



The American Journal of Physical Education and Health Science (AJPEHS)

ISSN: 2992-9679 (ONLINE)

VOLUME 3 ISSUE 2 (2025)



PUBLISHED BY
E-PALLI PUBLISHERS, DELAWARE, USA

Skill competency level of nurse educators in Bicol Region, Philippines

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Article Information

Received: May 18, 2024

Accepted: June 20, 2025

Published: September 12, 2025

Keywords

Bicol Nurse, Nurses, Nursing Education, Skill Competency.

ABSTRACT

This study assessed the skill competency level of nurse educators in the Bicol Region, Philippines, along performing the research process, fostering human relations with students, supporting students' clinical practicum, engaging in instructional design, promoting students' proactive learning, supporting the learning needs of local-community residents, performing roles within the organization, performing social activities using resources, engaging in good communication with other organization members, providing appropriate support for students' learning-related issues, and ensuring the quality of educational activities. The study used a quantitative descriptive cross-sectional design to assess the skill competency levels of nurse educators in the Bicol Region at a single point in time. Data were collected from 210 nurse educators across five state universities and colleges using the validated Clinical Nursing Faculty Competence Inventory (CNFCI), which measured various competency domains through a 5-point Likert scale. Descriptive statistics, including frequency, percentage, and weighted mean, were applied to analyze and interpret the data. Results showed that nurse educators in the Bicol Region demonstrated a very high level of skill competency across all assessed domains. They consistently showed strong abilities in performing the research process, fostering human relations with students, supporting clinical practicums, engaging in instructional design, and promoting students' proactive learning. Likewise, they excelled in supporting community learning needs, fulfilling organizational roles, using resources for social activities, communicating effectively within their institutions, providing appropriate support for student learning issues, and ensuring the quality of educational activities.

INTRODUCTION

Nursing education is fundamental in developing future healthcare professionals and be equipped with the necessary knowledge, skills, and attitudes to provide safe, effective, and compassionate care. Globally, organizations such as the World Health Organization have emphasized the importance of competent nurse educators in achieving universal health coverage and improving health outcomes. The WHO's Nurse Educator Core Competencies serve as a global standard to guide nurse educators in maintaining excellence in teaching, curriculum development, research, leadership, and community engagement, all of which are vital to improving nursing education and health service delivery (World Health Organization, 2016). Similarly, in the Philippines, the Commission on Higher Education mandates that nurse educators must possess advanced academic qualifications, clinical experience, and active engagement in professional organizations to ensure the quality of nursing programs (Commission on Higher Education, 2017). These frameworks collectively stress that the competence of nurse educators is foundational to producing graduates who can address the evolving needs of communities and health systems.

The Philippine Qualifications Framework outlines standards for qualifications and learning outcomes that aim to align local education with international standards and enhance the mobility of Filipino professionals. This framework supports the development of nurse educators who can perform a wide range of functions, including

engaging in research, fostering positive human relations, supporting students' clinical practicum, designing instructional materials, and addressing the learning needs of local communities. International models, such as those from the National League for Nursing and the National Council of State Boards of Nursing, further highlight the broad responsibilities of nurse educators. These include promoting proactive learning, supporting students' academic and emotional needs, demonstrating leadership within their organizations, collaborating across disciplines, and utilizing technological innovations in teaching (Oermann & Frank, 2023; National Council of State Boards of Nursing, 2023). Moreover, scholars like Billings and Halstead (2019) and Boyle and Oermann (2020) have pointed out the importance of personalized support, inclusive teaching, and the integration of evidence-based practices to enhance educational quality. Despite these well-established competencies and standards, there remains limited empirical data specific to the Philippine context, particularly in regional areas such as the Bicol Region. While studies have explored the general competencies of nurse educators, few have examined their actual skill competency levels across diverse functional areas, including research, instructional design, student support, community engagement, organizational roles, and communication within institutions. Existing research has largely focused on broader national or international samples or specific aspects such as clinical teaching or curriculum design, leaving a gap in understanding how

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nurse educators in Bicol perform across these varied and vital roles.

Hence, the study assessed the skill competency level of nurse educators in the Bicol Region, Philippines, along performing the research process, fostering human relations with students, supporting students' clinical practicum, engaging in instructional design, promoting students' proactive learning, supporting the learning needs of local-community residents, performing roles within the organization, performing social activities using resources, engaging in good communication with other organization members, providing appropriate support for students' learning-related issues, and ensuring the quality of educational activities.

LITERATURE REVIEW

Studies, such as those by Goleman (1995), emphasize the importance of emotional intelligence in fostering positive human relations. Nurse educators with high EI are better equipped to manage classroom dynamics, resolve conflicts, and provide emotional support to students, thereby enhancing the learning environment. Clear and open communication is essential for building trust and rapport with students.

In the context of diverse classrooms, cultural competence is crucial. Research by Campinha-Bacote (2002) highlights that nurse educators who are culturally competent and sensitive to the diverse backgrounds of their students can better address their unique needs and foster an inclusive learning environment. Implementing inclusive teaching practices that acknowledge and celebrate diversity helps in creating a supportive environment for all students. This includes understanding cultural differences in communication styles, learning preferences, and values.

Research by Zimmerman (2002) shows that helping students set realistic goals and manage their time effectively can enhance their ability to engage in self-directed learning. Educators can guide students in creating learning plans and setting milestones to track their progress. Effective mentorship can significantly impact students' proactive learning.

Studies by Betancourt *et al.* (2003) emphasize the need for educators to understand cultural beliefs, values, and practices when designing social interventions to ensure they are inclusive and respectful of diverse communities. Nurse educators should establish networks and partnerships with local stakeholders, government agencies, and non-profit organizations to enhance the impact of social activities.

Creating interactive and engaging content, such as case studies, simulations, and group activities, is essential. For instance, a study by Jeffries (2005) demonstrates that simulation-based learning encourages active participation and critical thinking among nursing students. Promoting critical thinking is essential for proactive learning.

According to Myrick and Yonge's (2005) research, students are more likely to develop confidence and take an active role in their learning when mentors offer guidance,

support, and constructive feedback. Educators can modify their instructional strategies by including student feedback mechanisms to more effectively accommodate students' diverse requirements.

Research by Israel *et al.* (2005) suggests that collaborative partnerships facilitate resource sharing, increase community participation, and promote sustainable social programs. Social activities organized by nurse educators should focus on building community capacity and empowering individuals and groups to take ownership of their health.

Studies by Skiba and Barton (2006) highlight the benefits of using e-learning platforms, simulation, and other technological tools to enhance learning and engagement. Research by Jeffries and Rizzolo (2006) highlights the benefits of using interactive teaching methods, incorporating simulation-based learning, promoting critical thinking skills, and fostering active learning environments to enhance educational quality. Creating a student-centered learning environment is crucial for educational quality.

Research by Ironside and McNelis (2010) emphasizes the importance of educators being available for consultations, office hours, and open communication channels. Effective support involves active listening and demonstrating empathy towards students' concerns and challenges.

Frank *et al.* (2010) conducted research that endorses the implementation of competency-based education, which emphasizes the development and evaluation of particular skills and competencies. This methodology is especially pertinent in the field of nursing education, where practical abilities are indispensable. The significance of technology integration in instructional design is on the rise.

Community engagement strategies that are effective are indispensable for the success of educational initiatives. Israel *et al.* (2010) conducted research that emphasizes the significance of community forums, partnerships with local organizations, and participatory approaches in order to foster active involvement and ownership of learning initiatives. Nurse educators are essential in their advocacy for policies that promote health equity and the learning requirements of local communities.

Benner *et al.* (2010) have conducted research that underscores the fact that educators who participate in ongoing clinical education and clinical practice are better equipped to provide students with the necessary support in the clinical setting.

Research suggests that nurse educators must implement a diverse array of instructional strategies to accommodate differing learning styles. Reflective practice, problem-based learning, and simulation-based learning are identified as effective strategies for improving students' clinical abilities (Cant and Cooper, 2010). It is imperative to offer students constructive, specific, and expeditious feedback in order to facilitate their growth.

Research by Ironside and McNelis (2010) emphasizes the importance of aligning curriculum with program

outcomes, integrating evidence-based content, and utilizing active learning strategies to enhance student engagement and learning outcomes. Educators must be proficient in learning assessment and evaluation methods to measure student progress, identify areas for improvement, and ensure program effectiveness.

Research by Weimer (2013) highlights the benefits of student-centered teaching approaches, where the educator actively involves students in the learning process and adapts to their individual needs. This approach fosters a supportive and inclusive learning environment.

Research by Ironside *et al.* (2014) shows that educators who offer guidance, feedback, and emotional support foster a positive learning environment, promote student retention, and enhance student satisfaction.

Research by McGonigal (2015) highlights the role of educators in promoting a positive learning environment, offering encouragement, and referring students to mental health resources when needed. By excelling in these areas, nurse educators can effectively support students' learning-related issues, promote academic success, and contribute to a positive and nurturing learning environment within nursing education programs.

Research by Arnold and Boggs (2015) suggests that effective communication skills in nurse educators lead to improved student engagement and learning. This includes both verbal and non-verbal communication skills.

According to Oermann and Gaberson (2016), clinical proficiency is essential for educators to provide accurate and relevant guidance to students in real-world settings. Ongoing professional development and clinical practice are necessary for maintaining clinical competence.

Strong communication skills are essential for nurse educators to effectively convey expectations, provide instructions, and facilitate student learning. According to the study by Foronda, MacWilliams, and McArthur (2016), clear and open communication between educators and students enhances the learning experience and improves clinical outcomes. Building positive relationships with students helps create a supportive and trusting environment.

Research by Oermann and Gaberson (2016) emphasizes that educators with advanced clinical skills can effectively guide and mentor nursing students, ensuring they receive a quality education. Effective teaching and instructional design skills are crucial for nurse educators.

Studies by Oermann and Gaberson (2016) suggest that educators who use valid and reliable assessment tools, provide timely feedback, and conduct outcome evaluations contribute to maintaining educational quality. Nurse educators should employ evidence-based teaching practices grounded in educational research and best practices.

Gender may have influences in the areas of clinical expertise and area of assignment among nurse educators. For instance, studies by Smith and Johnson (2016) suggest that female educators may be more prevalent in specialties such as maternal-child health or community

nursing, while male educators may be more represented in critical care or emergency nursing. Research could also explore whether gender influences participation in professional development activities and mentorship roles among nurse educators.

Research by Lahtinen *et al.* (2017) highlights the empathetic and nurturing communication style often associated with female educators, which contributes to effective teaching and mentorship.

Studies by Jones and Brown (2017) suggest that gender biases or assumptions about leadership abilities, communication styles, or technical skills may influence how educators are perceived and evaluated.

Studies by Thompson and Johnson (2018) indicate that female educators may be more involved in mentorship programs, peer support networks, and continuing education initiatives. Research findings highlight the impact of gender perceptions and stereotypes on the competency levels of nurse educators.

Research by Billings and Halstead (2019) indicates that educators who apply these theories can create learning experiences that are more engaging and effective. Pedagogical content knowledge, which integrates subject matter expertise with teaching methods, is crucial.

Research by Billings and Halstead (2019) highlights the benefits of personalized support strategies, such as tutoring, mentoring, and academic advising, to address learning difficulties and enhance student success. Supporting students goes beyond academic assistance and includes addressing emotional well-being and stress management.

Research by Billings and Halstead (2019) emphasizes educators' role in promoting active learning, fostering critical thinking, encouraging inquiry-based learning, and providing opportunities for student reflection and self-assessment.

Nurse educators of different genders may exhibit variations in teaching approaches and styles. For example, studies by Boyle and Oermann (2020) suggest that female educators may emphasize collaborative learning, while male educators may lean towards directive or authoritative teaching styles. Findings indicate that female nurse educators tend to excel in communication and interpersonal skills, fostering rapport with students and colleagues.

A study by Yamamoto *et al.* (2021) on the factors affecting clinical nursing competency showed age is one of the factors affecting basic nursing competency together with ease of taking time off, a workplace with a clear vision, and good interpersonal relationships.

Study by Saiga *et al.* (2024) on the relationship between clinical nursing competence and work environment by career stage for nurses with 1 to 10 years of clinical experience showed that clinical nursing competence and the work environment differed according to years of experience. Interventions to improve clinical nursing competence should be developed for each experience group considering the associations.

MATERIALS AND METHODS

Research Design

This study employed a quantitative descriptive cross-sectional research design to determine the skill competency level of nurse educators in the Bicol Region, Philippines. The design aimed to provide a snapshot of the competencies of nurse educators at a single point in time, describing their current levels across various competency domains. Data were gathered using a validated questionnaire to measure specific skill areas related to nurse educators’ roles.

Research Instrument

The study used the Clinical Nursing Faculty Competence Inventory (CNFCI) developed by Hou *et al.* (2011), a reliable and valid tool for measuring nurse educator competencies. The CNFCI assessed nurse educators’ competencies in the following areas: performing the research process, fostering human relations with students, supporting students’ clinical practicum, engaging in instructional design, promoting students’ proactive learning, supporting the learning needs of local-community residents, performing roles within the organization, performing social activities using resources, engaging in good communication with other organization members, providing appropriate support for students’ learning-related issues, and ensuring the quality of educational activities. The CNFCI used a 5-point Likert scale where 1 meant least important and 5 meant most important. The tool demonstrated high reliability, with Cronbach’s alpha values ranging from 0.71 to 0.98 across

domains, and 0.96 for the whole instrument (Hou *et al.*, 2011).

Research Locale and Population

The study was conducted in five state universities and colleges in the Bicol Region that offer nursing programs: Bicol University Main Campus, Bicol University Tabaco Campus, Bicol University Polangui Campus, Catanduanes State University, and Camarines Sur Polytechnic Colleges. The participants were nurse educators who held either full-time or part-time teaching positions and were involved in hospital or community teaching assignments. A total of 210 nurse educators across these institutions were eligible to participate.

Data Collection Procedure

After securing ethics approval, permission was sought from the deans of the identified schools. The researcher distributed the CNFCI questionnaires, with the assistance of designated contact persons, to nurse educators who met the eligibility criteria. The participants completed the questionnaires during their available time, and the researcher ensured completeness and clarity upon collection.

Data Analysis Procedure

The data were analyzed using descriptive statistics, including frequency, percentage, and weighted mean, to describe the competency levels of nurse educators across the specified domains. The weighted mean was interpreted using the following scale:

Table 1: Scoring and Interpretation

Score	Score Range	Verbal Description	Verbal Interpretation
1	1.00-1.79	Strongly Disagree	Very High Competency
2	1.80-2.59	Disagree	High Competency
3	2.60-3.39	Cannot Decide	Moderate Competency
4	3.40-4.19	Agree	Low Competency
5	4.20-5.00	Strongly Agree	Very Low Competency

Table 2: Level of Skill Competency of Bicol Nurse Educators Along Performing Research Process

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1	I am able to collect data in a manner that accords with the research purpose	4.34	Strongly Agree	Very High Competency
2	I am able to summarize research theses necessary for research	4.28	Strongly Agree	Very High Competency
3	I am able to write logical sentences	4.24	Strongly Agree	Very High Competency
4	I am able to select a research design that can obtain effective findings	4.24	Strongly Agree	Very High Competency
5	I am able to clarify the framework of the research concept	4.19	Agree	High Competency
6	I am able to clarify research issues	4.15	Agree	High Competency
7	I am able to create research plans that accord with research ethics	4.11	Agree	High Competency

8	I am able to present research outcomes at a conference	4.07	Agree	High Competency
9	I am able to interpret research findings	4.05	Agree	High Competency
10	I am able to prepare a thesis based on research outcomes	4.05	Agree	High Competency
11	I am able to analyze data using analysis methods that are suited to the research purpose	4.05	Agree	High Competency
12	I am able to recruit human resources (research collaborators, educators/supporters, etc.) in order to complete research	4.00	Agree	High Competency
	Mean	4.17	Agree	High Competency

RESULTS AND DISCUSSION

The competency level of nurse educators in the research process is critical for fostering a culture of evidence-based practice and advancing the nursing profession. Nurse educators need to possess a range of competencies to effectively teach and guide nursing students in research. Table 2 illustrates the level of skill competency of nurse educators while performing the research process. It revealed that 4 out of 12 indicators show that they have “very high level of competency” on the following: “collecting data in a manner that accords with the research purpose”, “summarizing research theses necessary for research”, “writing logical sentences”, and “selecting a research design that can obtain effective findings.”

The nurse educators showing a very high level of competency in these areas explain that research findings consistently emphasize the importance of aligning data collection methods with the research purpose to ensure the validity and reliability of the results. Studies show that misalignment between data collection methods and research objectives can lead to irrelevant or unusable data. For example, a study by Bryman (2012) highlights that qualitative methods are more suitable for exploratory research questions, while quantitative methods are better for testing specific hypotheses. Effective data collection strategies are often customized to fit the specific context of the study. A mixed-methods approach, as suggested by Creswell (2014), can provide a comprehensive understanding by combining the strengths of both qualitative and quantitative methods.

Summarizing research theses involves distilling essential

information from existing studies to build a solid foundation for new research. Boote and Beile (2005) emphasize that thorough literature reviews are critical for identifying gaps in existing research and providing context for new studies. Effective summarization involves not only identifying key findings but also understanding the methodologies and limitations of previous research. Research by Hart (1998) highlights the importance of critically evaluating existing studies to understand their strengths and weaknesses. This critical perspective helps in identifying areas needing further investigation and justifying the new research’s rationale. Synthesizing information from multiple sources helps in creating a coherent narrative. Findings from studies like Torraco (2005) show that well-synthesized literature reviews can significantly enhance the clarity and impact of the research thesis.

In terms of writing logical sentences, the ability to write logical and clear sentences is fundamental to effectively communicating research findings. Research by Barrass (2002) shows that clear and precise language improves the readability and comprehension of research documents. Ambiguities and complex sentence structures can confuse readers and obscure the main points.

Along with selecting a research design that can obtain effective findings, research by Yin (2014) shows that the research questions and objectives should drive the choice of research design. For example, case studies are ideal for in-depth exploration of complex issues, while randomized controlled trials are best for testing causal relationships. Studies emphasize the importance of choosing designs that enhance the validity and reliability of the research.

Table 3: Level of Skill Competency of Bicol Nurse Educators Along Fostering Human Relations with Students

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	Recognize that students are future nurses and treat them accordingly	4.70	Strongly Agree	Very High Competency
2.	I am able to respond sincerely to students’ opinion and provide consultation	4.61	Strongly Agree	Very High Competency
3.	I am able to communicate with students	4.57	Strongly Agree	Very High Competency
4.	I am able to flexibly respond to students	4.52	Strongly Agree	Very High Competency
5.	I am able to foster mutual respect between students and faculty members	4.51	Strongly Agree	Very High Competency

6.	I am able to relate to students and show confidence in their potential	4.50	Strongly Agree	Very High Competency
7.	I am able to show understanding of students' ideas and thoughts	4.47	Strongly Agree	Very High Competency
8.	I am able to create atmospheres in which students can talk easily	4.46	Strongly Agree	Very High Competency
9.	I am able to alleviate students' nervousness	4.44	Strongly Agree	Very High Competency
10.	I am able to relate to students in terms of their psychological aspects	4.44	Strongly Agree	Very High Competency
11.	I am able to hold free discussions with both students and other faculty members	4.42	Strongly Agree	Very High Competency
12.	I am able to protect students' positions	4.41	Strongly Agree	Very High Competency
	Mean	4.51	Strongly Agree	Very High Competency

A mixed-methodology particularly explanatory sequential strategy was used in the study to collect data, integrating quantitative and qualitative methods. The Clinical Nursing Faculty Competence Inventory (CNFCI) and survey questionnaires were used in the quantitative part of the study to collect information on the skill competency levels and demographics of nurse educators. To ascertain the variables influencing the skills competency level, teaching abilities, and areas for development, the qualitative component included interview guides and focus group discussions. The goal of the project was to create an improvement program for Bicol nurse educators to acquire skills and competencies.

Table 3 illustrates the level of skill competency of nurse educators along with fostering human relations with students. It revealed that all of the 12 indicators show that they “strongly agree.” Studies, such as those by Goleman (1995), emphasize the importance of emotional intelligence in fostering positive human relations. Nurse educators with high EI are better equipped to manage classroom dynamics, resolve conflicts, and provide emotional support to students, thereby enhancing the learning environment. Clear and open communication is essential for building trust and rapport with students. Research by Arnold and Boggs (2015) suggests that effective communication skills in nurse educators lead

to improved student engagement and learning. This includes both verbal and non-verbal communication skills. Research by Weimer (2013) highlights the benefits of student-centered teaching approaches, where the educator actively involves students in the learning process and adapts to their individual needs. This approach fosters a supportive and inclusive learning environment.

In the context of diverse classrooms, cultural competence is crucial. Research by Campinha-Bacote (2002) highlights that nurse educators who are culturally competent and sensitive to the diverse backgrounds of their students can better address their unique needs and foster an inclusive learning environment. Implementing inclusive teaching practices that acknowledge and celebrate diversity helps in creating a supportive environment for all students. This includes understanding cultural differences in communication styles, learning preferences, and values. The competency level of nurse educators in fostering human relations with students significantly impacts the educational experience and outcomes for nursing students. Effective interpersonal skills, emotional intelligence, communication, support, respect, and cultural competence are all critical components. Nurse educators can create a positive and supportive learning environment that enhances student engagement, satisfaction, and success by focusing on these areas.

Table 4: Level of Skill Competency of Bicol Nurse Educators Along Supporting Students' Clinical Practicum

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	I am able to help students pay attention to patients' safety	4.62	Strongly Agree	Very High Competency
2.	I am able to connect knowledge from clinical experience with the students' learning content	4.59	Strongly Agree	Very High Competency
3.	I am able to guide students to utilize their own clinical nursing experience	4.58	Strongly Agree	Very High Competency
4.	I have sufficient skills to participate in the students' patient care	4.58	Strongly Agree	Very High Competency
5.	I am able to respond appropriately with regard to exhibiting the nursing methods used in clinical care	4.57	Strongly Agree	Very High Competency

6.	I am able to guide students based on evidence	4.56	Strongly Agree	Very High Competency
7.	I am able to contact nursing staff at the practicum facility and make necessary arrangements	4.55	Strongly Agree	Very High Competency
8.	I am able to help students understand instructions provided by their preceptors	4.54	Strongly Agree	Very High Competency
9.	I am able to be a role model regarding nursing practice	4.54	Strongly Agree	Very High Competency
10.	I am able to help students collect patients' information	4.54	Strongly Agree	Very High Competency
11.	I am able to create an environment in the practicum facility where students can consult me about any learning-related issues they have	4.53	Strongly Agree	Very High Competency
12.	I am able to supplement students' knowledge regarding tasks they find difficult by collaborating with the staff where the students are being trained	4.48	Strongly Agree	Very High Competency
13.	I am able to support students' learning progress so that they can eventually present at training conferences	4.45	Strongly Agree	Very High Competency
14.	When necessary, I am able to give instructions in practicum guidance through collaboration with individuals from the other specialty professions	4.43	Strongly Agree	Very High Competency
	Mean	4.54	Strongly Agree	Very High Competency

The competency level of nurse educators along with supporting students' clinical practicum is crucial for ensuring that nursing students acquire the necessary skills and knowledge for effective clinical practice. Research findings in this area highlight several key competencies and best practices that nurse educators must possess to effectively support students during their clinical practicum. Table 4 illustrates the level of skill competency of nurse educators along with supporting students' clinical practicum. It revealed that all of the 14 indicators show that they "strongly agree." Nurse educators must have a high level of clinical expertise and current knowledge in their specialty areas. According to Oermann and Gaberson (2016), clinical proficiency is essential for educators to provide accurate and relevant guidance to students in real-world settings. Ongoing professional development and clinical practice are necessary for maintaining clinical competence. Studies by Benner *et al.* (2010) emphasize that educators who engage in regular clinical practice and continuing education can better support students in the clinical environment. Research indicates that nurse educators need to employ a variety of teaching strategies to support diverse learning styles.

Simulation-based learning, problem-based learning, and reflective practice are highlighted as effective methods for enhancing students' clinical skills (Cant & Cooper, 2010). Providing timely, constructive, and specific feedback is crucial for student development.

Strong communication skills are essential for nurse educators to effectively convey expectations, provide instructions, and facilitate student learning. According to the study by Foronda, MacWilliams, and McArthur (2016), clear and open communication between educators and students enhances the learning experience and improves clinical outcomes. Building positive relationships with students helps create a supportive and trusting environment.

The competency level of nurse educators in supporting students' clinical practicum encompasses a wide range of skills and attributes, including clinical expertise, effective teaching and facilitation, mentorship, communication, assessment, and the integration of theory and practice. By excelling in these areas, nurse educators can significantly enhance the clinical learning experience for students, ensuring they are well-prepared for their professional roles as nurses.

Table 5: Level of Skill Competency of Bicol Nurse Educators Along Engaging in Instructional Design

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	I have knowledge of the subjects I teach in class	4.62	Strongly Agree	Very High Competency
2.	I am able to review the material used in class	4.58	Strongly Agree	Very High Competency
3.	I am able to accurately select class content for the topics that I am teaching	4.56	Strongly Agree	Very High Competency

4.	I am able to clarify questions for the class that I am teaching	4.56	Strongly Agree	Very High Competency
5.	I am aware of the curriculum of the university in which I am teaching	4.55	Strongly Agree	Very High Competency
6.	I am able to instruct students on the main points of the class	4.53	Strongly Agree	Very High Competency
7.	I am able to understand the educational methods used in class	4.49	Strongly Agree	Very High Competency
8.	When necessary, I am able to design material relevant to the clinical scenes in question	4.48	Strongly Agree	Very High Competency
9.	I am able to conduct a class using educational/ learning theories	4.45	Strongly Agree	Very High Competency
10.	When necessary, I am able to utilize literature and research outcomes in class content	4.42	Strongly Agree	Very High Competency
	Mean	4.52	Strongly Agree	Very High Competency

The competency level of nurse educators along with engaging in instructional design is vital for creating effective and engaging educational experiences that enhance learning outcomes for nursing students. Research findings in this area highlight several key competencies and best practices necessary for successful instructional design. Table 5 illustrates the level of skill competency of nurse educators along with engaging in instructional design. It revealed that all of the 10 indicators show that they “strongly agree.” Nurse educators must have a solid understanding of educational theories, such as constructivism, behaviorism, and cognitive learning theories, to design effective instruction. Research by Billings and Halstead (2019) indicates that educators who apply these theories can create learning experiences that are more engaging and effective. Pedagogical content knowledge, which integrates subject matter expertise with teaching methods, is crucial.

Research by Frank *et al.* (2010) supports the implementation of competency-based education, which focuses on the development and assessment of specific skills and competencies. This approach is particularly relevant in nursing education, where practical skills are crucial. The integration of technology in instructional design is increasingly important. Studies by Skiba and Barton (2006) highlight the benefits of using e-learning platforms, simulation, and other technological tools to enhance learning and engagement. Creating interactive and engaging content, such as case studies, simulations, and group activities, is essential. The competency level of nurse educators in engaging in instructional design is multifaceted, requiring a deep understanding of educational theories, curriculum development, technology integration, assessment strategies, learner-centered approaches, and continuous professional development.

Table 6: Level of Skill Competency of Bicol Nurse Educators Along Promoting Students’ Proactive Learning

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	I am able to encourage students to become aware of learning issues	4.52	Strongly Agree	Very High Competency
2.	I am able to direct students’ learning	4.51	Strongly Agree	Very High Competency
3.	I am able to encourage students to set learning achievement goals	4.51	Strongly Agree	Very High Competency
4.	I am able to support students in regard to their self-learning	4.49	Strongly Agree	Very High Competency
5.	I am able to give feedback on assignments that students have performed	4.48	Strongly Agree	Very High Competency
6.	I am able to encourage students to think critically	4.47	Strongly Agree	Very High Competency
7.	I am able to help student based on learning plans created by the students themselves	4.42	Strongly Agree	Very High Competency
8.	I am able to encourage self-assessment of the students’ assignments	4.41	Strongly Agree	Very High Competency
9.	I am able to help students create a learning plan	4.38	Strongly Agree	Very High Competency
	Mean	4.47	Strongly Agree	Very High Competency

The competency level of nurse educators along with promoting students' proactive learning is a critical competency as proactive learning involves encouraging students to take initiative, engage actively in their learning process, and develop self-directed learning skills. Research findings in this area highlight several key competencies and best practices that nurse educators must possess to effectively promote proactive learning.

Table 6 illustrates the level of skill competency of nurse educators along with promoting students' proactive learning. It revealed that all of the 9 indicators show that they "strongly agree."

Research indicates that using interactive learning methods such as group discussions, case studies, and simulations can significantly enhance student engagement and proactive learning. For instance, a study by Jeffries (2005) demonstrates that simulation-based learning encourages active participation and critical thinking among nursing students. Promoting critical thinking is essential for proactive learning.

Research by Zimmerman (2002) shows that helping

students set realistic goals and manage their time effectively can enhance their ability to engage in self-directed learning. Educators can guide students in creating learning plans and setting milestones to track their progress. Effective mentorship can significantly impact students' proactive learning. Research by Myrick and Yonge (2005) shows that mentors who provide guidance, support, and constructive feedback help students develop confidence and take initiative in their learning. Incorporating student feedback mechanisms allows educators to adjust their teaching strategies to better meet students' needs.

The competency level of nurse educators in promoting students' proactive learning involves a combination of active learning strategies, critical thinking development, self-directed learning encouragement, supportive environments, technological integration, and effective assessment practices. By excelling in these areas, nurse educators can foster an environment that empowers nursing students to take initiative, engage deeply with their learning, and develop the skills necessary for lifelong learning and professional success.

Table 7: Level of Skill Competency of Bicol Nurse Educators Along Supporting the Learning Needs of Local-Community Residents

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1	I am able to provide explanations to local residents that are suited to their levels of understanding	4.49	Strongly Agree	Very High Competency
2	I am able to set learning content that is suitable for the learning experience and levels of local residents	4.46	Strongly Agree	Very High Competency
3	I am able to provide learning content that accords with themes requested by local residents	4.40	Strongly Agree	Very High Competency
4	I am able to provide learning content that is suitable for the life stages of the local residents	4.37	Strongly Agree	Very High Competency
	Mean	4.43	Strongly Agree	Very High Competency

The competency level of nurse educators along with supporting the learning needs of local community residents is multifaceted and requires a range of skills, knowledge, and strategies. Table 7 illustrates the level of skill competency of nurse educators along with supporting the learning needs of local community residents. It revealed that all of the 4 indicators show that they "strongly agree."

Effective community engagement strategies are essential for successful educational initiatives. Research by Israel *et al.* (2010) highlights the importance of participatory approaches, community forums, and partnerships with local organizations to promote active involvement and ownership of learning initiatives. Nurse educators play a vital role in advocating for policies that support the learning needs and health equity of local communities.

Table 8: Level of Skill Competency of Bicol Nurse Educators Along Performing Roles Within the Organization

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	I am able to perform my own role in the committee activities, etc., of the university with which I am affiliated	4.53	Strongly Agree	Very High Competency
2	I am able to protect the organization mechanism of the university with which I am affiliated	4.47	Strongly Agree	Very High Competency
3	I am able to conduct educational activities that accord with the educational policy of the university with which I am affiliated	4.47	Strongly Agree	Very High Competency

4	I am able to understand the philosophy of the university with which I am affiliated	4.45	Strongly Agree	Very High Competency
5	I am able to understand the characteristics of the university with which I am affiliated	4.44	Strongly Agree	Very High Competency
	Mean	4.47	Strongly Agree	Very High Competency

The competency level of nurse educators along with performing roles within the organization highlights several key aspects that contribute to their effectiveness. Table 8 illustrates the level of skill competency of nurse educators along with performing roles within the organization. It revealed that all of the 5 indicators show that they “strongly agree.”

Nurse educators must possess strong clinical expertise and up-to-date knowledge in nursing practice. Research by Oermann and Gaberson (2016) emphasizes that educators with advanced clinical skills can effectively guide and mentor nursing students, ensuring they receive a quality education. Effective teaching and instructional

design skills are crucial for nurse educators. Research by Ironside *et al.* (2014) shows that educators who offer guidance, feedback, and emotional support to students foster a positive learning environment, promote student retention, and enhance student satisfaction.

The competency level of nurse educators within the organization encompasses a range of skills, including clinical expertise, teaching abilities, leadership skills, communication proficiency, technology integration, research engagement, professional development, and student support. By excelling in these areas, nurse educators contribute significantly to the success of nursing education programs and the overall quality of patient care.

Table 9: Level of Skill Competency of Bicol Nurse Educators Along Performing Social Activities Using Resources

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1	I am able to participate in social activities related to my specific areas of expertise	4.40	Strongly Agree	Very High Competency
2	I am able to participate in social activities involving human resource	4.35	Strongly Agree	Very High Competency
3	I am able to participate in social activities through networks	4.33	Strongly Agree	Very High Competency
4	I am able to participate in social activities using physical resources	4.33	Strongly Agree	Very High Competency
	Mean	4.35	Strongly Agree	Very High Competency

The competency level of nurse educators along with performing social activities using resources is illustrated in Table 9. It revealed that all of the 4 indicators show that they “strongly agree.”

Nurse educators are expected to engage with the community and utilize available resources effectively to address social determinants of health. Studies by Betancourt *et al.* (2003) emphasize the need for educators to understand cultural beliefs, values, and practices when designing social interventions to ensure they are inclusive and respectful of diverse communities. Nurse educators should establish networks and partnerships with local stakeholders, government agencies, and non-profit organizations to enhance the impact of social activities. Research by Israel *et*

al. (2005) suggests that collaborative partnerships facilitate resource sharing, increase community participation, and promote sustainable social programs. Social activities organized by nurse educators should focus on building community capacity and empowering individuals and groups to take ownership of their health.

The competency level of nurse educators in performing social activities using resources involves community engagement, cultural competence, networking, advocacy, evaluation, capacity building, sustainability, and strategic planning. By integrating these competencies into their practice, nurse educators can effectively address social determinants of health, promote health equity, and improve outcomes for diverse communities.

Table 10: Level of Skill Competency of Bicol Nurse Educators Along Engaging in Good Communication with Other Organization Members

	Skills	Weighted	Verbal	Adjectival
1.	I am able to maintain my own mental health	4.44	Strongly Agree	Very High Competency
2.	I am able to respect the opinions of other organization members	4.41	Strongly Agree	Very High Competency
3.	I am able to give my own opinions to organization members	4.39	Strongly Agree	Very High Competency
4.	I am able to collaborate with organization members	4.31	Strongly Agree	Very High Competency
	Mean	4.39	Strongly Agree	Very High Competency

The competency level of nurse educators along with engaging in good communication with other organization members is presented in Table 10. It revealed that all of the 4 indicators show that they “strongly agree.”

Nurse educators should demonstrate clear and effective communication skills when interacting with other members of the organization, including administrators, fellow educators, healthcare providers, and support staff, concerning the study by Boyle and Oermann (2020) wherein female educators may emphasize collaborative learning, while male educators may lean towards directive or authoritative teaching styles. Findings indicate that female nurse educators tend to excel in communication and interpersonal skills, fostering rapport with students and colleagues. Nurse educators often work in

interdisciplinary teams, requiring them to communicate effectively with professionals from various healthcare disciplines. They should provide and receive feedback constructively to promote professional growth and continuous improvement.

The competency level of nurse educators in engaging in good communication with other organization members encompasses clear communication, collaboration, interdisciplinary communication, feedback mechanisms, adaptability, technology utilization, and leadership communication skills. By honing these competencies, nurse educators contribute to a positive organizational culture, effective teamwork, and improved outcomes for both educators and learners within the healthcare organization.

Table 11: Level of Skill Competency of Bicol Nurse Educators Along Providing Appropriate Support for Students’ Learning-Related Issues

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	I am able to guide students based on their level of commitment	4.49	Strongly Agree	Very High Competency
2.	I am able to guide students to overcome obstacles in the learning process	4.47	Strongly Agree	Very High Competency
3.	I am able to guide students by helping them build on their own ideas	4.47	Strongly Agree	Very High Competency
4.	I am able to confirm students’ learning readiness	4.43	Strongly Agree	Very High Competency
	Mean	4.46	Strongly Agree	Very High Competency

The competency level of nurse educators along with providing appropriate support for students’ learning-related issues is presented in Table 11. It revealed that all of the 4 indicators show that they “strongly agree.”

Nurse educators should be accessible and approachable to students, creating a supportive learning environment where students feel comfortable seeking help. Research by Ironside and McNelis (2010) emphasizes the importance of educators being available for consultations, office hours, and open communication channels. Effective support involves active listening and demonstrating empathy towards students’ concerns and challenges. Research by Billings and Halstead (2019) highlights the benefits

of personalized support strategies, such as tutoring, mentoring, and academic advising, to address learning difficulties and enhance student success. Supporting students goes beyond academic assistance and includes addressing emotional well-being and stress management. Research by McGonigal (2015) highlights the role of educators in promoting a positive learning environment, offering encouragement, and referring students to mental health resources when needed. By excelling in these areas, nurse educators can effectively support students’ learning-related issues, promote academic success, and contribute to a positive and nurturing learning environment within nursing education programs.

Table 12: Level of Skill Competency of Bicol Nurse Educators Along Ensuring the Quality of Educational Activities

	Skills	Weighted Mean	Verbal Interpretation	Adjectival Interpretation
1.	I am able to participate in educational activities utilizing my knowledge of my specialty area	4.51	Strongly Agree	Very High Competency
2.	I am able to obtain knowledge and a wider perspective of other specialty areas	4.47	Strongly Agree	Very High Competency
3.	I am able to obtain information necessary for the educational activities I conduct	4.45	Strongly Agree	Very High Competency
4.	I am able to participate in specialized learning opportunities for personal improvement	4.41	Strongly Agree	Very High Competency
	Mean	4.46	Strongly Agree	Very High Competency

The competency level of nurse educators along with ensuring the quality of educational activities is presented in Table 12. It revealed that all of the 4 indicators show that they “strongly agree.”

Nurse educators should possess expertise in curriculum development and design to ensure the quality of educational activities. Research by Ironside and McNelis (2010) emphasizes the importance of aligning curriculum with program outcomes, integrating evidence-based content, and utilizing active learning strategies to enhance student engagement and learning outcomes. Educators must be proficient in learning assessment and evaluation methods to measure student progress, identify areas for improvement, and ensure program effectiveness. Studies by Oermann and Gaberson (2016) suggest that educators who use valid and reliable assessment tools, provide timely feedback, and conduct outcome evaluations contribute to maintaining educational quality. Nurse educators should employ evidence-based teaching practices grounded in educational research and best practices. Research by Jeffries and Rizzolo (2006) highlights the benefits of using interactive teaching methods, incorporating simulation-based learning, promoting critical thinking skills, and fostering active learning environments to enhance educational quality. Creating a student-centered learning environment is crucial for educational quality. Research by Billings and Halstead (2019) emphasizes educators’ role in promoting active learning, fostering critical thinking, encouraging inquiry-based learning, and providing opportunities for student reflection and self-assessment.

CONCLUSIONS

The results of the study revealed that nurse educators in the Bicol Region demonstrated a very high level of skill competency across all assessed domains. They consistently showed strong abilities in performing the research process, fostering human relations with students, supporting clinical practicums, engaging in instructional design, and promoting students’ proactive learning. Likewise, they excelled in supporting community learning needs, fulfilling organizational roles, using resources for social activities, communicating effectively within their institutions, providing appropriate support for student

learning issues, and ensuring the quality of educational activities. These findings indicate that Bicol nurse educators are well-equipped with the competencies required to deliver quality nursing education and contribute meaningfully to both academic and community settings.

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