of students to this field of study. Nursing students enter universities with a background of nursing profession based on the attitude of the society toward nursing or their own and families’ experiences. It seems that the motivation for clinical education is closely correlated with nursing career prospect. Changes occur in the level of clinical motivation of nursing students by observing the role models of their profession, as well as the fluctuations in the conditions of their profession. Therefore, motivation for clinical education in nursing students leads to interactions between the psychological conditions of individuals and their spiritual beliefs, while it is closely correlated with the clinical education setting and conditions of the profession. Depending on various conditions, the motivation for clinical education in nursing students is within a dynamic spectrum with occasional surges and declines. Therefore, it is highly difficult to measure the motivation level of nursing students for clinical education.

**Implications for Clinical Practice**

The results of the present study determined the antecedents and outcomes of the concept of motivation for the clinical education of nursing students, providing an opportunity for the evaluation, application, and development of tools using this concept. In addition, by recognizing the concept of motivation for the clinical education of nursing students, education authorities and decision-makers of universities and hospitals will be able to design and implement educational and managerial activities, so that suitable conditions could be provided to create motivation for clinical education in nursing students and professionals. The social conditions of the nursing profession and clinical environment have many complexities, which require a wide range of interventions and planning to increase and drive motivation in nursing students. It should be noted that the analysis of the concept is an inevitable process, and as long as knowledge and experiences are available, further development of a concept is essential.

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