

A CROSS-SECTIONAL STUDY TO ASSESS THE THEORY-PRAXIS GAP AMONG NURSING STUDENTS IN TERTIARY CARE HOSPITAL, FAISALABAD

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Abstract

Introduction:

The theory–praxis gap remains a critical challenge in nursing education, as effective clinical practice depends on the successful integration of theoretical knowledge with practical competencies. Practical learning in clinical settings enhances students' awareness and skill development. Nurse leaders and clinical preceptors play a pivotal role in bridging this gap by providing appropriate guidance, supervision, and teaching strategies.

Purpose of the Study:

This cross-sectional study aimed to assess the gap between nursing theory and clinical practice and to identify the underlying reasons contributing to this gap.

Methodology:

Data were collected using a standardized questionnaire. A total of 83 nursing students were recruited through consecutive sampling.

Results:

Analysis revealed that the most significant gap existed in the clinical instructor profile. Nearly 74% of students disagreed with current preceptors' approaches and expressed the need for improved teaching methods related to clinical performance.

Conclusion:

Overall, 38.1% of students strongly agreed and 57.1% agreed that a theory–practice gap exists. Identifying the exact sources of this gap is essential to minimize it and strengthen nursing practice.

INTRODUCTION

The Royal Spanish Academy defines theory as speculative knowledge independent of application, while praxis, derived from ancient Greek, refers to practice or action. Aristotle (384–322 B.C.) was among the first to distinguish theoretical sciences from practical ones, thus formally introducing the theory–praxis debate (Sandoval & Prado, 2017). Although theory and practice may appear conceptually opposite, in

professional disciplines such as nursing they are inseparable, as theory must inform and guide practice (Ajani & Moez, 2011). The theory–praxis gap is commonly described as the discrepancy between what nursing students learn in classrooms and what they encounter during clinical placements (Dadgaran et al., 2012).

The theory–praxis gap is a long-standing issue in nursing education and continues to challenge

newly qualified nurses. While nurses are not expected to know everything, maintaining competence requires continuous alignment between theory and practice (Chapman, 2017). Landers (2000) explained this gap from theoretical and clinical perspectives, highlighting not only a theory–practice gap but also inconsistencies within nursing theories themselves (Salifu et al., 2019). Nursing education requires both classroom instruction and clinical exposure; however, many students perceive theory and practice as separate domains, believing that clinical skills can only be mastered through experience (Nuuyoma & Ashipala, 2018; Salifu et al., 2019). These conflicting expectations often leave new graduates struggling to meet workplace demands (Estrada et al., 2015).

The theory–praxis gap manifests in several ways, including differences between ideal and actual

practice, abstract theory and real-world application, scientific knowledge and routine care, and implicit versus explicit nursing theories (Shahzadi et al., 2017). Clinical learning environments are vital for professional identity formation and skill development, yet they are often unpredictable and beyond educators’ control (Estrada et al., 2015; Salah et al., 2018). Disconnection between classroom success and clinical competence can increase stress and hinder professional development (Tanriverdi et al., 2017). Therefore, understanding students’ perspectives on this gap is essential to enhance clinical preparation, ensure evidence-based practice, and improve patient care outcomes (Matthew & Tucker et al., 2018; Shoghi et al., 2019).

Materials and Methods

A cross-sectional study design was adopted to conduct this research at a tertiary care hospital in Faisalabad. The study population comprised nursing students enrolled in diploma and Bachelor of Science in Nursing programs at the selected tertiary care center. Participants included third- and fourth-year diploma students, sixth-semester BSN students, staff nurses, and internship students. Post-RN students, first-year students, second-semester students, and charge nurses with more than seven years of professional experience were excluded from the study.

Data were collected using a standardized, structured, and validated questionnaire. A sanitized version of the tool was administered to assess nursing students’ perceptions regarding the

theory–praxis gap. A total sample size of 83 participants was calculated using the Raosoft sample size calculator, with a 95% confidence interval, 5% margin of error, and 10% possible error. Consecutive sampling was employed to recruit participants.

Collected data were entered and analyzed using Statistical Package for the Social Sciences (SPSS) version 20. Ethical approval was obtained from the ethics committee of the tertiary care hospital, Faisalabad. All participants were informed about the study objectives and the voluntary nature of participation. Written informed consent was obtained, anonymity was maintained, and confidentiality was ensured throughout the data collection and analysis process.

Results

Table 1: Socio-Demographic Characteristics of Study Participants (n = 83)

Variable	Category	Frequency (n)	Percentage (%)
Age (years)	18–22	73	86.9
	23–27	10	11.9
Level of Study	Third Year	35	41.7
	Fourth Year	33	39.3
	Internship	14	17.9
Department	Medical	16	19.3
	Surgical	16	19.3

	Pediatric	11	13.3
	Obstetric	8	9.6
	Intensive Care Unit (ICU)	3	3.6
	Other	29	34.5

The majority of participants (86.9%) were aged between 18–22 years. Most students were enrolled in the third (41.7%) and fourth year (39.3%) of their nursing programs, while 17.9% were internship students. Regarding clinical placement, participants were predominantly

assigned to medical and surgical departments (19.3% each), followed by pediatric (13.3%) and obstetric units (9.6%), with a smaller proportion from ICU (3.6%) and other departments (34.5%).

Table 2: Perceptions of Nursing Students Regarding Theory–Praxis Gap and Instructor-Related Factors (n = 83)

Question	Response Category	Frequency (n)	Percentage (%)
Real gap between theory and practice	Strongly Agree	32	38.1
	Agree	50	59.5
	Disagree	1	1.2
Instructors play a major role in the gaping process	Strongly Agree	23	27.4
	Agree	40	47.6
	Uncertain	12	14.3
	Disagree	7	8.3
	Strongly Disagree	1	1.2
Instructors belong to the clinical setting they teach	Strongly Agree	19	22.6
	Agree	43	51.2
	Uncertain	11	13.1
	Disagree	5	6.0
	Strongly Disagree	5	6.0
Instructor explains procedures and applies theory	Strongly Agree	15	17.9
	Agree	44	52.4
	Uncertain	5	6.0
	Disagree	16	19.0
	Strongly Disagree	3	3.6
Continuous instructor evaluation reduces the gap	Strongly Agree	17	20.2
	Agree	45	53.6
	Uncertain	12	14.3
	Disagree	5	6.0
	Strongly Disagree	4	4.8
Smaller class size reduces the gap	Strongly Agree	15	17.9
	Agree	37	44.0
	Uncertain	9	10.7
	Disagree	18	21.4
	Strongly Disagree	4	4.8
Practice setting affects the gap	Strongly Agree	16	19.0
	Agree	49	58.3
	Uncertain	9	10.7

Orientation before clinical placement	Disagree	7	8.3
	Strongly Disagree	2	2.4
	Strongly Agree	17	20.2
	Agree	39	46.4
	Uncertain	8	9.5
	Disagree	10	11.9
	Strongly Disagree	9	10.7

The majority of nursing students acknowledged the existence of a significant theory-praxis gap, with 97.6% either agreeing or strongly agreeing. Instructor-related factors were perceived as central contributors, including teaching approaches, clinical background, evaluation practices, and ability to integrate theory into

procedures. Most respondents also emphasized the importance of clinical settings, smaller class sizes, and structured orientation prior to ward placement in reducing the gap. These findings highlight the critical role of clinical instructors and learning environments in bridging theory and practice in nursing education.

Table 3: Factors Related to Clinical Instructors Contributing to the Theory-Practice Gap (n = 83)

Sr. No.	Statement	Strongly Agree n (%)	Agree n (%)	Uncertain n (%)	Disagree n (%)	Strongly Disagree n (%)
1	Clinical instructors have adequate qualifications/certifications to train students	11 (13.1)	15 (18.1)	8 (9.6)	24 (28.9)	25 (30.1)
2	Clinical instructors have enough experience to act as role models	4 (4.8)	2 (2.4)	16 (19.0)	33 (39.3)	28 (33.3)
3	Clinical instructors are available for students most of the time	6 (7.1)	4 (4.8)	13 (15.5)	24 (28.6)	36 (42.9)
4	Clinical instructors conduct case discussions	8 (9.5)	3 (3.6)	21 (25.0)	18 (21.4)	33 (39.3)
5	Orientation by clinical instructors is provided	11 (13.1)	8 (9.5)	9 (10.7)	28 (33.3)	27 (32.1)
6	Clinical nursing preceptors are available in all departments	13 (15.5)	10 (11.9)	13 (15.5)	19 (22.6)	28 (33.3)

The findings clearly indicate that clinical instructor-related factors play a substantial role in widening the theory-practice gap among nursing students. Across all six indicators, a majority of students expressed disagreement or strong disagreement, particularly regarding instructor experience, availability, and teaching practices.

More than 59% of respondents disagreed or strongly disagreed that clinical instructors possessed adequate qualifications and certifications, suggesting perceived inadequacies in pedagogical and clinical preparation. Similarly,

over 72% of students did not view instructors as effective role models, which undermines professional socialization and skill transfer in clinical settings.

Instructor availability emerged as a critical concern, with 71.5% reporting that instructors were not available most of the time, limiting supervision, feedback, and real-time learning opportunities. The lack of case-based discussions (60.7%) further reflects insufficient integration of theoretical knowledge into clinical reasoning and decision-making.

Additionally, inadequate orientation sessions (65.4%) and the limited presence of clinical preceptors across departments (55.9%) highlight systemic gaps in structured clinical support. Collectively, these deficiencies weaken clinical learning environments, reinforce student uncertainty, and perpetuate the disconnect between theoretical instruction and practical application.

Discussion

The present study clearly demonstrates the existence of a substantial theory–practice gap in nursing education, as perceived by undergraduate nursing students. A large majority of participants (38.1% strongly agreed and 59.5% agreed) that a real gap exists between theoretical instruction and clinical practice, while only 1.2% disagreed. These findings indicate an overwhelming consensus among students regarding the presence of this gap. Comparable findings were reported in a cross-sectional study conducted at Benha University, Egypt, where 54.1% of students agreed that a gap existed between theoretical knowledge and clinical practice, although a comparatively higher proportion (45.9%) disagreed, suggesting contextual or institutional differences in clinical training environments.

Availability of clinical nursing preceptors across departments emerged as a critical concern in the current study. Only 15% of students strongly agreed and 12% agreed that clinical nursing preceptors were available in all departments, whereas 57% disagreed or strongly disagreed, and 16% remained uncertain. These findings are consistent with Mahmoud (2014), who reported that 70.5% of students lacked a planned list of clinical activities, and 88.5% experienced insufficient supervision, despite acknowledging that clinical training supported skill acquisition (67.25%). This lack of structured supervision and departmental coverage may significantly hinder the effective translation of theory into practice.

Regarding the experience of clinical instructors as role models, the present study revealed highly concerning results. Only 7% of students agreed or strongly agreed that instructors possessed sufficient experience to act as effective role

models, while 74% disagreed or strongly disagreed. These findings contrast with Hewitt-Thompson et al. (2016), where 42% of students agreed that instructors were experienced enough, although a majority (58%) still expressed dissatisfaction. The sharp discrepancy suggests that instructor experience and mentorship quality may vary substantially across institutions and regions.

The study further identified deficiencies in orientation provided by clinical instructors. Merely 23% of students agreed or strongly agreed that proper orientation was provided, while 66% disagreed or strongly disagreed. This contrasts sharply with McCrae (2012), who reported that 98.4% of students received orientation and supervision prior to clinical placement, highlighting a critical institutional gap in the present setting.

Instructor availability during clinical hours was another major contributor to the theory–practice gap. In this study, only 12% of students agreed or strongly agreed that instructors were available most of the time, while 72% disagreed or strongly disagreed. These findings align with Baird and Miller (2015), who reported limited support for practice change, with only 19% of students identifying nurse managers or clinical leaders as supportive, emphasizing weak mentorship and leadership engagement during clinical learning.

The lack of case-based discussions further reflects inadequate integration of theory into practice. In the current study, 62% of students disagreed or strongly disagreed that clinical instructors conducted case discussions, while 25% were uncertain. In comparison, Almansour (2015) reported more favorable outcomes, with 42% agreeing and 12% strongly agreeing that case discussions were conducted, though a minority still expressed dissatisfaction. This contrast underscores the importance of structured reflective learning strategies in bridging the theory–practice gap.

Interestingly, a comparatively positive finding emerged regarding procedural explanation and application of theory. More than half of the students (53% agreed and 18% strongly agreed) that instructors explained and performed

procedures as taught in theory, although 19% strongly disagreed and 6% remained uncertain. However, McCrae (2012) highlighted that despite such instructional efforts, 95.1% of students experienced resource shortages and insufficient clinical preceptors, indicating that isolated instructional practices may not be sufficient without adequate systemic support.

Finally, perceptions regarding clinical instructor qualifications and certifications further reinforce the study's central findings. Only 31% of students agreed or strongly agreed that instructors possessed specialized qualifications, whereas 59% disagreed or strongly disagreed. Similar conclusions were drawn by Ahmad Saifan (2015), who identified instructor qualifications as a leading contributor to the theory-practice gap, noting that nearly half of students questioned the competency and preparedness of their clinical instructors. These findings are further supported by Amro et al. (2017), who reported that insufficient instructor qualification, limited supervision, and lack of performance monitoring significantly contributed to the persistence of the theory-practice gap.

Conclusion

This study concluded that 38.1% of the students strongly agreed and 57.1% agreed that real gap exist in theory and practice. A lot of students agreed that clinical instructor plays a major in gaping process. Most of the respondent disagreed that clinical instructor having enough clinical experience. Mostly students agreed that changing the ways of learning and teaching in the theory based lectures would minimize the gap in theory and practice. In order to minimizing the theory and practice gap from nursing field it is mandatory to understand where actually gap is exists.

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