

Reality Shock: A Transitional Challenge Faced By Intern Nurses at Labasa Hospital, Fiji

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Abstract

Introduction and Aim: Transition from being a student nurse to a full time registered nurse is a difficult phase in the lives of intern nurses. During this phase they face many challenges which influence their professional lives as well as their transitional experience. This study aimed to identify the transitional challenges experienced by intern nurses at Labasa Hospital, Fiji. **Methodology:** This qualitative study was conducted using a phenomenological approach. Data collection through semi structured in-depth interviews commenced after ethical approval was obtained. Each interview lasted between 40 to 60 minutes. The 22 participants were intern nurses of Labasa Hospital, Fiji who were either current intern nurses and had worked for more than 6 months or had completed internship within the past 5 years at Labasa Hospital and currently working as registered nurses within various units in the facility. Written consent was obtained from intern nurses who were willing to participate before the commencement of the interview on a one to one basis. The interview data was transcribed verbatim and interpreted thematically. **Results:** The intern nurses participating in the study were between the ages of 22 and 26 years old. Only one participant was 46 years old. 10 were current intern nurses while the remaining 12 had completed their internship and working as registered nurses. Reality shock is one of the challenges identified as a subtheme through thematic analysis in this study. The categories identifies under reality shock are role ambiguity, self-doubt, and work environment. **Conclusion:** The findings of the study identified reality shock as one of the many challenges experienced by intern nurses of today. There is an immediate need for healthcare providers and nursing leaders to recognize and address the reality shock in order to facilitate better transitional experiences for intern nurses. Easing the burden of reality shock will promote a healthy working environment as well as initiate better clinical outcomes.

Keywords: Intern nurses; Transition; Challenges; Qualitative study; Fiji.



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1. Introduction

Transition from being a student to working as a registered nurse is not just a phenomenon that begins with familiarization of the new workplace but it is an experience that influences the professional lives of intern nurses. Intern nurses are new graduate nurses or novice nurses who have just began a career in nursing after attaining a nursing qualification. During the first year of nursing most countries including Fiji have internship programs to support intern nurses in their transition. Internship programs usually last for one to two years, during which intern nurse must adapt to the new role and deal with the emotions and challenges of professional integration.

The transition from being a nursing student to working with real patients can range from just feeling uncomfortable to a highly shocking experience. Jewell [1] describes transition into full time nursing as complicated and difficult experience. Similarly, Abdelsalam, *et al.* [2] describe transition as a phase with overwhelming responsibilities and accountabilities. Additionally, it is a period of learning, adjusting, socializing and gaining competence in knowledge, skills and attitude. Teoh, *et al.* [3] state that the transition from a student to a fully pledged registered nurse presents with new challenges, stressors, and inconsistencies in professional practise for the new recruit. The transitional phase is usually accompanied by experiences of self-doubt and inadequacy leading to discouragement and exhaustion. One of the many challenges faced by the intern nurses is reality shock, whereby, after commencing internship, the intern nurses often realize that the on-the-job demands are not mentioned in the textbooks.

Reality shock has been defined as an unsettling and/or jarring experience resulting from wide disparity between what was expected and what the real situation turns out to be. According to Caliskan, *et al.* [4] reality shock is a term for describing the reaction of an individual who has received education in the field and has just started work. Sparacino [5] stated differences in language, customs and social norms as burdens for reality shock. The study highlighted reality shock has the same basic concept as culture shock. The same attributes are present in both; differences in language, custom, social norms, and new comers feeling alienated. Once new comers can acclimate successfully, they are able to enjoy their transition. The same applies to intern nurses whereby they enter the workplace excited about their new career, yet the euphoria is short lived when they realize the inconsistencies between their expectations and the reality. Once they are able to perceive the positivity, they are able to acclimate to the work culture and the outcome is a successful transition [5].

Similarly, Clair [6] stated that rapid immersion into the modern day acute work environment and the feeling of inadequacy lead to “reality shock”. Silva, *et al.* [7] described reality shock as a conflict that occurs when intern nurses discover that the knowledge they acquired in school is different from what is being practiced in health institutions. Shipman [8] stated that reality shock occurs when intern nurses lack the ability to connect nursing education with the realities of practice. Intern nurses may feel insecure and be unprepared to face the challenge of reality shock. Reasons leading to reality shock, as stated by Silva, *et al.* [7] include; leadership, management and technical skills; whereas Shipman [8] identified the inability to resolve conflicts, adapting to new shift routines and initiating decision on clinical issues as reasons for reality shock. According to Hezaveh, *et al.* [9] reality shock results in high levels of stress in intern nurses and the condition can impact their physical, emotional, mental status and even their health.

Kramer [10] theorized reality shock as, “the reactions of new workers when they find themselves in a work situation for which they have spent several years preparing, for which they thought they were going to be prepared, and then suddenly find they are not”. According to Kramer [10] reality shock theory, the intern nurses undergo a process of learning and growing as they transition into nursing. This process is characterized by four phases: honeymoon, shock, recovery, and resolution. The honeymoon phase is a period full of excitement. When joining the profession, the intern nurses are excited and eager to learn new things. The excitement is short lived as the intern nurses are faced with the realities of the new work place; this leads them to the second phase known as the shock phase. Shock phase is a time when the intern nurse is most vulnerable and negative feelings towards the new profession surfaces. The shock phase often occurs when the intern nurses realise the expectations of the new role being consistent with the day to day responsibilities. During this negative phase, there is a risk that the intern nurse might quit the profession, leave the unit or it can even lead to burnout [5]. When the intern nurse starts to recover from the negativity of the shock phase and move back to the positive side, it’s the beginning of the recovery phase. During this phase the intern nurses can look at the job realities with a new and more open perspective. Usually, around a year the fourth and final phase, which is the resolution phase, eventuates. During the resolution phase the nurse is able to see her role in perspective and make a full contribution to the profession. Sparacino [5] states that the reality shock model helps the colleagues of intern nurses understand the different situational phases they go through during transition. The intern nurses may have accepted the position but may not be prepared for some of the responsibilities associated with the position. The uneasiness intern nurses face can be minimised if the nursing leaders and senior colleagues understand the reality shock faced by the intern nurses and show understanding and empathy towards the intern nurses. This study aimed to identify the transitional challenges experienced by intern nurses at Labasa Hospital, Fiji.

2. Methodology

This study is a qualitative research using a phenomenological approach to explore the transitional experiences of intern nurses at Labasa Hospital. Twenty two intern nurses participated in this study through convenient sampling. The participants were either employed as an intern at Labasa Hospital for more than six months or had completed an internship at Labasa hospital in the last five years and currently working as registered nurses at Labasa Hospital. Recruitment of participants was carried out by identifying potential participants through conversation with the Human resource manager. They were approached by the research assistant and given a verbal explanation and a participant information sheet outlining the purpose of the study and the timeframes of the interview. Upon agreeing to participate, each participant was asked to sign a written consent prior to the interview. Their participation was voluntary. Data was collected through in-depth semi-structured interview, conducted by a research assistant. Interviews were conducted face to face in a quiet room. The interviews lasted between 40 to 60 minutes. All interviews were audio recorded while unstructured note were taken as well. All interview audio recordings were transcribed verbatim by the principal researcher. Following which a review of transcriptions was carried out to correct errors and to remove references to names, places and significant events to ensure anonymity for the participants. Once the transcriptions were clarified, data analysis was carried out.

Thematic analysis was the choice for data analysis in this study. It was carried out using four steps identified by Green, *et al.* [11]; immersion in the data, coding, creating categories and the identification of themes and subthemes. The principle researcher read and reread each transcript line by line, identifying similar phrases and words than assigned numbers to that word or concept. The coded data that had similar characteristics were grouped together. Once grouping of similar data was completed, descriptive themes were identified to reflect the lived experiences described by the participants.

Trustworthiness of the results of the study was examined through Lincoln and Guba [12] strategies of credibility, dependability, conformability and transferability. Ethical approval for this study was obtained from Fiji National University (FNU) College Health Research Ethics Committee (CHREC) and Fiji National Health Research Ethics Committee (FNHREC). Permission was obtained from the Medical Superintendent of Labasa Hospital prior to the commencement of the interviews.

3. Results

The demographical characteristics of the Participants (P) are provided in the table below:

Personal Information	Frequency	Percentage (%)
Gender		
Male	3	13.6
Female	19	86.4
Age (years)		
22- 32	21	95.5
33-43	1	4.5
Ethnicity		
I-Taukei	11	50
Fijians of Indian Origin	8	36.4
Fijians of Other Origin	3	13.6
Education Level		
Bachelor in Nursing	14	63.6
Diploma in Nursing	8	36.4
Years of Experience		
6 months to 1 year	11	50
1 year to 3 years	6	27.3
3 years to 5 years	5	22.7
Marital Status		
Single	13	59
Married	8	36.4
Divorced	1	4.5
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A total of 22 participants took part in data collection through in-depth interviews. Out of the 22, 86.4% were females and 13.6% males. 95.5% of the participants were between the ages of 22 and 32 while only 4.5% was between 33 and 43. The ethnic distribution of the participants included 50 % being I-Taukei while 36.4% were Fijians of Indian origin and the remainder 13.6% were Fijians of other origin. 63.6% had Bachelor in Nursing and 36.4% had Diploma in Nursing. The participants included 59% intern nurses who were single, 36.4% married and 4.5% divorced. The table below shows the findings of this study.

Theme	Subtheme	Categories
Challenge	Reality shock	Role ambiguity
		Self-doubt
		Work environment

Thematic analyses of the interview findings indicate that ‘reality shock’ was one of the challenges experienced by the participants of this study. Three categories of ‘reality shock’ identified were role ambiguity, self-doubt and work environment. The following section is an account of role ambiguity.

3.1. Role Ambiguity

Some of the participants indicated that at the commencement of their career they had mixed feelings. P4 (a 22 years old nurse) stated that:

“I started off my career with mixed feelings; at times I wasn’t sure what I really felt happy or sad.”

Similarly, P22 (a 22 years old nurse) indicated that she found it difficult to fit in:

“How to fit in? Was the issue I was worried about during rotation”

Additionally, P10 (a 24 years old nurse) voiced that she knew her role but got confused during difficult situations:

“I was aware of my role as a nurse, but in some situations I wasn’t sure what I was required to do, like the first time I saw a MVA (motor vehicle accident) victim in emergency, I didn’t know what to do.”

Together with role ambiguity, several participants talked about having self-doubt, which is reflected in the next section.

3.2. Self-Doubt

There were circumstances when the intern–nurses had less confidence in themselves while carrying out procedures. P15 (a 25 years old nurse) indicated that she was unsure whether she was carrying out the procedure correctly:

“During the early days, I was confused when caring out procedures, whether I was doing things right or not”

Similarly, P 18 (a 24 years old nurse) found the commencement of a career difficult and she stated:

“The first few weeks were really difficult, I wasn’t sure I had the right skills to carry out the nursing care.”

Additionally, P7 (a 23 years old nurse) voiced that she had lack of confidence in herself to deal with certain situations:

“In some situations I asked myself weather I had the right knowledge to handle it”

A few of the participants voiced that the Work environment had an impact on their transition.

3.3. Workplace Environment

Work environment in this study is reflected as situations where the participants found the physical layout, work routines and work culture of the workplace challenging. P2 (a 32 years old nurse) stated that:

“During rotations, I realized different wards have different routines.”

A few of the participants talked about experienced nursing staff being unhelpful. P20 (a 22 years old male nurse) said that:

“Some nurses are helpful; others let you do your own stuff.”

While some nurses found it challenging to adapt to the work culture in the clinical setting. As some of the intern–nurses had not been to Labasa Hospital before, two of the participants found it challenging to adapt to a new environment together with starting a new career. P6 (a 24 years old nurse) stated:

“I found the environment very new, during student days I was based at a different hospital; I found it very difficult to adjust to the new environment, I was so lost”

Correspondingly, P22 (a 24 years old nurse) voiced that:

“It was difficult for me to find my way at first. I was not familiar with the place as I had never been to this hospital before.”

4. Discussion

The transition from an undergraduate student to being a registered nurse has been recognized as a difficult transition by many researchers. During transition the intern nurses leave behind the security of being a student and adapt to the responsibilities and accountabilities of a registered nurse [13]. The challenges associated with intern nurses entering the workforce are numerous and complex. This study reflected reality shock as one of the challenge faced by the intern nurses during transition.

Duclos–Miller [14] describes reality shock as the incongruence between perceived role and expectations due to the change in status from a student to registered nurse, challenges of the new role, and lack of information on the expected behaviour and responsibilities, lack of competence and self-doubt. The findings of this study is consistent with Hezaveh, *et al.* [9] which states that at the beginning of their career intern nurses are faced with reality shock during which they recognize the difference between the expectations of workplace and their abilities. Similarly, Rush, *et al.* [15] states that during transition intern nurses are anticipated to adopt an expanded role that is accompanied with overwhelming responsibilities and unfamiliar expectations. Correspondingly, Teoh, *et al.* [3] states that even though intern nurses have completed their nursing education and attained a registration to practise, many of them still fell ill–prepared to face the realities of clinical practise. Additionally, Qiao, *et al.* [16] state that there is a gap between theory and practical, once the intern nurses join the workforce they realize that what they learnt in school is different from what is being practised in the clinical areas. The difficulties of reconciling the difference between ‘idealised role conceptions’ and ‘actualized role conceptions’ termed as reality shock give rise to role conflicts and associated role ambiguity impacting the intern nurses’ ability to meet the organizational

obligations, whilst maintaining a sense of professional integrity [17]. This study has identified role ambiguity, self-doubt, work culture and new environment as different forms of ‘reality shock’ faced by the intern nurses.

Role ambiguity is defined as having mixed feelings about new responsibilities and role expectations. McKenna and Newton [18] state that role ambiguity is lack of role clarity and understanding of expectations. Intern nurses are unable to identify their roles in clinical settings, their preconceived role from student days hinder the development of their new role. According to Duclos and Patricia [19] role ambiguity occurs in the first few months of internship and is the lack of information needed for role definition. It included the social and psychological aspects of role performance. Consistently, Karen Missen, *et al.* [20] states that intern nurses struggle with role ambiguity during transition; there is a detachment between their ideology of nursing and actual experiences during transition. This creates an inner conflict and confusion about the actual role of a registered nurse. Having an inner conflict about the actual role of a registered nurse often leads to self-doubt amongst intern nurses.

Self-doubt is defined as having lack of confidence in oneself and one's abilities. Participants in this study indicated that they had some moments of self-doubt at the commencement of their career especially when faced with new or difficult situations. This finding is similar to Dyess and Sherman [21] which states that intern nurses are both confident and fearful when commencing their nursing career. Similarly, Greenlees-Rae [22] states that intern nurses doubt their clinical judgement during transition. The self-doubt is a result of lack of knowledge, clinical expertise and little to no support from the senior colleagues. According to Ebrahimi, *et al.* [23] intern nurses have little trust in their own capabilities and manifest behaviours such as self-doubt and fear. During the initial few months of transition they may feel unqualified, inadequate and helpless in addition to the self-doubt and insecurities intern nurses may already have. Work environment as identified through this study is another category of reality shock that adds to the challenges felt by the intern nurses.

Work environment in the context of this study includes the physical setting of the facility as well as the work culture. Rhéaume, *et al.* [24] describes a healthy work environment as one that has sufficient resources, appropriate nurse-patient ratios, positive relationships between interdisciplinary health care team, and administrative support in providing quality care. The findings of this study indicate that some of the participants found the setting unfamiliar as they had never been to Labasa Hospital or were attached to different hospitals during their student days. The unfamiliarity of work environment proved to be a challenge for intern nurses. This finding is consistent with Malouf and West [25] which states that new clinical environment increases the challenge of role adaptation for intern nurses. Likewise, Laschinger, *et al.* [26] states that new work environment and culture play a significant role in influencing the transitional experiences on intern nurses.

Work culture plays an important role in extracting the best out of employees and plays an influential role in determining the learning culture of the workplace. The perceptions of the work experience which vary among intern nurses are a direct reflection of environmental factors including people and processes of the workplace [27]. The findings of this study indicate that intern nurses find it difficult to adapt to the work culture. This is consistent with Peterson [28] who states that intern nurses are overwhelmed by the demands and the unit routines of the workplace. Correspondingly, Williams [27] articulated that intern nurses are dissatisfied with environments that lack support, nurturing and are faced with hostile colleagues who are unwilling to share the workload.

The findings of this study add to the existing knowledge on reality shock being a challenging transitional experience for intern nurses. Sparacino [5], Clair [6], Kramer [10] agree that reality shock results in high levels of stress in intern nurses. This can impact their physical, emotional and mental status and their health. Furthermore, Teoh, *et al.* [3] states that reality shock can have detrimental effects of the level of nursing care provided by the intern nurses leading to professional dissatisfaction. Boamah, *et al.* [29] emphasized that intern nurses suffer ambiguities in their role and experience more stress as well as lack of power, lack of recognizing other's expectations and lack of sufficient authority, Stress can lead to health risks, absenteeism, decrease in quality of patient care, medical errors, aggressive behaviours and changing career.

In order to ease reality shock as a transitional challenge for intern nurses, organizations need to recognize its existence and articulate strategies to curtail its impact. Senior nursing staff should be encouraged to eradicate the hostile nature and promote a positive work culture. Duchscher [30] emphasizes that support from nursing colleagues will help the intern nurses in developing their thinking and clinical expertise thus making their entry into full time nursing a smooth transition. Additionally, administrative support is vital in providing a healthy learning environment for intern nurses. According to Teoh, *et al.* [3] intern nurses assimilate better into units where experienced staff is willing to teach, mentor, provide learning opportunities, exemplify teamwork and maintain a positive work environment.

5. Conclusion

This study recognized reality shock as one of the challenges faced by intern nurses of this era. It is perceived nursing students are often not fully exposed to the real world demands of nursing in their undergraduate preparation, leading to reality shock during transition into their new role of intern nurse. Support and guidance together with acceptance from senior nurse reduce the burden of reality shock and positively influence transition. Creating work environments that are conducive to fostering learning and professional development are crucial to increasing intern nurses' confidence and competence. Conclusively, there is an immediate need for nursing administrators, supervisors and experienced nurses to commit to empowering intern nurses to increase their clinical knowledge and skills. Encouraging a smooth transitional journey would ultimately lead to satisfied intern nurses and improved patient care outcomes.

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