



Research Article

Clarifying Challenges and Exploring Learning Needs of Novice Nurses in Cambodia

Yayoi Shoji^{1,2*}, Junko Tashiro³, Mayuko Nakano⁴, Manabu Okawada⁴

¹Public Health Unit, Global Cooperation Institute for Sustainable Cities, Yokohama City University,

²Doctor's Course, Graduate School of Health Care and Nursing, Juntendo University,

³Graduate School of Health and Welfare in Nursing, Graduate School of International University of Health and Welfare,

⁴Sunrise Japan Hospital Phnom Penh, Cambodia

Received May 30, 2024; revised June 20, 2024; accepted June 30, 2024

ABSTRACT

Introduction

While the Cambodian healthcare system is continually improving, nursing services have not yet been firmly established, and there are no reports on in-service education, specifically for novice nurses. This literature gap in nursing education is a significant challenge that must be addressed to enhance the quality of healthcare services in Cambodia. Therefore, this study aimed to clarify the challenges and explore the learning needs of novice nurses in Cambodia.

Methods

This study adopted a qualitative descriptive research design and followed the Consolidated Criteria for Reporting Qualitative Research (COREQ) guidelines, which provided transparency and enhanced the credibility of the findings. Semi-structured interviews were conducted with 11 novice Cambodian nurses. The obtained data were analyzed using thematic analysis, which involved coding the data, identifying patterns, and developing themes to understand participants' experiences.

Results

Eleven nurses participated in the interviews. The analysis resulted in 5 categories, 18 subcategories, and 69 codes being extracted. Study participants reported experiencing difficulties related to flexibility in handling many tasks and providing patient-centered care. Additionally, participants expressed some satisfaction with the current educational program but wanted to gain practical disease and treatment knowledge. This suggested a need for educational programs that enabled nurses to improve their skills in responding flexibly and delivering patient-centered healthcare in clinical settings. Furthermore, in addition to educating healthcare professionals, patient education is also important and may require novice nurses to acquire knowledge on how to improve patient self-management skills.

Conclusion

The challenges faced by novice nurses in Cambodia indicate gaps between the ideals learned during education and daily practice, and their learning needs centered around bridging the gap between ideals and reality.

*Corresponding author: Yayoi SHOJI, Email: shoji.yay.du@yokohama-cu.ac.jp

Citation: Shoji Y, Tashiro J, Nakano M, Okawada M. Clarifying Challenges and Exploring Learning Needs of Novice Nurses in Cambodia, *CJPH* (2024) 05:04

© 2024 Cambodia Journal of Public Health. All rights reserved

Keywords: Cambodia, novice nurses, qualitative research, learning needs

Introduction

Cambodia became a French colony in 1863 and gained independence in 1953. Subsequently, the Khmer Rouge civil war of 1975-1978 significantly impacted the country's infrastructure, including transportation, water, and electricity, and the entire healthcare system was destroyed (1). The intellectual class was massacred, and medical care was severely damaged (2). More than three million Cambodians died in the civil war, and it is reported that at the end of the war, there were only 50 doctors left in the country as of 1979 (3). However, literature explicitly addressing the number of nurses during that period is lacking. The medical sector, which once collapsed, has been improving in both the medical system and the nursing field, partly with assistance from other countries.

With the establishment of the Cambodian Nurses Council in 2007 and the introduction of a fourth-year bachelor's degree nursing curriculum in 2008, the nursing system is gradually improving. According to the List of Number of Recognized Training Nursing Institutions in Cambodia by the Cambodian Council of Nurses (CCN) (4) and previous studies (5), there are five national and eight private nursing schools. However, the latest information could not be found.

As of December 2015, there are 102 referral hospitals (RHs) in the country, including 9 national hospitals, 25 municipal and state RHs, and 68 district RHs (6). Meanwhile, according to World Bank Open Data, the number of nurses in Cambodia is 1.0 per 1,000 people (2019), compared to 1.2 in Laos (2022), 1.4 in Vietnam (2016), 3.2 in Thailand (2019), and 11.9 in Japan (2018) (7). Thus, the overwhelming shortage of nurses is a severe concern compared to neighboring Southeast Asian countries (8).

Globally, there is a severe shortage of nurses, and in Cambodia, a shortage of 10,000 to 20,000 nurses is projected by 2030 (9). Novice nurses are often expected to be immediately effective at work from the initial period. However, this expectation can lead to stress, burnout, and turnover among novice nurses (10). It is critical to accurately understand the learning needs of novice nurses and provide them with an environment that will enable them to continue their professional lives as nurses. In this study, novice nurses are defined as nurses with less than two years of work experience. This study aimed to clarify the challenges and explore the learning needs of novice nurses in Cambodia.

Methods

Research design

This study employed a qualitative descriptive study design using the Consolidated Criteria for Reporting Qualitative Research (COREQ) guidelines (11). This design was used to ensure rigorous methodological transparency, respect for participants' perspectives, and research duplication. Further, this approach helps grasp the learning needs of freshman nurses in Cambodia. By clarifying the narratives of participants and focusing on their experiences and opinions, a deeper understanding of their needs can be achieved. Adhering to COREQ's detailed reporting facilitated the potential duplication of other studies, contributing to the advancement of knowledge in the nursing field. As a result, the study's credibility is enhanced, and this research report can provide valuable insights.

Participants and setting

This research targeted novice nurses or interns within a Cambodian hospital affiliated with a Japanese institution. Eligible participants were those employed between June 2021 and October 2021 and actively engaged in their roles. Only participants meeting the study aims were selected. No departmental restrictions were imposed to comprehensively capture the learning needs of novice nurses in Cambodia, which was ensured by selecting participants from various hospital units, including outpatient departments, wards, operating rooms, and emergency departments or intensive care units. Although the criteria for study participants were set at the time of designing this study as novice nurses and interns, one nursing professional with three years of work experience was also interviewed because of the way the interview participants were introduced through the kinship method. In Cambodia, due to the widespread coronavirus disease 2019 pandemic, the national licensing exam was not conducted, resulting in graduates of nursing schools who had not yet passed the exam working as interns within hospitals. For this study, these interns were included as participants to ensure a comprehensive representation of healthcare professionals within the hospital setting during this period.

Language proficiency was a crucial aspect of participant eligibility, with individuals required to communicate fluently in either English or Khmer (Cambodian language) during the interview process. All interviews were conducted by the first author (female), a master's student, with one interpreter present who spoke Japanese and Khmer. The initial

greetings were conducted in English, followed by interviews conducted with the assistance of an interpreter proficient in Khmer and Japanese. The interpreter, who graduated from the Japanese language department of a Cambodian university, has been engaged in interpretation work for Khmer and Japanese, ensuring a certain level of quality in the interpretation process. To mitigate potential bias and maintain the objectivity and impartiality of the study, individuals with a close personal relationship with the interviewer, such as relatives or close friends, were excluded.

Furthermore, participants whose experience level or professional background, such as highly experienced nurses or professionals from other healthcare disciplines, did not align with the research objectives were excluded, as the study specifically focused on the experiences of novice nurses and interns within the defined context. In addition, we aimed for a sample size of approximately 10 participants, as suggested by a systematic review on data saturation in qualitative interview studies (12). Data was collected until saturation was reached, which occurred at 11 participants. At this point, no new themes or insights were emerging from the interviews, indicating sufficient data to understand novice nurses' experiences and perspectives comprehensively.

Data collection

Semi-structured interviews were conducted with novice Cambodian nurses, facilitated by the assistance of an interpreter. Verbal and written consent to participate in this study was obtained prior to the start of the interviews. The interview questions, informed by prior research, comprised eight questions designed to elicit comprehensive insights into the experiences and perspectives of the participants. The eight questions include inquiries regarding what led them to become a nurse, their most memorable nursing tasks, reality shocks encountered in the workplace, desired future educational programs in the workplace, and future career plans as a nurse. Questions were provided to the participants in advance. The questions were pilot-tested with nurses who were not included in the current study to ensure that they were not difficult to answer. The interviews were conducted using an online video call tool. The nurses were interviewed in a conference room in the hospital where they worked, where their privacy was protected. Interviews were recorded with the consent of the participants. Data were collected from June to October 2021.

Data analysis

Excel was used for data management and analyses. First, the entire verbatim transcript was carefully read

to understand the overall semantic content of the participants' narratives. Second, the verbatim transcripts were separated and coded to ensure they did not contain more than two meanings. Individual codes were classified according to similarities and differences, and groups of codes with the same meaning were created; each group was given a title that best represented the meaning and then designated as a subcategory. These subcategories were further grouped according to their semantic content and designated as categories. To ensure a comprehensive understanding of the participants' experiences, multiple data sources, including interviews and observation notes, were utilized for triangulation. To enhance the findings' reliability, member checks were conducted with study collaborators. Throughout the research process, regular debriefing sessions were held with supervisors experienced in qualitative research methodologies. These sessions provided critical feedback and helped refine the analytical approach. Data saturation was achieved by continuing interviews until no new themes emerged, which was essential for capturing the full diversity of novice nurses' experiences and perspectives. Figure 1 illustrates the relationships between the categories. Supervisors familiar with this research methodology and saturation were identified. The results of this study were presented to some participants.

Ethical considerations

This study was approved by the Ethics Committee of the International University of Health and Welfare on May 6, 2021 (Approval No. 20-Ig-166-2). Additionally, it was approved by the Ethics Committee of Sunrise Hospital, this study's collaborating research partner, on April 27, 2021 (Approval No. 21-001). All participants received information statements and provided written informed consent before the interviews. Identifying details were removed during transcription to ensure confidentiality. The data were stored on a secure drive accessible only to the research team.

Results

The study included 11 participants (Table 1). The analysis resulted in 5 categories, 18 subcategories, and 69 codes being extracted. The experiences and challenges faced by novice nurses in their daily tasks were characterized by the "gap between the ideals learned during training and daily practice." Novice nurses felt a "lack of recognition for the nursing profession" concerning Cambodia's current situation. Their desired learning needs were to "bridge the gap between ideals and reality." The motivation to become a nurse stemmed from the desire to "help others," and their envisioned future was to "become a nurse who

can contribute to the nursing field in Cambodia” (Figure 1).

Table 1: Participant characteristics

	Age (years)	Sex	Place of work	Times in hr interviewed	Years of experience
Participant 1	30s	F	Outpatient	2	1
Participant 2	20s	M	Outpatient	2	Intern
Participant 3	20s	F	Ward	2	2
Participant 4	20s	F	Ward	2	Intern
Participant 5	20s	F	Outpatient	2	Intern
Participant 6	20s	M	Outpatient	1	3
Participant 7	20s	F	Operating room	2	Intern
Participant 8	20s	F	ER/ICU	2	2
Participant 9	20s	F	Ward	2	2
Participant 10	20s	F	ER/ICU	1	Intern
Participant 11	20s	F	ER/ICU	2	2

Motivation to become a nurse

The motivation behind novice Cambodian nurses was the “want to help others.” This motivation encompassed “A spirit of helping others since childhood” and was influenced by “Family and personal experience of being hospitalized.” It involved “Feeling that patients are like family” and “Liking caring for people.” According to participants:

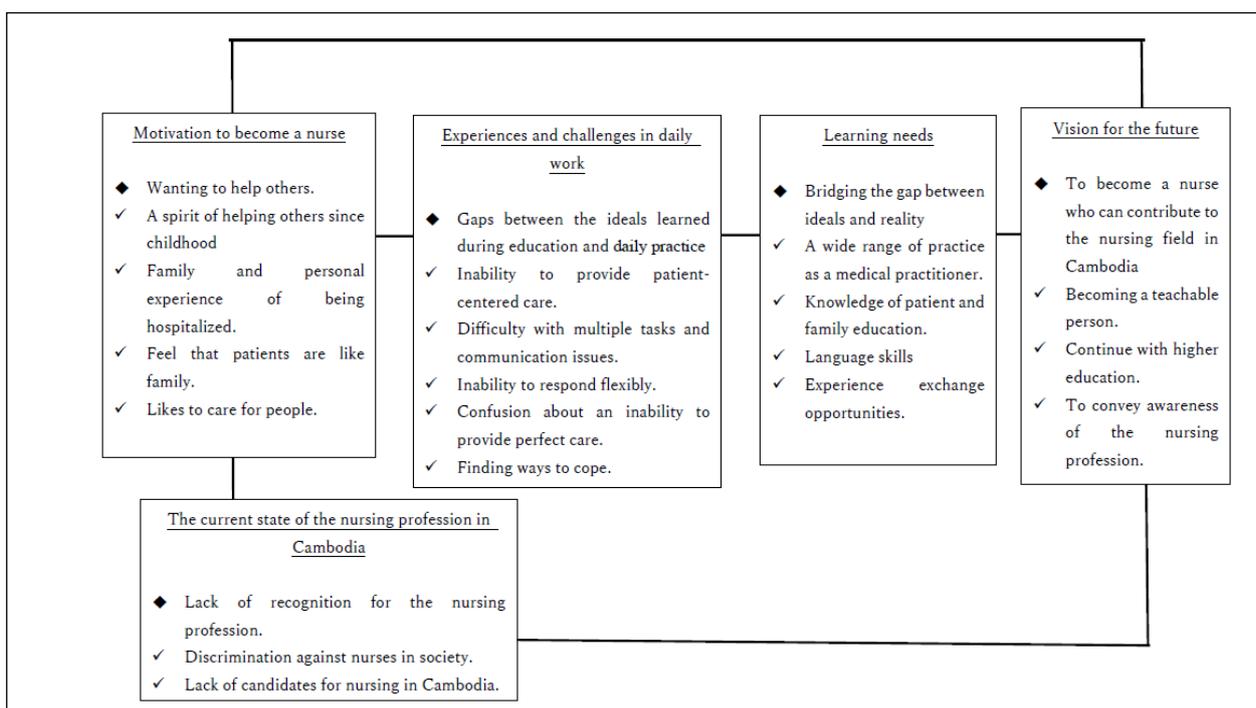
“In brief, I was helped by those around me while I studied; for instance, my teachers fed me while I studied, allowing me to complete this course of study. I believe that by taking care of others, I can return the favor.”

“Because nurses care for patients and doctors treat patients, nurses treat patients in their care like relatives.”

Experiences and challenges in daily work

It was revealed that novice Cambodian nurses experienced “Gaps between the ideals learned during their education and in daily practice.” Novice nurses confronted the reality of their “Inability to provide patient-centered care” and faced challenges such as “Difficulty with multiple tasks and communication issues” and “Inability to respond flexibly.” They were feeling “Confusion about an inability to provide perfect care.” Despite such situations, novice nurses actively approached their daily tasks by “Finding ways to cope.” According to participants:

Figure 1: Conceptual diagram of the learning needs of novice nurses in Cambodia



“We care about our patients, so we should not keep them waiting because they are all sick and worried.”

“When I actually do my job, patients are patients, and they have different things on their minds, so I have to be flexible. That is where I learn a lot in the field.”

“Maybe it is a burden or confusion, but sometimes I cannot provide perfect care to my patients. Sometimes I feel like I should have done more, or that I do not know enough about nursing, so I cannot provide that level of care to the patients. My knowledge is limited. I am not there yet. I am perplexed by that.”

Learning needs

The learning needs of novice Cambodian nurses centered around “Bridging the gap between ideals and reality.” Their specific desired learning content included acquiring “A wide range of practice as a medical practitioner” and “Knowledge of patient and family education.” They recognized the necessity of gaining proficiency in “Language skills” in the context of an international hospital. Furthermore, to acquire a broad knowledge base, they expressed the importance of having “Experience exchange opportunities.” According to participants:

“I would like to stay up to date. I would like to learn more about evolving as a nurse, if it is possible. I want to learn as much as possible about disease knowledge as well as patient care. I would like to have a greater understanding of patient care.”

“I need to work on my language skills. Because it is an international hospital, foreign language communication is required.”

“It is a nationwide nurse exchange program. In our hospital as well as other hospitals. The same is true for international nurses. I want to communicate with pharmacists in the hospital as well as nurses.”

Vision for the future

The envisioned future for novice Cambodian nurses and interns was “To become a nurse who can contribute to the nursing field in Cambodia.” To achieve this, they expressed their commitment to evolving into “Becoming a teachable person” and highlighting their intent to “Continue with higher education” to reshape perceptions of the nursing profession. This vision was encapsulated by the aspiration to contribute to the field directly and also participate “To convey awareness of the nursing profession.” According to participants:

“I want to be a good nurse in the future. I want to be a nurse who can teach and contribute to the next generation of nurses.”

“In the future, I want to do a master’s degree or a Ph.D. In Cambodian culture, women are not expected to aspire or study, but I would like to go further in the medical field. I would like to update the nursing curriculum in Cambodia, proving that women can also contribute.”

The current state of the nursing profession in Cambodia

The challenges faced in the daily duties of novice nurses and interns included a “Lack of recognition for the nursing profession.” Those in the nursing profession observed that the current situation of “Discrimination against nurses in society” led to a “Lack of candidates for nursing in Cambodia.” According to participants:

“Nurses were discriminated against when I interned at a national hospital. Doctors and other medical professionals regarded me with disdain. Tasks felt like chores. Doctors perceived dealing with nurses to be a chore.”

“Because Cambodia is a developing country with a shortage of nurses.”

“I started studying nursing because there were not enough nurses.”

Discussion

The two primary findings of this study, the challenges and learning needs of nurses in Cambodia, are discussed below.

Everyday Experiences and Challenges of Novice Nurses in Cambodia

The challenges faced by novice nurses revolved around the discrepancy between the ideals learned during clinical practice and the realities of the workplace. Participants expressed confusion due to their inability to handle multiple tasks flexibly, provide patient-centered care, and deliver perfect care. The desire to provide patient-centered care and the inability to do so due to busyness are indicative of a shortage of personnel. The World Health Organization (WHO) has identified a potential shortage of approximately 18 million healthcare workers worldwide by 2030 (13). Furthermore, it was revealed in this study that participants' schools allocated significant time to clinical practice from their student years, and internships were conducted in a manner

closely resembling real-world practice. However, their clinical practice skills matured through internships during their student years, yet communication skills and the ability to respond flexibly in clinical settings were considered difficult to acquire during student internships.

According to guidelines issued by the Japanese Ministry of Health, Labor, and Welfare regarding the education of novice nursing staff, there are reports of a gap between the skills required during clinical practice and those acquired through basic nursing education. The situations faced by novice nurses were found to be common in both countries (14). Therefore, a learning program is necessary for participants to acquire skills to communicate smoothly in daily work, distribute workloads, and respond flexibly through experience, reducing the gap perceived by the participants.

Learning Needs of Novice Nurses in Cambodia

The learning needs of novice nurses revolved around bridging the gap between ideals and reality. Within this learning need, participants expressed a desire for a broad range of practical knowledge as healthcare professionals and patient education knowledge. Acquiring a broad range of practical knowledge as healthcare professionals requires effective onboarding education. Nursing educators should ensure the implementation of evidence-based onboarding programs to provide adequate support for new graduate nurses transitioning from classrooms to practice, as reported (15). While participants showed some satisfaction with the current educational program, practical onboarding programs were not yet implemented. The effectiveness of evidence-based onboarding programs has been demonstrated in previous studies (15), and establishing such programs within healthcare facilities in Cambodia may meet the learning needs of novice nurses.

Additionally, in the context of patient education knowledge that participants felt was important, the shortage of physicians is a significant issue in Cambodia. Access to healthcare in Cambodia is limited due to economic disparities (16), and improving access to high-quality healthcare services for patients requires the efforts of healthcare providers and the preventive and disease management knowledge of patients themselves. Novice nurses seek to acquire knowledge that empowers them to offer disease management support to patients even after hospital discharge. In Cambodia, lifestyle-related diseases such as hypertension and diabetes are increasing. Knowledge of normal blood pressure levels, weight management, and body mass index self-management among the population can lead to disease

prevention. Therefore, the knowledge of patient education that participants acquire and provide to patients and their families may contribute to improvements in healthcare in Cambodia.

Limitations

This study has some limitations. First, the results cannot be generalized to the current situation of novice nurses in Cambodia because the interviews were carried out at only one facility. Second, owing to the restrictions set in the face of the coronavirus disease 2019 pandemic, we could not travel directly to the field, and all interviews were conducted remotely. Third, because interviews were conducted using an interpreter, the nuances of the research participants' narratives may not be accurate, and some details may have been lost in translation. The facilities where the nurses worked aimed to provide Japanese healthcare standards, and the participants received training similar to that in Japan. Furthermore, the findings are not generalizable to all novice nurses in Cambodia, in part due to the wide healthcare disparities between urban and rural areas. Future studies must include more participants, conduct sufficient confirmation work with the participants, and interview novice nurses in rural and urban facilities.

Conclusion

The learning needs identified in this study aimed at filling the gap between theory and reality and broadening the practical knowledge of nurses as healthcare professionals. The results revealed that although the participants were satisfied with their current educational programs, they also wished to acquire practical disease and treatment knowledge that would enable flexibility and adaptability to multiple tasks. Additionally, they indicated a preference for opportunities for multidisciplinary and multispecialty exchanges and practices.

References

- [1] Clarke D, Duke J, Wuliji T, et al. Strengthening health professions regulation in Cambodia: a rapid assessment. *Human Resources for Health* 2016;14(1):9. doi: 10.1186/s12960-016-0104-0
- [2] Heuveline P. 'Between One and Three Million': Towards the Demographic Reconstruction of a Decade of Cambodian History (1970–79). *Population Studies* 1998;52(1):49-65. doi: 10.1080/0032472031000150176
- [3] McGrew L. *Health Care in Cambodia*. . 2024
- [4] List of Number of Recognized Training Nursing Institutions in Cambodia [Available from: https://cambodiancouncilofnurse.com/wp-content/uploads/2017/03/List-of-recognized-nursing-school_Eng.pdf.
- [5] Henker R, Prak M, Koy V. Development and Implementation of Cornerstone Documents to Support

- Nursing Practice in Cambodia. Online J Issues Nurs 2015;20(2):5. [published Online First: 20150531]
- [6] HEALTH STRATEGIC PLAN 2016-2020 2016 [world bank data. World Bank Open Data. 2023
- [7]
- [8] Cambodia-WHO country cooperation strategy 2016-2020 2016 [
- [9] STATE OF THE WORLD'S NURSING 2020 2020 [Available from: <https://apps.who.int/nhwaportal/Sown/Files?name=KHM>.
- [10] Perkins A. Nursing shortage: Consequences and solutions 2021 [Available from: https://downloads.lww.com/wolterskluwer_vitalstream.com/journal_library/nie_15445186_2021_19_5_49.pdf.
- [11] Tong A, Sainsbury P, Craig J. Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups. Int J Qual Health Care 2007;19(6):349-57. doi: 10.1093/intqhc/mzm042 [published Online First: 20070914]
- [12] Hennink M, Kaiser BN. Sample sizes for saturation in qualitative research: A systematic review of empirical tests. Soc Sci Med 2022;292:114523. doi: 10.1016/j.socscimed.2021.114523 [published Online First: 20211102]
- [13] WHO. Global strategy on human resources for health: Workforce 2030 2016 [Available from: <https://iris.who.int/bitstream/handle/10665/250368/9789241511131-eng.pdf?sequence=1>
- [14] Ministry of Health L, Welfare of J. Guidelines for the Training of New Nursing Staff 2014 [Available from: <https://www.mhlw.go.jp/stf/english/index.html>.
- [15] Valdes EG, Sembar MC, Sadler F. Onboarding New Graduate Nurses Using Assessment-Driven Personalized Learning to Improve Knowledge, Critical Thinking, and Nurse Satisfaction. J Nurses Prof Dev 2023;39(1):18-23. doi: 10.1097/nnd.0000000000000805 [published Online First: 20211020]
- [16] BANK TW. Better Health for All Cambodians: Supporting Communities and Health Centers. 2019