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Student work and nursing student's performance during study Študentsko delo in uspešnost študentov zdravstvene nege v času študija

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Key words: factors contributing to student work; amount of student work; student financial position; nursing

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ABSTRACT

Introduction: According to different studies, student work has both positive and negative effects on the academic performance of nursing students. The purpose of the study was to examine the effect of student work based on a sample of Slovenian nursing students.

Methods: The method of non-experimental quantitative research with a sampling survey was used. 432 nursing students participated. The reliability of the questionnaire was determined by internal consistency analysis (from 0.608 to 0.753) and factor analysis. The data were collected in October and November 2012. Descriptive statistics, the chi-square test, correlation analysis and ANOVA were used for the statistical analysis.

Results: Students of four higher education institutions did not provide statistically significant differences in the assessment of their financial status ($p = 0.189$). The number of hours of student work does not statistically correlate ($p = 0.776$) with the time for studying. The monthly total of the hours of student work revealed a statistically significant difference ($p = 0.001$), with students at higher education institution A stating the least hours of student work ($\bar{x} = 19.9$), and students at higher education institution B stating the greatest amount of student work ($\bar{x} = 48.5$).

Discussion and conclusion: The monthly amount of hours of student work does not affect students' academic performance. Students opt for student work because they wish to acquire clinical experience, clinical practice, meet potential employers and improve their employment prospects after graduation.

IZVLEČEK

Uvod: Različne raziskave omenjajo tako pozitivne kot negativne učinke študentskega dela na uspešnost študentov zdravstvene nege pri študiju. Namen raziskave je bil proučiti učinek študentskega dela na vzorcu slovenskih študentov zdravstvene nege.

Metode: Uporabljena je bila metoda kvantitativnega neeksperimentalnega raziskovanja, podatki so bili zbrani s tehniko anketiranja. Sodelovalo je 432 študentov zdravstvene nege. Zanesljivost vprašalnika je bila ugotovljena z metodo analize notranje konzistentnosti (od 0,608 do 0,753) in s pomočjo faktorske analize. Podatki so bili zbrani oktobra in novembra 2012. Za statistično analizo je bila uporabljena opisna statistika, test hi – kvadrat, korelacijska analiza in ANOVA.

Rezultati: Študentje štirih vključenih visokošolskih zavodov niso navedli statistično pomembnih razlik v oceni finančnega statusa ($p = 0,189$). Obseg študentskega dela nima statistično pomembne povezave ($p = 0,776$) s časom za študij. V številu mesečnih ur študentskega dela se je pojavila statistično pomembna razlika ($p = 0,001$), kjer so študentje z visokošolskega zavoda A navedli najmanj ur študentskega dela ($\bar{x} = 19,9$), medtem ko so študenti visokošolskega zavoda B navedli največ ur študentskega dela ($\bar{x} = 48,5$).

Diskusija in zaključek: Mesečni obseg ur študentskega dela nima vpliva na uspešnost študentov pri študiju. Odločanje za študentsko delo temelji na izkušnjah iz klinične prakse, željah po pridobivanju kliničnih izkušenj, spoznavanju potencialnih delodajalcev in možnostih za zaposlitev po končani diplomi.

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Introduction

The main factor affecting young people's level of activity and position in the labour market include the duration and quality of their education. Ignjatović (2006) argues that this has to do with both the greater role of the state in promoting the education of the young and the greater ambition of the young and their parents, as they expect that investments in knowledge and higher education will result in a better position in the labour market and in society in general. The focus of higher education is on connecting student work and experience with learning targets (Salamonson & Andrew, 2006). The overhaul of the education system within the Bologna process has revealed tendencies to define a common concept of academic performance of nursing students and the factors that affect student performance (Dante, et al., 2011). While students opt to continue education at the tertiary level after finishing secondary education in great numbers, not everyone can obtain a scholarship or other funding, so they do student work, which is based on student work referrals provided by student employment agencies (Šušteršič, et al., 2010). Work can be brokered by organisations authorised by the Ministry of Labour, Family and Social Affairs that have a concession contract with the Ministry (Medjo, 2008). There has been an ongoing discussion about student work, which mostly refers to its economic effects. According to Blatnik (2007), student work is a special form of employment that is a characteristic of Slovenia and a major way of covering occasional inconsistencies in working processes in companies, as regular labour relationships are rather rigid.

Kerkvliet and Nowell (2005) analysed the theories about the causes of student absenteeism by focusing on students' social and economic background. They found that students with a lower social and economic status had a higher probability of interrupting their education. The second major determining factor was academic and social integration, which is defined as a student's identification with university, social and institutional norms during a course. According to review studies conducted between 1999 and 2011, the performance of nursing students is affected by demographic, academic, cognitive, behavioural and personality factors (Pitt, et al., 2012). McGann and Thompson (2008) also determined factors affecting the performance of students in higher years of study. The study focused on activities that are beneficial for student performances in the study process, and the impact of mentorship on student behaviour. Time management was found to be a major factor in student performance during studies. The period of studying in the home environment and participation at lectures strongly predict the performance of nursing students, while student work is a negative factor (Salamonson, et al., 2009). It is known that student work also affects

students' progress. According to data obtained in a research project (Šušteršič, et al., 2010) the rate of progress of Slovenian students is lowest in the first year, while differences between years are relatively small. Students that have performed over 16 hours of work per week reported lower academic achievements; in addition, the greater number of hours has a negative impact on other academic performance factors (Rochford, et al., 2009). According to Krajnc (2007), the pitfalls of student work include extending study time and loss of motivation to study if the work is attractive, while students report that performing student work enables them to support themselves while studying, acquire work experience and improve their position (travel, sociability). Unlike the previous *Evroštudent SI* study, the findings of *Evroštudent SI* study in 2010 identified several differences, including a lower percentage of students that view their income as acceptable, and a higher percentage of students that believe their income is low or unacceptable, which means that on average they had greater problems covering their expenses than in 2007.

According to national and international findings, nursing students perform student work while studying. *Evroštudent SI* study (2007) found that the share of Slovenian students performing paid work while studying totalled 65 %, of which 8 % worked for short time (up to five hours a week); the number was lower with regard to students studying within the Bologna system. According to *Evroštudent SI* (2010), on average, Slovenian students performed 17 hours of paid work a week, spent twenty-one hours a week attending lectures, and seventeen hours on individual student work. The students whose parents had lower qualifications spent significantly more time on student work and earned correspondingly more. According to *Evroštudent* study (2005), there was no difference among genders in the share of students performing student work. Similar shares of student work exist in Austria (67 %), Germany (66 %), Finland (65 %) and Ireland (69 %). Study based on a sample of 45 British nursing students reports that most students begin working in nursing on the basis of their previous work experience (Hasson, et al., 2013).

Real costs involved in acquiring the title of nursing graduate were already studied in 1972 (Palese, et al., 2012). According to the authors, nursing students and their families face difficult decisions regarding financial costs and time dedicated to studying nursing. A qualitative Australian paper reports similar results, as it identifies high financial costs of nursing students during studies along with increased debt, which has a negative impact on the health and general well-being of students (Wray & McCall, 2007). In Australia, 90 % of students are reported to perform student work while studying (Kenny, et al., 2012). Most nursing undergraduate students perform their student work in health facilities and the service industries (Phillips,

et al., 2012). Holmes (2008) argues that while student work enables nursing students to develop social and communication competences, the main reason for working is financial.

Another important aspect of student work is gaining practical experience. In Australia, there are special programmes that help nursing students find work during studies. There has been a growing interest in employing nursing students for various jobs by employers in the relevant sector (Kenny, et al., 2012). Some employers use employment modules that were first introduced in Canada and the USA to employ nursing graduates (Alsup, et al., 2006; Hoffart, et al., 2006). Models differ with regard to the duration of work during studies, which can be either part-time or full-time employment. Studies on student employment models report that student work has a positive impact on clinical experience and improves socialisation process in clinical environments (Gamroth, et al., 2006; Hoffart, et al., 2006; Rebesch & Aronson, 2009). According to the results of interviews on student work, nursing students were treated as equal colleagues, and had the same rights and duties as employees. Models have an impact on the employment of nursing students and strengthening the culture of learning. Student work is beneficial for students in terms of improving confidence, ability and effectiveness in clinical environment (Hasson, et al., 2013). In its recommendations for student work of undergraduate nursing students, the Australian senate promotes paid forms of fixed-term employment (Kenny, et al., 2012).

A large share of students has been found to perform jobs unrelated to their field of study. According to a survey on the work of students conducted by the National Unions of Students in Europe (ESIB, 2005), student work is generally not related to the field of study; this link exists only in Denmark. According to international findings, nursing students opt for student work of shorter duration in order to gain experience in a clinical environment (Hasson, et al., 2013).

Evrostudent study (2005) reports that 19 % of Slovenian full-time students dedicate up to 20 hours a week to course requirements, while 81 % dedicate over 20 hours. The student workload is greater only in three EU member states, particularly in Portugal, where as much as 95 % of the students dedicate over twenty hours a week to courses (lectures, tutorials). On average, students spend nineteen hours a week attending lectures and seminars, and further seventeen hours for individual studies. In addition, they spend nine hours on average doing paid work, which means that the total of working hours of an average student is fifty-two hours a week. Younger students spend more time on activities related to studies, and less on paid work. A greater total of hours of paid work does not affect the time dedicated to study as long as paid work does not exceed fifteen hours a week. Students with over fifteen hours of paid work commitments

reduce all study-related activities to twenty-eight hours a week, while spending thirty-four hours a week working on average.

Student work of nursing students in Slovenia has not been studied so far. Student work can have both a positive and negative impact on student performance. In addition to learning about nursing in clinical environments, understanding the economic environment of students, including the determining factors affecting the student work, is significant for understanding the academic performance of nursing students, as all studies show that the amount of student work strongly predicts academic performance.

Purpose and goal

The purpose of the study was to acquire data on the prevalence, content and significance of student work among nursing students in relation to academic performance. The goal of the study was to determine the opinions and views of the nursing students on student work and the significance of several factors that contribute to deciding for student work. We focused on several research questions, including:

- How do nursing students assess their financial position during studies?
- To what extent do nursing students perform student work during studies?
- Why do students opt for working during studies?
- What is the correlation between the time dedicated to study and the time dedicated to student work?
- What is the correlation between the student work and academic performance?

Methods

Quantitative non-experimental research data gathered by surveying was used.

Description of the instrument

Based on a review of domestic and international scientific and expert literature (Evrostudent, 2005; ESIB, 2005; Evrostudent SI, 2007; Blatnik, 2007; Rochford, et al., 2009; Evrostudent SI, 2010; Kosi, et al., 2010; Phillips, et al., 2012; Salamonson, et al., 2012) a structured measurement instrument was designed: a questionnaire for nursing students. The students completed their demographic information and wrote their opinions on student work. The questionnaire had 92 statements or questions. A written questionnaire was the selected surveying technique. There was a combination of questions and statements, and both open- and close-ended questions were used. Close-ended questions were asked in such a way so that the respondents circled one answer, while some questions offered several answers, which was appropriately explained in the instructions. The questionnaire also

included dichotomous question, where respondents could select either answer 1 (indicating 'yes') or answer 2 (indicating 'no'). They were also able to indicate their level of agreement according to a Likert scale, where 1 indicated 'I completely disagree' and 5 indicated 'I completely agree', while intermediate level corresponded to levels of agreement between the both ends. With regard to some statements, respondents ranged their answers according to significance on a scale from 1 to 8, where 1 was 'the most significant' and 8 'the least significant'. The reliability of the questionnaire was tested with internal consistency analysis, which is the most useful method of establishing reliability of an instrument (Cencič, 2009). Cronbach co-efficient alfa formula was used. The questionnaire was divided into different thematic parts. The result of the reliability test in the part 'reasons for student work' was 0.753. In addition, factor analysis was used, where the reason 'working habits' was attributed to two factors, explaining for 77.86 % and 22.14 % of the variance, respectively. Both factors were named 'the significance of working habits of nursing students'. Reliability with regard to the part 'amount of student work' was 0.714, while with regard to the 'differences in student work according to individual higher-education institutions' it was 0.608.

Description of the sample

A purposive sample was employed when selecting higher-education institutions: the relevant institutions were selected according to their position in different geographical regions of Slovenia. Four higher education institutions offering nursing courses were selected. In order to ensure anonymity, the names of the institutions are not given; they are rather marked with letters A, B, C and D. Students of the 1st, 2nd and 3rd years of full time study participated in the survey. A convenience sample of students was used, as only the students that were actually present in the higher education institutions during the survey were included. The total number of students enrolled in the four higher education institutions was 1151. To gather data, 544 questionnaires were distributed, of which

432 were returned, which is a 79.4 % realisation. The share of returned questionnaires according to higher education institutions is presented in Table 1. Nursing students were categorised according to their year of study. First-year students present the highest share (41.2 %), followed by second year students (30.1 %) and third year students with 28.7 %. The level of education of parents was also determined: 66 % of the students' parents completed secondary school, 16.3 % had primary school education, while a low share (10.5 %) of parents completed a higher education college or university (6.2 %), and a very low share (0.81 %) of parents had postgraduate degrees.

Description of the course of research and data processing

Agreement to conduct a survey among the students was obtained with official letters, which were sent to nursing departments of the higher education institutions in the first stage of research. After obtaining written permissions from the department heads, we determined the surveying dates with the help of student enrolment and administration offices. At higher education institution A, the surveying was conducted with the help of employees of the student enrolment and administration office between 1 and 25 October 2012. The surveying of students at higher education institution B was conducted with the help of an interviewer on 1 October 2012. The surveying of students at higher education institution C was conducted with the help of an interviewer before lectures on 19 October 2012. The surveying of students at higher education institution D was conducted with the help of the teaching staff between 8 October and 30 November 2012. All respondents were ensured anonymity before the survey and a possibility to reject participation.

Data was statistically processed with SPSS 16.0 software. Data was processed with descriptive statistics. Chi-square, correlation analysis and ANOVA variance analysis were used. Factor analysis was used to establish correlations between variables and determine the variable that was common to all. Differences were

Table 1: *The returned questionnaires from higher education institutions*
Tabela 1: *Vrnjeni vprašalniki po posameznih visokošolskih zavodih*

Higher education institution/ Visokošolski zavod	Number of distributed questionnaires (n)/ Število razdeljenih vprašalnikov (n)	Number of received questionnaires (n)/ Število prejetih vprašalnikov (n)	%
B	125	119	95,2
C	119	110	92,4
D	150	104	69,3
A	150	99	66
Total	544	432	79,4

Legend/Legenda: n – number/ število; % – percentage/odstotek

considered for statistically significant data where the level of statistical significance was 0.05 or less.

Results

Within the research, we wished to establish how nursing students in different higher education institutions assess their financial position and if there are differences between students of different institutions. We found that there are no statistically significant difference among nursing student of different institutions regarding their financial position ($F = 1.605, p = 0.189$). Most nursing students report that their financial position is good, i. e. 59.1 % of nursing students in higher education institution C, 65.7 % of nursing students in higher education institution A, 57.7 % of nursing students in higher education institution D and 54.6 % of nursing students in higher education institution B. The smallest share of students that assessed their financial position as very bad attended higher education institution A (2 %).

In addition to their financial position, we were interested in the amount of student work. Factor analysis was used for testing. In the first part, principle components method was used to create a new variable, i. e. 'job workload', which is a linear combination of three variables referring to the amount of work: the weekly, monthly and annual totals of working hours. Analysis of job workload impact revealed that the number of hours of student work can be presented with only one factor, i. e. monthly total of working hours, which contributes to 75.9 % variation of the factor. With ANOVA variation analysis we established that there was a statistically significant difference among students of different institutes in the monthly total of hours ($F = 5.546, p = 0.001$): students of higher education institution A report the least monthly hours of student work ($n = 99, \bar{x} = 19.9$), while students of higher education institution B report the highest monthly total of hours of student work ($n = 119, \bar{x} = 48.5$).

Reasons for student work of nursing students of individual higher education institutions were tested with chi-square. There are statistically significant differences among reasons for student work:

- own initiative ($\chi^2 = 17.007, p = 0.001$): among nursing students that opted for student work on their own or on their own initiative, the largest number of students are from higher institution D ($n = 87, 27.5\%$);
- clinical practice ($\chi^2 = 11.817, p = 0.008$): in total, 19 students of higher education institutions opted for student work due to clinical practice, of which 10 (52.6 %) were students of higher institutions D; the lowest number of students that opted for student work on the basis of clinical practice (5.3 %) attended higher institution A;
- gaining clinical experience ($\chi^2 = 11.599, p = 0.009$):

the highest number of students that opted for student work in order to gain clinical experience ($n = 21$) attended higher institution D, i. e. 36.8 % of all students whose reason for work was clinical experience, while the lowest number of these students attended higher institution A (14 %);

- meeting potential employers ($\chi^2 = 11.265, p = 0.010$): as much as 37 % of students that were motivated by this reason attended higher education institution D, while the lowest percentage were from higher education institution A (7.4 %);

- employment prospects after graduation ($\chi^2 = 9.774, p = 0.021$): the greatest percentage of students (37.1 %), whose reason for work was employment after graduation attended higher education institution D. There are no statistically significant differences in reasons for student work among nursing students of higher education institutions: family wishes ($\chi^2 = 1.309, p = 0.727$), recommendation of friends or colleagues ($\chi^2 = 1.842, p = 0.606$), advertisements for student work ($\chi^2 = 7.021, p = 0.071$).

Pearson correlation coefficient established no statistically significant correlation ($r = -0.014, p = 0.776$) between time dedicated to studies and job workload. We found that the greatest number of students (47.1 %) report that they dedicate between one and two hours a day to studying nursing, 27.2 % of students studied between 3 and 4 hours a day, 17.6 % of students studied over 6 hours and 8 % between 5 and 6 hours.

Table 2 presents correlation analysis of job workloads with performance parameters. We have found a statistically relevant correlation between actual amount of job workload and assessed burden of work ($r = -0.195, p = 0.026$). Correlation is weak and negative, which means that students that have greater job workload perceive it as less of a burden. There is no statistically significant correlation between job workload and assessment of obligations related to studies ($r = -0.026, p = 0.587$), average daily total of hours dedicated to study ($r = -0.014, p = 0.076$),

Table 2: *Correlation analysis of workloads with performance parameters*

Tabela 2: *Korelacijska analiza delovnih obremenitev s parametri uspešnosti*

Workloads/ Delovna obremenitev	r
Assessment of burden of work	-0.195**
Assessment of burden of study-related obligations	-0.026
Average daily total of hours dedicated to study	-0.014
Average mark achieved in passed exams	-0.006
Taking exams	0.054
Attendance at lectures	0.074

Legend/Legenda: r – the correlation coefficient/korelacijski koeficient; ** limit statistically significant value at $p = 0.01$ /mejna statistično pomembna vrednost pri $p = 0,01$

average mark achieved in passed exams ($r = 0.006$, $p = 0.909$), taking exams ($r = 0.054$, $p = 0.260$) and attendance at lectures ($r = 0.074$, $p = 0.125$).

Discussion

The results acquired from Slovenian nursing students can be interpreted via Eurostudent SI studies (Eurostudent, 2005; Eurostudent SI, 2007; 2010), which also studied students of other European countries. The conducted research reveals that nursing students of four higher education institutions offering nursing courses are satisfied with their financial position, as over a half indicate their financial position as good, which contradicts the Eurostudent SI study from 2010 that found that students were unhappy with their monthly income, regardless of whether they lived in their own households or with their parents. Data on the satisfaction with the financial status can also be supported with the data from the mentioned study (Eurostudent, 2005), which found that 34 % of all Slovenian students were satisfied with their financial position, while 25 % of students were less satisfied. This is an above-average level of satisfaction compared to other students in Europe, exceeded only by students in Spain, Finland and France. Based on the results on the level of satisfaction with financial position while studying nursing we can conclude that students are satisfied and do not have high financial costs, as there are no tuition fees. Higher education institutions are financed from the budget, i.e. from the funds earmarked for studies at the first and second levels of full-time study (Decree on Budgetary Financing of Higher Education Institutions and Other Institutions/Uredba o javnem financiranju visokošolskih zavodov in drugih zavodov, 2011).

We have established differences in the duration of student work among nursing student; with nursing students attending higher education institution A performing the least hours of student work, and the students of higher education institution B performing the most hours of student work. According to data from the Statistical Office of the Republic of Slovenia (2012), in November 2012, registered unemployment totalled 16.9 % in Pomurje region and 13.7 % in Podravje region, which is above national average. In Gorenjska region, the level of registered unemployment was low compared to other regions (9.2 %). Therefore, we have concluded that student work is a partial indicator of the labour market.

There are differences in the factors contributing to opting to work among the students. We have established that the greatest number of students studying at higher institution D opted for work on their own initiative on the basis of clinical practice, in order to acquire clinical experience, meet potential employers and improve employment prospects after graduation. Student work has been known to have a positive impact on finding the first job, which nursing students should be aware of during studies. According

to Phillips and colleagues (2012), financial security, acquiring clinical experience and meeting potential employers are important factors for nursing students. Student work brings significant experiences similar to clinical practice. Study conducted by Krajnc (2007) summarises most replies with the statement that student work does not bring concrete experience like student practice does; however, most experiences acquired during student work are valuable and beneficial for the students in their further career.

The conducted research has established no correlation between the time that nursing students of all higher-education institutions dedicate to their studies and the time dedicated to student work. Nursing students do not provide correlations between their job workload, assessment of study commitments, average daily total of hours dedicated to studying, average marks, taking exams and attendance at lectures. Almost half of the nursing students dedicate between one and two hours a day to studies, which was contributed to the academic timetable. Similar results were given by two Eurostudent studies (Eurostudent, 2005; Eurostudent SI, 2007), which found that 19 % of students dedicated up to 20 hours a week to study-related activities, while 81 % dedicated over 20 hours. Because nursing students in the conducted research performed between 19.9 and 48.5 hours of work per month, we can conclude that the amount does not affect performance parameters, as increasing the extent of job workload does not affect the time students spend on study-related activities, as long as the total of job commitments does not exceed 15 hours a week (Eurostudent, 2005). Students working over 20 hours a week broke the rules more often and suffered stress (Evans, et al., 2007). 20 hours of student work per week or less has negligible positive or negative impact on academic, psychological performance or behaviour of the young (Monahan, et al., 2011). A smaller share of British students found student work detrimental from the perspective of their professional role. According to findings, nursing students that performed student work wish that their acquired knowledge and experience were more recognised (Hasson, et al., 2013).

Acquired results provide an insight into the opinions of nursing students on academic performance and student work, which should be in the interest of relevant employers from the sector. We have established that further research is needed in the area of clinical practice of students that are in the 'transitional' period after completing their formal education and before starting their first job. The restrictions of the study should be considered, as the most motivated students participated, which is the effect of the convenience sample.

Conclusion

The results of the conducted research show that students of four higher education institutions offering

courses on nursing are satisfied with their financial position. According to students, there is a difference among the time spent on student work. Nursing students report that they have decided to work on their own initiative in order to acquire clinical experience, meet potential employers and employment prospects after graduation. They assessed there was no correlation between time dedicated to studying and student work nor the perceived burden of student work and academic obligations, average mark, taking exams and attendance at lectures.

Slovenian translation/Prevod v slovenščino

Uvod

Med dejavnike, ki bistveno vplivajo na stopnjo aktivnosti mladih in na njihov položaj na trgu delovne sile, spadata trajanje in kakovost izobraževanja. Ignjatović (2006) navaja, da gre po eni strani za povečano vlogo države pri spodbujanju izobraževanja mladih, po drugi strani pa za povečano ambicioznost samih mladih in njihovih staršev, saj pričakujejo, da jim bo vlaganje v več znanja in v višjo stopnjo izobrazbe zagotovilo boljši položaj na trgu delovne sile in v družbi na sploh. Poudarek visokošolskega izobraževanja je v povezovanju študentskega dela, študentskih izkušenj in učnih ciljev (Salamonson & Andrew, 2006). V okviru bolonjske prenovе se pojavljajo težnje za opredelitev skupnega koncepta akademske uspešnosti študentov zdravstvene nege ter tudi težnje za opredelitev dejavnikov, ki vplivajo na uspešnost študentov v času študija (Dante, et al., 2011). Znano je, da se veliko mladih po končanem srednješolskem izobraževanju odloča za študij, ker pa si nekateri ne morejo zagotoviti štipendije ali drugih virov denarne pomoči, se odločajo tudi za študentsko delo, ki se izvaja na podlagi študentskih napotnic oz. s posredovanjem študentskih servisov (Šušteršič, et al., 2010). Delo lahko posredujejo s strani Ministrstva za delo, družino in socialne zadeve pooblašcene organizacije, ki imajo z ministrstvom sklenjeno pogodbo o koncesiji (Medjo, 2008). V današnjem času je na temo študentskega dela precej razprav, ki se v glavnem nanašajo na ekonomske učinke tovrstnega dela. Blatnik (2007) navaja, da je študentsko delo kot posebna oblika zaposlitve značilno za Slovenijo in da je pomemben inštrument za pokrivanje občasnih neskladij v delovnih procesih podjetij, saj so v Sloveniji delovna razmerja togo urejena.

Kerkvliet in Nowell (2005) sta analizirala teorije, kjer so proučevali vzroke izostankov študentov od študija, pri čemer sta se osredotočila na socialno-ekonomsko ozadje študentov. Ugotovila sta, da je pri študentih s slabšim socialno-ekonomskim statusom večja verjetnost, da prekinejo proces študija. Kot drugo determinanto navajata pomembnost

akademske in socialne integracije, ki je definirana kot študentova identifikacija z univerzitetnimi, socialnimi in institucionalnimi normami v času študija. Pregledne raziskave med leti 1999 in 2011 navajajo, da na uspešnost študentov zdravstvene nege vplivajo demografski, akademski, kognitivni, vedenjski in osebnostni dejavniki (Pitt, et al., 2012). Tudi McGann in Thompson (2008) sta v raziskavi ugotavljali dejavnike, ki vplivajo na uspešnost študentov višjih letnikov. Raziskava je bila osredotočena na dejavnosti, ki študentu pripomorejo doseči uspeh v študijskem procesu, ter na vpliv mentorstva na vedenje študentov. Ugotovili sta, da je upravljanje s časom pomemben dejavnik za uspešnost študentov v času študija. Časovni obseg študija v domačem okolju ter udeležba na predavanjih sta močna napovedovalca uspešnosti študentov zdravstvene nege, medtem ko študentsko delo spada med negativne dejavnike (Salamonson, et al., 2009). Znano je tudi, da študentsko delo vpliva na prehodnost študentov, saj podatki raziskovalnega projekta (Šušteršič, et al., 2010) kažejo, da je pri slovenskih študentih stopnja prehoda najnižja po prvem letniku študija, vendar so razlike med letniki relativno majhne. Študentje, ki so opravili več kot šestnajst ur študentskega dela tedensko, so poročali o slabšem učnem uspehu, poleg tega pa je večje število opravljenih ur imelo negativen vpliv na ostale dejavnike uspešnosti študija (Rochford, et al., 2009). Krajnc (2007) med slabostmi študentskega dela navaja podaljševanje študija in izgubo motivacije za študij, v kolikor je študentsko delo atraktivno, navaja pa tudi, da se veliko študentov strinja, da opravlja študentsko delo zaradi omogočanja preživetja ob študiju, pridobivanja delovnih izkušenj in izboljšanja svojega študentskega položaja (potovanje, družabnost). Izsledki raziskave Evroštudent SI iz leta 2010 so v primerjavi s predhodno raziskavo Evroštudent SI iz leta 2007 opozorili na določene razlike, znižal se je npr. odstotek študentov, ki menijo, da imajo sprejemljive prihodke, kar močno pa se je povečal odstotek študentov, ki imajo nezadovoljive ali slabe prihodke, kar pomeni, da imajo študenti v povprečju večje težave s pokrivanjem stroškov kot v letu 2007.

Nacionalni in mednarodni dokazi kažejo, da se študenti zdravstvene nege v času študija srečajo s študentskim delom. Raziskava Evroštudent SI (2007) je pokazala, da znaša delež vseh slovenskih študentov, ki med študijem opravljajo plačano delo, 65 %; 8 % študentov opravlja dela krajši čas (do pet ur tedensko), pri študentih bolonjskega načina študija pa je ur študentskega dela manj. Raziskava Evroštudent SI (2010) je podala rezultate, da slovenski študenti v povprečju namenijo sedemnajst ur tedensko plačanemu delu, enaindvajset ur namenijo udeležbi na predavanjih ter sedemnajst ur individualnemu študentskemu delu. Tisti študentje, katerih starši imajo nižjo izobrazbo, za študentsko delo porabijo občutno več časa, primerno temu pa tudi več zaslužijo. Po

podatkih raziskave Evroštudent (2005) ni bilo opaziti razlike med spoloma v deležu študentov, ki opravljajo študentsko delo. Delež opravljanja študentskega dela, primerljiv s slovenskim deležem, dosegajo Avstrija (67 %), Nemčija (66 %), Finska (65 %) in Irska (69 %). Raziskava na vzorcu 45 britanskih študentov zdravstvene nege navaja, da večina študentov prične s študentskim delom v zdravstveni negi na osnovi predhodnih delovnih izkušenj (Hasson, et al., 2013).

Z dejanskim obsegom stroškov za pridobitev diplome za poklic diplomirana medicinska sestra so se pričeli ukvarjati že leta 1972 (Palese, et al., 2012). Avtorji navajajo, da se študenti zdravstvene nege ter njihove družine v času študija soočajo s težkimi odločitvami glede finančnih stroškov in časa, namenjenega študiju zdravstvene nege. Podobno poročajo tudi rezultati kvalitativne avstralske raziskave, ki navaja, da imajo študenti zdravstvene nege visoke finančne stroške v času študija, večajo se jim tudi javni dolgovi, kar ima negativen vpliv na zdravje in na splošno počutje študentov (Wray & McCall, 2007). V Avstraliji poročajo, da v času študija študentsko delo opravlja 90 % študentov (Kenny, et al., 2012). Večina dodiplomskih študentov zdravstvene nege v času študija opravlja študentsko delo v zdravstvenih zavodih ter v storitvenih dejavnostih (Phillips, et al., 2012). Holmes (2008) ugotavlja, da vpetost v študentsko delo študentu zdravstvene nege omogoča razvijanje socialnih in komunikacijskih kompetenc, vendar je pri študentih osnovni vzrok za študentsko delo finančne narave.

Drug pomemben vidik študentskega dela je pridobivanje praktičnih izkušenj. V Avstraliji imajo posebej izoblikovane programe, ki študentom zdravstvene nege pomagajo pri iskanju dela v času študija. Ugotovljeno je bilo, da pri delodajalcih s področja zdravstvene nege narašča zanimanje za različne oblike zaposlitev študentov zdravstvene nege (Kenny, et al., 2012). Nekateri delodajalci s področja zdravstvene nege se pri tem poslužujejo modelov zaposlovanja, ki so se sicer najprej pojavili v kanadskem in ameriškem prostoru predvsem zaradi potrebe po zaposlovanju diplomantov zdravstvene nege (Alsup, et al., 2006; Hoffart, et al., 2006). Modeli se razlikujejo po časovnem obsegu dela v času študija, ki je lahko v obliki krajšega delovnega časa ali polne zaposlitve. Izsledki raziskav o študentih, ki sodelujejo v modelih zaposlovanja, poročajo, da študentsko delo v času študija pozitivno vpliva na pridobivanje kliničnih izkušenj in izboljšuje proces socializacije študentov v kliničnih okoljih (Gamroth, et al., 2006; Hoffart, et al., 2006; Rebesch & Aronson, 2009). Kot navajajo rezultati intervjujev o delu študentov v času študija, so študenti zdravstvene nege v času študentskega dela obravnavani kot enakovredni člani, ki imajo iste pravice in dolžnosti kot zaposleni. Modeli imajo vpliv na zaposlovanje študentov zdravstvene nege in na krepitev kulture učenja. Študentsko delo je koristno za

študente z vidika krepitev samozaupanja, sposobnosti in učinkovitosti v kliničnem okolju (Hasson, et al., 2013). Avstralski senat v priporočilih za študentsko delo v zdravstveni negi pri študentih zdravstvene nege dodiplomskih programov spodbuja zagotavljanje plačljivih oblik zaposlitev za določen čas (Kenny, et al., 2012).

Ugotovljeno je, da visok delež študentov opravlja dela, ki niso povezana z njihovim študijem. Anketna raziskava o delu študentov, ki jo je izvedla Skupščina Zveze nacionalnih študentskih organizacij Evrope (ESIB, 2005), je ugotovila, da ni povezave med vrsto študija in študentskim delom, tovrstna povezava je bila ugotovljena samo na Danskem. Mednarodni dokazi kažejo, da se študenti zdravstvene nege z namenom pridobiti izkušnje v kliničnem okolju odločajo za študentsko delo v krajšem obsegu (Hasson, et al., 2013).

Raziskava Evroštudent (2005) je podala rezultate, da 19 % slovenskih študentov rednega študija študijskim obveznostim nameni do dvajset ur na teden, 81 % pa nad dvajset ur tedensko. Le v treh državah Evropske unije so študenti časovno še bolj obremenjeni kot pri nas, najbolj na Portugalskem, kjer jih kar 95 % za študij (predavanja, vaje) nameni več kot dvajset ur na teden. V povprečju študenti preživijo devetnajst ur tedensko na predavanjih in vajah, naslednjih sedemnajst ur pa jim vzame individualno študentsko delo. Ob tem namenijo devet ur tedensko plačanemu delu, skupaj torej traja delovnik povprečnega študenta dvainpetdeset ur tedensko. Mlajši študenti porabijo več časa za dejavnosti, povezane s študijem, manj pa za plačano delo. Povečevanje obsega delovnih obremenitev nima vpliva na čas, ki ga študenti namenijo študijskim aktivnostim, dokler obseg delovnih obveznosti ne preseže petnajst ur na teden. Pri študentih, ki delajo petnajst ur in več, se vse s študijem povezane aktivnosti zreducirajo na osemindvajset ur na teden, delovne pa trajajo v povprečju štiriintrideset ur.

Tematika študentskega dela v zdravstveni negi v slovenskem prostoru je neraziskana. Študentsko delo ima lahko v času študija pozitivne in negativne učinke na uspešnost študentov. Razumevanje študentskega ekonomskega okolja, vključno z determinantami, ki vplivajo na študentsko delo je poleg vpogleda v izvajanje zdravstvene nege v kliničnih okoljih pomembno za razumevanje uspešnosti študentov zdravstvene nege v času študija, saj raziskave o opravljanju študentskega dela ugotavljajo, da je obseg študentskega dela močan napovedovalec uspešnosti študija.

Namen in cilj

Namen raziskave je bil pridobiti podatke o razširjenosti, vsebini in pomenu študentskega dela pri študentih zdravstvene nege za uspešnost študija. Cilj raziskave je bil ugotoviti mnenja in stališča študentov zdravstvene nege o študentskem delu in ugotoviti

pomen nekaterih dejavnikov, ki pogojujejo odločanje za študentsko delo. V okviru raziskovalnih vprašanj nas je zanimalo:

- kako študenti zdravstvene nege ocenjujejo svoj finančni status v času študija;
- v kolikšnem obsegu študenti zdravstvene nege opravljajo študentsko delo v času študija;
- kaj so vzroki za študentsko delo v času študija;
- kakšna je povezava med časom, namenjenim študiju, in časom, namenjenim študentskemu delu;
- kakšna je povezanost med obremenitvijo s študentskim delom in študijsko uspešnostjo.

Metode

Uporabili smo kvantitativno neeksperimentalno raziskovanje, podatke smo zbirali s tehniko anketiranja.

Opis instrumenta

Na osnovi pregledane znanstvene in strokovne literature v domačem in v tujem prostoru (Evroštudent, 2005; ESIB, 2005; Evroštudent SI, 2007; Blatnik, 2007; Rochford, et al., 2009; Evroštudent SI, 2010; Kosi, et al., 2010; Phillips, et al., 2012; Salamonson, et al., 2012) smo izdelali strukturiran merski instrument – vprašalnik za študente zdravstvene nege. Študenti zdravstvene nege so v vprašalniku podali svoje demografske podatke ter mnenja in stališča do študentskega dela. Vprašalnik je vseboval 92 trditve oz. vprašanj. Kot tehniko zbiranja podatkov smo uporabili pisno anketiranje. Vprašanja oz. trditve so bile kombinirano sestavljene, pri čemer smo uporabili tip odprtih in zaprtih vprašanj. Vprašanja zaprtega tipa so bila postavljena tako, da so anketiranci obkrožili en odgovor; pri nekaterih vprašanjih je bilo možnih več odgovorov, kar je bilo v navodilih ustrezno pojasnjeno. Vprašalnik je vseboval tudi dihonomna vprašanja, pri katerih so anketiranci lahko obkrožili odgovor 1 (kar je pomenilo »da«) ali odgovor 2 (kar je pomenilo »ne«). Opredelili so se lahko tudi do trditve na lestvici Likertovega tipa, kjer je izbor 1 pomenil »nikakor se ne strinjam«, 5 »zelo se strinjam«, vmesne ocene pa so ustrezale vmesni stopnji strinjanja. Pri nekaterih trditvah so

anketiranci odgovore razvrščali po pomembnosti, v razponu od 1 do 8, pri čemer je 1 pomenilo »najbolj pomembno« in 8 »najmanj pomembno«. Zanesljivost vprašalnika smo preverjali z metodo analize notranje konsistentnosti, ki je tudi najbolj uporaben način ugotavljanja zanesljivosti instrumenta (Cencič, 2009). Uporabili smo formulo Cronbachov koeficient alfa. Vprašalnik smo razdelili po vsebinskih sklopih. Test zanesljivosti pri sklopu »vzroki za študentsko delo« je znašal 0,753. Uporabili smo tudi faktorsko analizo, kjer smo pri vzroku »delovne navade« prejeli dva faktorja, prvi faktor je pojasnjeval 77,86 % in drugi 22,14 % variance. Oba faktorja smo poimenovali »pomen delovnih navad študentov zdravstvene nege«. Test zanesljivosti je pri sklopu »obseg študentskega dela« znašal 0,714, pri sklopu »razlike v študentskem delu po posameznih visokošolskih zavodih« pa 0,608.

Opis vzorca

Pri izbiri visokošolskih zavodov smo uporabili namenski vzorec, ker smo visokošolske zavode s področja zdravstvene nege izbrali ciljno glede na njihovo regijsko umestitev, ki sega na področje različnih geografskih regij v Sloveniji. Vključili smo štiri visokošolske zavode s področja zdravstvene nege. Zaradi zagotavljanja anonimnosti visokošolskih zavodov v nadaljevanju članka ne prikazujemo imen visokošolskih zavodov, ampak jih označujemo s črkami A, B, C in D. V raziskavi so sodelovali študenti 1., 2. in 3. letnika rednega študija. Vzorec študentov je bil priročen, saj smo v izvedbo raziskave vključili tiste študente, ki so bili v času raziskave prisotni v visokošolskih zavodih. Celotna populacija vpisanih študentov v izbranih visokošolskih zavodih je štela 1151 študentov. Za izvedbo zbiranja podatkov smo razdelili 544 vprašalnikov, vrnjenih je bilo 432, kar predstavlja 79,4% realizacijo načrtovanega vzorca. Delež vrnjenih vprašalnikov po posameznih visokošolskih zavodih prikazujemo v Tabeli 1. Študente zdravstvene nege smo ločili tudi po letnikih študija. Največji delež študentov v raziskavi predstavljajo študenti 1. letnika (41,2 %), sledijo študenti 2. letnika (30,1 %) in nato študenti

Tabela 1: Vrnjeni vprašalniki po posameznih visokošolskih zavodih

Table 1: The returned questionnaires from higher education institutions

Visokošolski zavod/ Higher education institution	Število razdeljenih vprašalnikov (n)/ Number of distributed questionnaires (n)	Število prejetih vprašalnikov (n)/ Number of received questionnaires (n)	%
B	125	119	95,2
C	119	110	92,4
D	150	104	69,3
A	150	99	66
Skupaj	544	432	79,4

Legenda/Legend: n – število/number; % – odstotek/percentage

3. letnika, ki predstavljajo 28,7 % vseh študentov v vseh sodelujočih visokošolskih zavodih s področja zdravstvene nege. Ugotavljali smo tudi izobrazbeno strukturo staršev študentov in ugotovili, da ima 66 % staršev srednješolsko izobrazbo, 16,3 % osnovnošolsko izobrazbo, nizek delež (10,5 %) predstavljajo starši z višješolsko izobrazbo in starši z visoko strokovno izobrazbo (6,2 %), zelo nizek delež (0,81 %) staršev anketirancev ima zaključen magistririj ali doktorat.

Opis poteka raziskave in obdelave podatkov

Dogovori o poteku raziskave za anketiranje študentov zdravstvene nege so potekali v obliki uradnih pismov, ki smo jih v prvi fazi raziskave poslali na Katedre za zdravstveno nego visokošolskih zavodov. Po prejemu pismen dovoljenju s strani predstojnic kateder za zdravstveno nego smo s pomočjo referatov za študijske in študentske zadeve pridobili datume za anketiranje študentov zdravstvene nege po posameznih letnikih. Na visokoškolskem zavodu A smo anketiranje študentov izvedli s pomočjo zaposlenih v referatu za študijske in študentske zadeve, in sicer v času 1.–25. 10. 2012. Anketiranje študentov visokošolskega zavoda B smo izvedli s pomočjo anketarja raziskave, 1. 10. 2012. Anketiranje na visokoškolskem zavodu C smo izvedli s pomočjo anketarja raziskave v času pred predavanji, 19. 10. 2012. Na visokoškolskem zavodu D smo anketiranje študentov zdravstvene nege izvedli s pomočjo zaposlenih pedagoških delavcev, 8. 10.–30. 11. 2012. Vsem anketirancem smo pred izvedbo raziskave zagotovili anonimnost in možnost zavrnitve sodelovanja v raziskavi.

Statistično obdelavo podatkov smo izvedli s programom SPSS 16.0. Podatke smo obdelali s pomočjo opisne statistike. Uporabili smo hi – kvadrat, korelacijsko analizo in analizo variance – ANOVA. Z metodo faktorske analize smo ugotovili povezave med spremenljivkami, in tako pridobili spremenljivko, ki je predstavljala to, kar je bilo skupnega vsem opazovanim spremenljivkam. Za statistično pomembne podatke smo upoštevali razlike, kjer je bila stopnja statistične pomembnosti na ravni 0,05 ali manj.

Rezultati

V okviru raziskave smo želeli ugotoviti, kako študenti zdravstvene nege po posameznih visokošolskih zavodih ocenjujejo svoj finančni status in ali se pri tem pri študentih pojavljajo razlike glede na posamezne visokošolske zavode. Ugotovili smo, da v oceni lastnega finančnega statusa študentov zdravstvene nege po posameznih visokošolskih zavodih ni statistično pomembnih razlik ($F = 1,605$, $p = 0,189$). Največ študentov zdravstvene nege navaja, da je njihov finančni status dober, in sicer 59,1 % študentov zdravstvene nege visokošolskega zavoda C, 65,7 % študentov visokošolskega zavoda A, 57,7 % študentov

visokošolskega zavoda D in 54,6 % študentov visokošolskega zavoda B. Da je njihov finančni status zelo slab, v najmanjšem deležu ocenjujejo študenti visokošolskega zavoda A (2 %).

Poleg finančnega statusa nas je v okviru raziskave zanimal tudi obseg študentskega dela. Za testiranje smo uporabili faktorsko analizo. V prvem delu smo z metodo glavnih komponent ustvarili novo spremenljivko, tj. »obremenitev s študentskim delom«, ki je linearna kombinacija treh spremenljivk, ki se nanašajo na obseg dela: število delovnih ur na teden, število delovnih ur na mesec in število delovnih ur na leto. Analiza vpliva delovnih obremenitev je pokazala, da lahko število ur študentskega dela prikažemo le z enim faktorjem, tj. s številom delovnih ur študentskega dela na mesec, kar pojasnjuje 75,9 % variance faktorja. S pomočjo analize variance – ANOVA, smo ugotovili, da med študenti različnih zavodov obstaja statistično pomembna razlika v številu mesečnih ur študentskega dela ($F = 5,546$, $p = 0,001$): študentje visokošolskega zavoda A navajajo najmanj mesečnih ur študentskega dela ($n = 99$, $\bar{x} = 19,9$), študenti visokošolskega zavoda B navajajo največ mesečnih ur študentskega dela ($n = 119$, $\bar{x} = 48,5$).

Vzroke za študentsko delo pri študentih zdravstvene nege med posameznimi visokošolskimi zavodi smo testirali s pomočjo hi – kvadrat. Med študenti različnih visokošolskih zavodov smo ugotovili statistično pomembne razlike pri vzrokih za odločanje za študentsko delo:

- lastna iniciativa ($\chi^2 = 17,007$, $p = 0,001$): med študenti zdravstvene nege, ki so se za študentsko delo odločili sami oz. na lastno iniciativo, je največ študentov z visokošolskega zavoda D ($n = 87$, 27,5 %);
- klinična praksa ($\chi^2 = 11,817$, $p = 0,008$): 19 študentov vseh visokošolskih zavodov se je za študentsko delo odločilo na osnovi klinične prakse, od tega je 10 študentov (52,6 %) z visokošolskega zavoda D; najmanj študentov, ki so se za študentsko delo odločili na osnovi klinične prakse (5,3 %), je z visokošolskega zavoda A;
- pridobivanje kliničnih izkušenj ($\chi^2 = 11,599$, $p = 0,009$): za študentsko delo se je zaradi pridobivanja kliničnih izkušenj ($n = 21$) odločilo največ študentov z visokošolskega zavoda D, in sicer je le-teh 36,8 % vseh študentov, ki so se odločili za delo iz tega vzroka; izmed vseh visokošolskih zavodov je najmanj študentov, ki so se odločili za študentsko delo na podlagi pridobivanja kliničnih izkušenj, z visokošolskega zavoda A (14 %);
- spoznavanje potencialnih delodajalcev ($\chi^2 = 11,265$, $p = 0,010$): kar 37 % študentov, ki so se za študentsko delo odločili iz tega razloga, je z visokošolskega zavoda D, najmanj jih je z zavoda A (7,4 %);
- možnosti zaposlitve po končani diplomii ($\chi^2 = 9,774$, $p = 0,021$): največ študentov (37,1 %), ki so se za študentsko delo odločili zaradi zaposlitve po diplomii, je z visokošolskega zavoda D.

Statistično pomembnih razlik v odločanju za študentsko delo med študenti zdravstvene nege med posameznimi visokošolskimi zavodi ni pri naslednjih vzrokih: na željo domačih ($\chi^2 = 1,309$, $p = 0,727$), na priporočilo prijateljev in sošolcev ($\chi^2 = 1,842$, $p = 0,606$), zaradi razpisov za študentsko delo ($\chi^2 = 7,021$, $p = 0,071$).

S pomočjo Pearsonovega koeficienta korelacije ugotovimo, da ni statistično pomembne povezave ($r = -0,014$, $p = 0,776$) med časom, ki ga študenti posvetijo študiju, in delovno obremenitvijo v času študentskega dela. Ugotovili smo, da največ študentov (47,1 %) navaja, da študiju zdravstvene nege nameni 1–2 uri dnevno, 27,2 % študentov dnevno študira 3–4 ure, 17,6 % jih dnevno študira več kot 6 ur in 8 % 5–6 ur.

V Tabeli 2 prikazujemo korelacijsko analizo delovnih obremenitev s parametri uspešnosti pri študentih. Ugotavljamo, da obstaja statistično značilna povezava med dejanskimi delovnimi obremenitvami študentov in oceno obremenitev s študentskim delom ($r = -0,195$, $p = 0,026$). Korelacija je šibka in negativna, kar pomeni, da študenti, ki so bolj obremenjeni s študentskim delom, svoje obremenitve ocenjujejo za manj obremenjujoče. Statistično pomembne povezave ni med delovnimi obremenitvami in oceno študijskih obveznosti ($r = -0,026$, $p = 0,587$), povprečnim številom dnevnih ur študija ($r = -0,014$, $p = 0,076$); povprečno oceno opravljenih izpitov ($r = 0,006$, $p = 0,909$), pristopom k izpitom ($r = 0,054$, $p = 0,260$) in udeležbo na predavanjih ($r = 0,074$, $p = 0,125$).

Tabela 2: *Korelacijska analiza delovnih obremenitev s parametri uspešnosti*

Table 2: *Correlation analysis of workloads with performance parameters*

Delovna obremenitev/ Workloads	<i>r</i>
Ocena obremenitev s študentskim delom	-0,195**
Ocena obremenitev s študijskimi obveznostmi	-0,026
Povprečno število ur študija dnevno	-0,014
Povprečna ocena opravljenih izpitov	-0,006
Pristop k izpitom	0,054
Udeležba na predavanjih	0,074

Legenda/Legend: *r* – korelacijski koeficient/the correlation coefficient; **mejna statistično pomembna vrednost pri $p = 0,01$ /limit statistically significant value at $p = 0.01$

Diskusija

Rezultate slovenskih študentov zdravstvene nege lahko razlagamo z raziskavami Evroštudent SI (Evroštudent, 2005; Evroštudent SI, 2007; 2010), ki poleg slovenskih študentov proučujejo tudi študente drugih držav v Evropi. Z izvedeno raziskavo smo ugotovili, da so študentje zdravstvene nege v štirih visokošolskih zavodih v Sloveniji zadovoljni s

svojim finančnim statusom, saj se je več kot polovica študentov opredelila, da je njihov finančni status dober, kar je v nasprotju z raziskavo Evroštudent SI iz leta 2010, ki je ugotovila, da študenti niso zadovoljni s svojim mesečnim prihodkom, ki je neodvisen od tega, ali so študenti v času študija v lastnem gospodinjstvu ali pri starših. Pridobljene podatke o zadovoljstvu študentov zdravstvene nege s finančnim statusom lahko podpremo tudi s podatki omenjene raziskave (Evroštudent, 2005), ki je ugotovila, da je bilo 34 % vseh slovenskih študentov zadovoljnih s svojim finančnim statusom, manj zadovoljnih je bilo 25 % študentov, kar je torej slovenske študente uvrščalo med tiste študente v Evropi, ki so bili bolj zadovoljni, prekašali so jih le kolegi iz Španije, Finske in Francije. Na osnovi rezultatov o zadovoljstvu s finančnim statusom v času študija zdravstvene nege lahko sklepamo, da so študenti zadovoljni, da ne utrpijo visokih finančnih stroškov, saj za izvajanje rednega študija študenti oz. njihovi starši ne plačujejo šolnine. Visokošolskim zavodom se iz proračuna dodeljujejo sredstva za študijsko dejavnost za prvo in drugo stopnjo rednega študija (Uredba o javnem financiranju visokošolskih zavodov in drugih zavodov, 2011).

Ugotovili smo, da med študenti zdravstvene nege v vseh visokošolskih zavodih obstaja razlika v časovnem obsegu študentskega dela, pri čemer najmanj ur študentskega dela izvedejo študenti zdravstvene nege visokošolskega zavoda A in največ študenti visokošolskega zavoda B. Po podatkih Statističnega urada Republike Slovenije (2012) je novembra 2012 v pomurski regiji stopnja registrirane brezposelnosti znašala 16,9 % in v podravski regiji 13,7 %, kar je nad slovenskim povprečjem. Stopnja registrirane brezposelnosti je bila v gorenjski regiji v primerjavi z drugimi regijami nizka (9,2 %). Sklepamo torej, da študentsko delo lahko deloma predstavlja kazalnik trga dela.

Med študenti zdravstvene nege obstajajo razlike v odločilnih dejavnikih za opravljanje študentskega dela. Ugotovili smo, da se je največ študentov visokošolskega zavoda D odločilo za študentsko delo na lastno pobudo, na osnovi klinične prakse, zaradi pridobivanja kliničnih izkušenj, spoznavanja potencialnih delodajalcev in zaradi možnosti za zaposlitev po diplomi. Znano je, da študentsko delo pozitivno vpliva na iskanje prve zaposlitve, česar se morajo študenti zdravstvene nege zavedati že v času študija. Finančna varnost, pridobivanje kliničnih izkušenj, spoznavanje potencialnih delodajalcev so, kot navaja Phillips s sodelavci (2012), pomembni dejavniki za študente zdravstvene nege. Študentsko delo prinaša pomembne izkušnje, ki so podobne klinični praksi. Raziskava Krajnc (2007) večino odgovorov strni v trditev, da študentsko delo ne prinaša konkretnih izkušenj kot študijska praksa, je pa večina izkušenj, pridobljenih pri študentskem delu, dragocena in študentom v prid pri njihovi nadaljnji poklicni karieri.

V izvedeni raziskavi smo ugotovili, da ni povezave med časom, ki ga študenti zdravstvene nege vseh visokošolskih zavodov namenijo študiju, in časom, ki je namenjen študentskemu delu. Študenti zdravstvene nege ne navajajo povezav med obremenitvami s študentskim delom, oceno študijskih obveznosti, povprečnim dnevnim številom ur študija, povprečno oceno opravljenih izpitov, pristopom k opravljanju izpitov in udeležbo na predavanjih. Skoraj polovica študentov zdravstvene nege študiju povprečno namenja eno do dve uri na dan, kar lahko deloma pripišemo samemu študijskemu urniku. Podobno ugotavljata dve raziskavi Evroštudent (Evroštudent, 2005; Evroštudent SI, 2007), ki navajata, da 19 % študentov v povprečju porabi do 20 ur na teden za študijske aktivnosti, 81 % študentov pa nad 20 ur. Ker študenti zdravstvene nege v izvedeni raziskavi izvedejo od 19,9 do 48,5 ur študentskega dela mesečno, lahko sklepamo, da omenjeni obseg ne vpliva na parametre uspešnosti, saj je bilo ugotovljeno, da povečevanje obsega delovnih obremenitev nima vpliva na čas, ki ga študenti namenijo študijskim aktivnostim, vse dokler obseg delovnih obveznosti ne preseže 15 ur na teden (Evroštudent, 2005). Študenti, ki so bili zaposleni več kot 20 ur tedensko, so bili bolj pogosto v prestopniških dejanjih in so pogosto utrpeli stres (Evans, et al., 2007). Obseg 20 ur študentskega dela na teden ali manj ima zanemarljive pozitivne in negativne posledice na akademske, psihološke ali vedenjske rezultate mladih (Monahan, et al., 2011). Manjši delež britanskih študentov je študentsko delo zaznal kot škodljivo z vidika profesionalne vloge. Ugotovitve so pokazale, da si študenti zdravstvene nege, ki so opravljali študentsko delo, želijo več priznavanja pridobljenih izkušenj in znanj (Hasson, et al., 2013).

Pridobljeni rezultati raziskave dajejo vpogled v mnenja študentov zdravstvene nege o uspešnosti študija in študentskem delu, kar naj bi bilo tudi v interesu delodajalcev s področja zdravstvene nege. Ugotavljamo, da je potrebna nadaljnja raziskava na področju klinične prakse študentov, ki se nahajajo v »prehodnem« obdobju oz. v obdobju po končanem formalnem izobraževanju, tj. pred prvo zaposlitvijo. Upoštevati je potrebno omejitve raziskave, ki se kažejo predvsem v pridobitvi najbolj motiviranih študentov zdravstvene nege za sodelovanje v raziskavi, kar je posledica nenaključnega vzorčenja.

Zaključek

Izvedena raziskava je podala rezultate, da so študenti zdravstvene nege v štirih visokošolskih zavodih zadovoljni s svojim finančnim statusom v času študija. Med posameznimi visokošolskimi zavodi se je po navedbah študentov zdravstvene nege pojavila razlika v časovnem obsegu študentskega dela. Študenti zdravstvene nege so navedli, da so se za študentsko delo odločili sami, na osnovi klinične prakse, zaradi

želje po pridobivanju kliničnih izkušenj, spoznavanja potencialnih delodajalcev in zaradi možnosti za zaposlitev po končani diplomii. Ocenili so, da ni povezave med časom namenjenim študiju in časom, ki je namenjen študentskemu delu, prav tako ne med obremenitvami s študentskim delom in oceno študijskih obveznosti, povprečno oceno opravljenih izpitov, pristopov k opravljanju izpitov in udeležbo na predavanjih.

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Popravek/Errata corrige

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