

Experiences on Handling Healthcare Advice to Family Members Among Graduating Nursing Students in a Private School

ABSTRACT

Aims: To describe the challenges faced by graduating nursing students in a private school when providing healthcare advice to relatives. Specifically, it described the experiences of the graduating nursing students, challenges in balancing personal relationships with their emerging professional identities and strategies they employ to provide healthcare advice to their family members.

Study Design: A qualitative descriptive design was utilized.

Methods: Eight (8) participants were selected through purposive and snowball sampling based on inclusion and exclusion criteria and the final number was determined by data saturation. Data were gathered through in-depth interviews conducted face-to-face and online after securing approval from the institutional research ethics committee.

Results: Three major themes emerged: (1) Constructing the "Family Nurse" Identity through repeated interactions with relatives; (2) Emotional Weight of Caring as they experienced emotional pressure and mixed feelings but also gained confidence and a sense of responsibility; and (3) Accountability by applying classroom knowledge, verifying information with registered nurses, credible sources, and encouraging proper medical consultation. The findings suggest that professional identity formation, emotional engagement, and ethical responsibility are not confined to clinical environments but are also shaped through everyday family interactions.

Conclusion: The study concludes that providing healthcare advice to family members plays a significant role in shaping the professional identity of graduating nursing students. It is recommended that nursing schools strengthen programs on professional boundaries, emotional resilience, and responsible health communication to better prepare students in managing family expectations alongside their emerging professional roles.

Keywords: experiences, healthcare advice, family members, graduating nursing student

1. INTRODUCTION

In the Philippines, individuals have responded to illness guided by cultural values of "*pakikipagkapwa*" and a strong sense of family interdependence, which have often led them to seek medical advice from relatives or family individuals before consulting healthcare professionals (Kawi et al., 2024). Within this context, nursing students have frequently been perceived as knowledgeable and reliable sources of information due to their association with the medical field, which

has led family members to seek informal health advice from them within the household (Diana et al., 2023). Nursing students' professional identity formation has been shaped by personality, resilience, and lived experiences, and is an ongoing process (Wu et al. 2024), which has often led them to be viewed by their family members as "almost professionals," thereby blurring the boundaries between learning and actual practice. The research problem, therefore,

has centered on understanding the experiences, perceptions, and challenges faced by nursing students when giving healthcare advice to family members, and how these have affected their professional identity, ethical judgement, and confidence. Globally, individuals have often relied on family members and trusted friends for health information before consulting healthcare professionals (Teo et al., 2021). Nursing students have often applied what they learned in school to their home and community settings, showing how their professional role has developed outside clinical training (Diana et al., 2023). However, this has also caused stress when students were asked questions they were not trained to answer. Moral distress occurs among nursing students when they feel responsible for giving advice or care beyond their current abilities, which has affected their emotional well-being and confidence (Dehkordi et al., 2024).

In the Philippine setting, health decisions have often been made within families. Many Filipinos have consulted relatives or friends about health problems before seeking professional medical advice. In underserved areas, 59.6% of Filipinos have relied mainly on family or friends for health information, while only 12.2% have consulted healthcare professionals (Kawi et al., 2024). Informal health consultations with family and friends have been common, often sought from individuals perceived as knowledgeable, accessible, and familiar with personal relationships, and confidence further shaping these interactions (Amran et al., 2021). While this has shown trust and respect for nursing students, it has also created pressure when expectations went beyond what they were taught in school. Balancing the dual roles of being a family member and a nursing student may cause role conflict, which can affect their focus and emotional well-being (O'Connor, McCarthy, & O'Shea, 2022).

Ideally, nursing students should provide advice within the scope of their learning and refer cases that require professional attention. This has been emphasized in the International Council of Nurses Code of Ethics (2021) and the Professional Regulation Commission Philippine Code of Ethics for Nurses (2004), which both highlighted honesty, competence, and responsibility in giving health-related

information. This has also supported the United Nations Sustainable Development Goal: Good Health and Well-being, which has promoted health education, responsible communication, and safe health practices for all (Martin, 2025). By following these standards, nursing students could help promote accurate health information within families and prevent misunderstandings that may affect care.

Despite these guidelines, research has remained limited on how nursing students have experienced the challenges of giving healthcare advice to family members and how such experiences have shaped their professional growth.

Understanding this situation has been important both academically and socially. Academically, it has contributed to nursing education by helping instructors design lessons that prepare students to handle informal health consultations more confidently and ethically. Practically, it may guide students in setting boundaries and developing communication skills when interacting with their families. Socially, it has highlighted how nursing students contribute to improving health awareness and literacy in their communities.

Given these points, this study seeks to explore the perception, strategies, experiences, and challenges of nursing students in a private school in providing healthcare advice to family members and to determine how these situations influence their professional identity, ethical judgement, and confidence.

1.2 AIM OF THIS RESEARCH

This study aims to describe the challenges graduating nursing students face in a private school when handling healthcare advice to family members.

Specifically, the study aims were:

1. What are the experiences of graduating nursing students when giving healthcare advice to their family members?
2. What challenges do graduating nursing students face when asked for healthcare advice in balancing personal relationships with their emerging professional identities?

3. What strategies do graduating nursing students employ to provide healthcare advice to their family members?

1.3 SIGNIFICANT OF THE STUDY

The results of this study can benefit the following:

Nursing Students. The findings can serve as a source of insight about the challenges and responsibilities that come when giving healthcare advice to family members. It can also help them become more aware of their professional boundaries, improve their ways in handling pressure from role expectations, and prepare them for their future professional roles.

Clinical Instructors. The results of this study can serve as a guide to improving teaching approaches that address role conflicts, ethical decision-making, and communication. By recognizing the real-life situations that students encounter in their homes, clinical instructors can better plan discussions and mentoring that build the students' confidence and prepare them to handle similar situations.

School Administrators. This study can emphasize the importance of institutional support systems that promote the holistic development of nursing students. The findings can serve as a basis for creating programs or seminars that can help the students manage academic demands and personal and family expectations.

For Families. The study highlights the importance of understanding the nursing students' capabilities and limitations when giving healthcare advice. This awareness can help families understand the students' roles, provide support, lessen expectations, and foster a more respectful environment for the professional growth of the students.

For Communities. The study promotes awareness of proper health-seeking behavior within the community. By understanding the role of nursing students who are still in training, community members are encouraged to seek healthcare advice and disease management from licensed healthcare professionals, ensuring safer and more accurate healthcare practices.

For Future Researchers. This study can serve as baseline information and a reference for future research related to the

expectations placed on healthcare students. It can also inspire comparative research in other cultural and academic settings, enhancing the body of knowledge in nursing education and family health dynamics.

2. LITERATURE REVIEW

Providing healthcare advice within family settings has often been influenced by cultural values, accessibility of information sources, and trust in familiar individuals. In the Philippine context, health decisions have frequently been made within families, where relatives were commonly consulted before healthcare professionals (Kawi et al., 2024). Nursing students have often been perceived as knowledgeable sources of health information because of their academic training, which resulted in their involvement in informal health consultations within the household (Diana et al., 2023).

Professional identity formation among nursing students has been described as a gradual process shaped through academic preparation, clinical exposure, and social interaction (Marold et al., 2025). Stronger self-efficacy and resilience were associated with increased confidence in applying learned knowledge in real-life situations, including advising family members on health concerns (Mei et al., 2022; Wu et al., 2024). However, role expectations placed on students outside clinical settings were reported to contribute to emotional strain and uncertainty, particularly when responsibilities exceeded their level of competence (O'Connor et al., 2022).

Moral distress was commonly experienced when nursing students were expected to respond to healthcare concerns beyond their professional preparation, which negatively affected confidence and emotional well-being (Dehkordi et al., 2024; Nezamzadeh et al., 2025). Informal consultations within families were further influenced by accessibility, trust, and familiarity, although concerns regarding ethical boundaries and safety remained evident (Amran et al., 2021). These findings suggested that nursing students frequently navigated expectations shaped by both cultural values and developing professional identity when providing healthcare advice within family contexts (Teo et al., 2021; Kawi et al., 2024).

3. THEORETICAL UNDERPINNING

This study was anchored on the constructivist-interpretivist paradigm, which assumed that knowledge was constructed through lived experiences and social interaction rather than discovered as a single objective reality (Tanlaka & Aryal, 2025). This paradigm was considered appropriate because the study explored the meanings graduating nursing students attached to their experiences of providing healthcare advice within their families (Jensen & Jerpseth, 2023). A phenomenological orientation was also applied to examine the essence of participants' lived experiences in managing expectations related to informal healthcare advice. Phenomenology enabled deeper understanding of emotional, relational, and ethical dimensions associated with these experiences (Faraji et al., 2024; Nezhad et al., 2025).

The study was further supported by Dorothea Orem's Self-Care Deficit Theory, which explained that individuals sought assistance from more knowledgeable persons when they were unable to meet their own self-care needs independently (Gonzalo, 2024). This framework supported the tendency of family members to rely on graduating nursing students for healthcare guidance. In addition, Benner's Novice to Expert Theory described how competency developed through experiential learning, resulting in improved confidence, communication skills, and ethical judgment among graduating nursing students nearing professional practice (Brown, 2024). The study was also guided by Role Theory, which explained that individuals experienced role conflict when expectations from multiple social roles became unclear or competing (Mwakyusa & Mcharo, 2024). Complementing this perspective, Family Systems Theory emphasized that changes in one member's role influenced communication patterns and emotional relationships within the family unit (Pusa et al., 2022). These frameworks collectively supported the interpretation of nursing students' experiences in providing healthcare advice within family settings.

4. OBJECTIVES OF THE STUDY

This study was conducted to explore the experiences, challenges, and strategies of

graduating nursing students in a private college when providing healthcare advice to their family members, and to determine how these experiences influenced their professional identity while balancing personal and emerging professional role expectations during Academic Year 2025–2026.

5. METHODOLOGY

5.1 Research Design

The study employed a qualitative descriptive research design. This design is appropriate when the objective is to provide a clear and straightforward description of participants' experiences in their natural context without extensive interpretation (Hall & Liebenberg, 2024). Qualitative descriptive research focuses on presenting participants' perceptions, feelings, and experiences in their own words, allowing for a factual and low-inference account of the phenomenon (Sandelowski, 2010). For the context of the study, the design described the experiences of graduating nursing students in providing healthcare advice to their family members. It also explored how these experiences influenced their communication, decision-making, and professional roles.

5.2 Instrument

The researchers used a researcher-made semi-structured interview guide as the primary instrument for data collection. This instrument consisted of open-ended questions designed to gather detailed and meaningful descriptions of participants' experiences. The interview guide included a central question focusing on participants' overall experiences in providing healthcare advice to family members. This was followed by several guide questions exploring specific areas such as communication, emotional responses, challenges encountered, and strategies used. Probing questions were also employed to clarify responses and obtain deeper insights. Prior to data collection, the interview guide was reviewed to ensure clarity, relevance, and alignment with the research objectives.

5.3 Participants

The participants of this study were graduating fourth-year Bachelor of Science in Nursing students enrolled during Academic Year 2025–2026 in a selected private college in Iloilo City. Using purposive sampling, a total of eight (8) participants were selected from a population of 518 fourth-year nursing students. They were chosen based on the following inclusion criteria: graduating nursing students, those who had experience providing healthcare advice to family members, and those who were willing to participate voluntarily. Students who were on leave during the data collection period were excluded. Snowball sampling was also utilized to identify additional participants, wherein initial participants referred other individuals who met the inclusion criteria. The sample size was determined through data saturation, as no new themes or insights emerged from the data. The participants were considered appropriate for the study as their experiences provided meaningful insights into the phenomenon of providing healthcare advice within the family context.

5.4 Research Setting

This research study was conducted at a private college in Molo, Iloilo City, a classified urban area. The institution was appropriate for the study setting as it offers a Bachelor of Science in Nursing program with a large population of students, including 518 graduating fourth-year nursing students. This provided the researchers with access to participants who had relevant experiences in providing healthcare advice to their family members. The setting also allowed for the collection of rich and meaningful data, as the participants possessed both academic knowledge and personal experiences related to the phenomenon under study. Data collection was conducted in a quiet and private room within the nursing department to ensure confidentiality and minimize distractions, while online interviews were also utilized through secure platforms for participants who were unavailable for face-to-face interaction.

5.5 Data Gathering Procedure

Following the necessary approval from the Research Ethics Committee and the necessary permissions from the institution, data collection was conducted using the semi-structured interview guide. Consent forms were distributed and signed by participants who voluntarily agreed to take part in the study. Interviews were conducted either face-to-face or online, depending on participants' availability. Each interview began with the main question, followed by guide questions and probing questions to explore responses in depth. With participants' permission, interviews were audio-recorded and supplemented with field notes. A follow-up or return interview was conducted when necessary to clarify responses and validate interpretations through member checking, ensuring the accuracy and credibility of the data collected.

5.6 Data Analysis

The data collected from the interviews were transcribed verbatim and organized systematically. Each participant was assigned a corresponding code (e.g., P1, P2) to maintain confidentiality. The study utilized thematic analysis following the framework of Braun and Clarke (2022), which allowed the researchers to identify, analyze, and report patterns within the data. The analysis began with familiarization, where the researchers repeatedly read the transcripts to gain a deeper understanding of the participants' responses. This was followed by the generation of initial codes derived from significant statements relevant to the research objectives. Related codes were then grouped to form broader themes, which were carefully reviewed and refined to ensure consistency and accuracy. The themes were subsequently defined and clearly named to reflect the essence of the participants' experiences. Finally, a narrative report was produced, supported by direct responses from the participants. This systematic process enabled the researchers to develop meaningful themes that accurately represented the participants' experiences.

6. RESULTS AND DISCUSSION

Thematic analysis revealed three interrelated themes: Constructing the “Family Nurse” Identity, Emotional Weight of Caring, and Accountability, which collectively illustrate how nursing students experience the integration of professional roles within the family context. These findings suggest that professional identity formation, emotional engagement, and ethical responsibility are not confined to clinical environments but are also shaped through everyday family interactions. This supports existing literature emphasizing that nursing identity develops through social recognition, experiential learning, and relational contexts beyond formal education.

Theme 1: Constructing the “Family Nurse” Identity

Participants described being positioned as a primary source of health-related knowledge within their families. As family members increasingly relied on them for advice and guidance, students began to internalize a “family nurse” identity. This role provided a sense of validation and purpose, while also creating pressure due to expectations that exceeded their level of training.

This finding highlights the early formation of professional identity through social interaction. Consistent with previous studies, professional identity begins to develop prior to licensure and is shaped by recognition, trust, and social expectations (Maginnis, 2018; Lin et al., 2023). Identity formation is further strengthened when individuals are entrusted with responsibilities aligned with professional roles (Tso & Yousuf, 2015). While existing literature often situates this process within academic and clinical environments, the present findings extend this perspective by demonstrating that family contexts also serve as meaningful sites of professional socialization.

Theme 2: Emotional Weight of Caring

Participants reported experiencing a combination of positive and negative emotions when providing healthcare advice to family members. Feelings of pride,

fulfillment, and validation were evident when their knowledge was acknowledged. At the same time, these emotions were accompanied by anxiety, hesitation, and fear of making mistakes, particularly due to the potential consequences of incorrect advice..

These findings indicate that emotional responses are not merely reactions but play a significant role in shaping professional development. Similar to existing literature, nursing students often experience emotional tension during early caregiving experiences, where responsibility is present but competence is still developing (Aryuwat et al.). Rather than viewing emotional weight solely as a challenge, the findings suggest that it contributes to reflective learning and heightened awareness of professional responsibility. The coexistence of confidence and uncertainty reflects the transitional nature of students’ roles, where emotional engagement becomes a critical component of learning and professional growth.

Theme 3: Accountability

A strong sense of accountability emerged as participants became more aware of the potential impact of their advice on family members’ health. This awareness led students to approach situations with caution, verify information, and recognize the limits of their knowledge. Participants emphasized the importance of maintaining professional boundaries and referring family members to licensed healthcare professionals when necessary.

This finding underscores that ethical responsibility is already being developed even before formal professional practice. Consistent with nursing literature, accountability is a core component of professionalism, particularly in ensuring patient safety and adherence to scope of practice (Mbalinda et al., 2024). The present study extends this understanding by showing that accountability is not only learned in clinical settings but is also practiced within family environments. The emotional closeness of family relationships appears to intensify this sense of responsibility, reinforcing cautious decision-making and ethical awareness.



Fig. 1. Conceptual Framework

CONCLUSION

The study concludes that nursing students, despite differences in their clinical exposure and learning experiences, generally develop a sense of responsibility and confidence when assuming the role of the “family nurse” within their household. Their experiences reflect both positive and challenging aspects, as they are often relied upon to provide health advice, perform basic care, and make health-related decisions for family members. While this role contributes to the development of their clinical judgement, communication skills, and sense of accountability, it also exposes them to emotional pressure, role confusion, and ethical dilemmas.

Moreover, the findings indicate that the experience of acting as a “family nurse” influences the professional growth of nursing students to strengthen their readiness for real-world practice. However, their involvement remains selective, as they tend to set limitations when situations exceed their level of competence. This highlights that while knowledge and skills are important, confidence and clear role boundaries play a crucial role in how nursing students apply their learning in real-life situations. Overall, the study emphasizes that both competence and emotional readiness shape how nursing students navigate informal healthcare roles within their families.

RECOMMENDATION

For the Nursing Students, we commend their willingness to support their families by applying their knowledge and skills in real-life situations. Their sense of responsibility and initiative reflects their developing professional identity. However, it is observed that challenges such as emotional burden, pressure to give accurate advice, and difficulty in setting boundaries are still present. Therefore, it is recommended that nursing students be encouraged to develop stronger communication skills, critical thinking, and clear professional boundaries when dealing with family concerns. Engaging in reflective practices and seeking guidance from instructors may help them manage expectations and maintain ethical practices.

For the Nursing Educators, we acknowledge their vital role in shaping students’ competence and professional behaviors. While students are gaining clinical knowledge, findings suggest a need for further preparation in handling informal healthcare situations within family settings. Therefore, it is recommended that educators incorporate discussions, case scenarios, or simulation activities that address real-life situations such as giving health advice to relatives, managing emotional involvement, and establishing professional boundaries. This will better prepare students for both clinical and personal applications of their role. For the Institutions, we recognize their contribution in providing a supportive learning environment for nursing students. However, the findings indicate that students may benefit from structured support in managing the dual role of being a student and a “family nurse”. It is recommended that institutions implement programs or seminars focusing on ethical decision-making, communication strategies, and stress management. Establishing clear guidelines on the limitations of student practice outside of the clinical settings may also help prevent role confusion and promote safe practices.

For Future Researchers, we appreciate their role in expanding knowledge related to nursing students’ lived experiences. This study highlights the important insights but also suggests the presence of other influencing factors such as cultural expectations, family dynamics, and level of training. Therefore, it is recommended that

future studies explore these variables using qualitative or mixed methods approaches. Conducting research across different institutions or populations may also enhance the generalizability of findings and provide a deeper understanding of the “family nurse” phenomenon.

COMPETING INTERESTS

The authors declared that there are no competing interests in this study.

ETHICAL APPROVAL AND CONSENT

Ethical approval for this study was granted by the Iloilo Doctors’ Institutional Research Ethics Committee (Approval No. IDIREC-2025.OI_192). All participants were provided with an informed consent after receiving comprehensive information regarding the study’s objectives, voluntary participation, and associated risks and benefits. Participants’ right to withdraw at any part during the interview was upheld, and confidentiality and anonymity were maintained throughout the study.

DISCLAIMER (ARTIFICIAL INTELLIGENCE)

The authors declare that generative AI tools, including CHATGPT and Google Gemini, were utilized to support the identification of relevant literature and supplementary information. The authors take full responsibility for the verification and validation of all content, ensuring its accuracy, integrity, and originality.

REFERENCES

Abu-Baker, N. N., AbuAlrub, S., Obeidat, R. F., & Assmairan, K. (2021). Evidence-based practice beliefs and implementations: a

cross-sectional study among undergraduate nursing students. *BMC Nursing*, *20*(1), 13. <https://doi.org/10.1186/s12912-020-00522-x>

Ahmed, S. K. (2024). Sample size for saturation in qualitative research: debates, definitions, and strategies. *Journal of Medicine Surgery and Public Health*, *5*, 100171. <https://doi.org/10.1016/j.glmedi.2024.100171>

Ahmed, S. K. (2024). The pillars of trustworthiness in qualitative research. *Journal of Medicine, Surgery and Public Health*, *2*, 100051. <https://doi.org/10.1016/j.glmedi.2024.100051>

Alimoradi, Z., Jafari, E., Lin, C. Y., Rajabi, S., Hosseini Marznaki, Z., Soodmand, M., Potenza, M. N., & Pakpour, A. H. (2023). Estimation of moral distress among nurses: A systematic review and meta-analysis. *Nursing Ethics*, *30*(3), 521–537. <https://doi.org/10.1177/09697330221135212>

Amran, M. M., Kopit, A. B., Kranc, H. A., & Peleg, R. (2021). The prevalence, reasons and attitudes for the practice of informal medicine. *BMC Family Practice*, *22*(1). <https://doi.org/10.1186/s12875-020-01362-z>

Anim-Wright, K. (2024). Trustworthiness and rigor in qualitative research in the marketing discipline. *Journal of Humanities, Arts and Social Science*, *8*(1), 41–53. <https://doi.org/10.26855/jhass.2024.01.007>

Aryuwat, P., Holmgren, J., Asp, M., Radabutr, M., & Lövenmark, A. (2024). Experiences of nursing students regarding challenges and support for resilience during clinical education: A qualitative study. *Nursing Reports*, *14*(3), 120. <https://doi.org/10.3390/nursrep14030120>

Benner’s from novice to expert - Nursing Theory. (2021, September 3). *Nursing Theory*. <https://nursingtheory.org/theories-and-models/from-novice-to-expert>

Bisht, R. (2025, August 25). What is purposive sampling? Methods, techniques, and examples. *Researcher.Life*. <https://researcher.life/blog/article/what-is-purposive-sampling-methods-techniques-and-examples/>

- Blau, A., Sela, Y., & Grinberg, K. (2023). Public perceptions and attitudes on the image of nursing in the wake of COVID-19. *International Journal of Environmental Research and Public Health*, 20(6), 4717. <https://doi.org/10.3390/ijerph20064717>
- Bowen, M. (1978). *Family therapy in clinical practice*. Jason Aronson.
- Bradshaw C., Atkinson S., Doody O. (2017). Employing a qualitative description approach in health care research. *Global Qualitative Nursing Research*, 4, 1–8. <https://doi.org/10.1177/2333393617742282>
- Braun, V., & Clarke, V. (2022). Thematic analysis. In *Springer eBooks* (pp. 1–7). https://doi.org/10.1007/978-3-319-69909-7_3470-2
- Bree, R. T., & Gallagher, G. (2016, June 30). Using Microsoft Excel to code and thematically analyse qualitative data: A simple, cost-effective approach. *AISHE-J: The All Ireland Journal of Teaching and Learning in Higher Education*, 8(2), 2811–28114.
- Brown, C. K. (2025). Novice to expert nursing theorist: Patricia Benner. *The Art of Nursing: Humanizing Healthcare*. <https://open.ocolearnok.org/artofnursing/chapter/chapter-4-skill-of-involvement/>
- Browne, C., Wall, P., Batt, S., & Bennett, R. (2018). Understanding perceptions of nursing professional identity in students entering an Australian undergraduate nursing degree. *Nurse Education in Practice*, 32, 90–96. <https://doi.org/10.1016/j.nepr.2018.07.006>
- Coloraf, K. J., & Evans, B. (2016). Qualitative descriptive methods in health science research. *HERD: Health Environments Research & Design Journal*, 9(4), 16–25. <https://doi.org/10.1177/1937586715614171>
- Consortium of European Social Science Data Archives. (2023). *ELSST thesaurus*. <https://thesauri.CESSDA.eu/elsst-4/en/page/b06fa4cb-e156-4acc-a79a-5cd2ad75570d>
- Creswell, J. W. (2007). *Qualitative Inquiry and Research Design: Choosing among five approaches*. Sage.
- Definition of family. (2023, October 1). HRSA. <https://www.hrsa.gov/get-health-care/affordable/hill-burton/family>
- Dehkordi, M. L., Kianian, T., & Nikbakht Nasrabadi, A. (2024). Nursing students' experience of moral distress in clinical settings: A phenomenological study. *Nursing Open*, 11(3), e2141. <https://doi.org/10.1002/nop2.2141>
- Diana, M. P. L. J., Cercado, F. G., Chiu, P. Z., De Justo, P. A., De Silva, A. R., & Oducado, R. M. F. (2023). Filipino nursing students' health promoting behaviors during pandemic. *Nurse Media Journal of Nursing*, 13(1), 1–11. <https://doi.org/10.14710/nmjn.v13i1.49896>
- Dorothea Orem's self-care deficit theory: A comprehensive guide with examples. (2025, February 18). *NursingTheories*. <https://nursingtheories.org/dorothea-orems-self-care-deficit-theory/>
- Faraji, A., Jalali, A., Khatony, A., & Jalali, R. (2024). Exploring nurses' experiences of recommended patient care: a descriptive phenomenological study. *BMC Nursing*, 23(1). <https://doi.org/10.1186/s12912-024-01736-z>
- Foster, K., & McCloughen, A. (2020). Developing emotional intelligence in undergraduate nursing students. *Nurse Education Today*, 91, 104463. <https://doi.org/10.1016/j.nedt.2014.11.009>
- Frontiers in Research Metrics and Analytics. (2023). Psychometric properties of the TACT framework—Determining rigor in qualitative research. <https://doi.org/10.3389/frma.2023.1276446>
- Gonzalo, A. (2024). Dorothea Orem: Self-care deficit theory. *Nurseslabs*. <https://nurseslabs.com/dorothea-orems-self-care-theory/>
- Groenewald, T. (2004). A phenomenological research design illustrated. *International*

Journal of Qualitative Methods, 3(1),
<https://doi.org/10.1177/160940690400300104>

Hall, S., & Liebenberg, L. (2024). Qualitative description as an introductory method to qualitative research for master's-level students and research trainees. *International Journal of Qualitative Methods*, 23. <https://doi.org/10.1177/16094069241242264>

Jensen, K. T., & Jerpseth, H. (2023). Nursing students' perception of nursing knowledge: A qualitative study. *Nursing Open*. <https://doi.org/10.1002/nop2.1964>

Johnson, J. L., Adkins, D., & Chauvin, S. (2020). A review of the quality indicators of rigor in qualitative research. *American Journal of Pharmaceutical Education*, 84(1), 7120. <https://doi.org/10.5688/ajpe7120>

Kakar, Z. U. H., Rasheed, R., Rashid, A., & Akhter, S. (2023). Criteria for assessing and ensuring the trustworthiness in qualitative research. *International Journal of Business Reflections*, 4(2), 150–173. <https://doi.org/10.56249/ijbr.03.01.44>

Kawi, J., Fudolig, M., Serafica, R., Reyes, A. T., Sy, F., Leyva, E. W. A., & Evangelista, L. S. (2024). Health information sources and health-seeking behaviours of Filipinos living in medically underserved communities. *Nursing Open*, 11(3), e2140. <https://doi.org/10.1002/nop2.2140>

Khatony, A., Soroush, A., Andayeshgar, B., & Abdi, A. (2020). Nursing students' perceived consequences of self-medication: a qualitative study. *BMC Nursing*, 19(1). <https://doi.org/10.1186/s12912-020-00460-8>

Lincoln, Y. S., & Guba, E. G. (1986). But is it rigorous? Trustworthiness and authenticity in naturalistic evaluation. <https://hlanthorn.com/wp-content/uploads/2016/04/lincoln-and-guba-1986-but-is-it-rigorous-trustworthiness-and-authenticity-in-qualitative.pdf>

Lin, S., Chen, S., Tu, Q., Xu, X., Xie, S., Yang, B., Zhang, Q., & Chen, L. (2023). Barriers and facilitators to the formation of professional identity among nursing students: A four-year longitudinal qualitative study.

Nurse Education Today, 134, 106087. <https://doi.org/10.1016/j.nedt.2023.106087>

Maginnis, C. (2018). A discussion of professional identity development in nursing students. *Journal of Perspectives in Applied Academic Practice*, 6(1), 91–97. <https://doi.org/10.14297/jpaap.v6i1.302>

Marold, S. M. G., Strouse, S. M., & Butcher, D. (2025). Professional identity in nursing: A narrative review of the ISPIN definition and domains usage. *SAGE Open Nursing*, 11. <https://pmc.ncbi.nlm.nih.gov/articles/PMC12033407/>

Martin F. (2025, September 10). Health - *United Nations Sustainable Development*. *United Nations Sustainable Development*. <https://www.un.org/sustainabledevelopment/health/>

Mbalinda, S. N., Najjuma, J. N., Gonzaga, A. M., Livingstone, K., & Musoke, D. (2024). Understanding and barriers of professional identity formation among current students and recent graduates in nursing and midwifery in low resource settings in two universities: a qualitative study. *BMC Nursing*, 23(1), 146. <https://doi.org/10.1186/s12912-024-01795-2>

Mead, G. H. (1934). *Mind, self, and society*. University of Chicago Press. <https://archive.org/details/in.ernet.dli.2015.215637>

Mei, X. X., Wang, H. Y., Wu, X. N., Wu, J. Y., Lu, Y. Z., & Ye, Z. J. (2022). Self-efficacy and Professional Identity among Freshmen Nursing Students: A Latent Profile and Moderated Mediation analysis. *Frontiers in Psychology*, 13. <https://doi.org/10.3389/fpsyg.2022.779986>

Min, J., Kim, H., & Yoo, J. (2021). Effects of Self-Esteem, Problem-solving ability, and professional nursing values on the career identity of nursing college students in South Korea: a cross-sectional study. *International Journal of Environmental Research and Public Health*, 18(16), 8531. <https://doi.org/10.3390/ijerph18168531>

Mwakyusa, J. R. P., & Mcharo, E. W. (2024). Role ambiguity and role conflict effects on

- employees' emotional exhaustion in healthcare services in Tanzania. *Cogent Business & Management*, 11(1). <https://doi.org/10.1080/23311975.2024.2326237>
- National Council of State Boards of Nursing. (2024). A nurse's guide to professional boundaries. <https://www.ncsbn.org/nursing-regulation/practice/professional-boundaries.page>
- Neergaard, M. A., Olesen, F., Andersen, R. S., & Sondergaard, J. (2009). Qualitative description – the poor cousin of health research? *BMC Medical Research Methodology*, 9(1), 52. <https://doi.org/10.1186/1471-2288-9-52>
- Neubauer, B. E., Witkop, C. T., & Varpio, L. (2019). How phenomenology can help us learn from the experiences of others. *Perspective on Medical Education*, 8(2). <https://doi.org/10.1007/S40037-019-0509-2>
- Nezamzadeh, M., Nouri, J. M., Moayed, M. S., Pishgooie, S. a. H., & Khaghanizadeh, M. (2025). Factors affecting the formation of ethical conflicts in the education of nursing students: a meta-synthesis study. *Iranian Journal of Nursing and Midwifery Research*, 30(5), 625–633. https://doi.org/10.4103/ijnmr.ijnmr_210_24
- Nezhad, M. S., Abdi, A., & Ahmadi, M. (2025). Exploring the experiences and perceptions of nursing students in utilizing artificial intelligence: a descriptive phenomenological study. *BMC Nursing*, 24(1). <https://doi.org/10.1186/s12912-025-03392-3>
- O'Connor, A., McCarthy, G., & O'Shea, D. (2022). Impact of role conflicts and self-efficacy on academic performance of graduate-entry healthcare students: A lagged study. *Nursing & health sciences*, 24(2), 387–394. <https://doi.org/10.1111/nhs.12934>
- Park, K. O., Park, S. H., & Yu, M. (2018). Physicians' experience of communication with nurses related to patient safety. A phenomenological study using the Colaizzi method. *Asian Nursing Research*, 12(3), 166–174. <https://doi.org/10.1016/j.anr.2018.06.002>
- Peterbuwert P. (2013, January 16). The Reflective Practitioner by Donald Schon. *Gray's Research Reading Group*. <https://graysreadinggroup.wordpress.com/2012/12/18/the-reflective-practitioner-by-donald-schon/>
- Professional Regulation Commission. (2004). *Nursing Code of Ethics (2004-220)*. <https://prc.gov.ph/sites/default/files/NURSING-CodeEthics-2004-220.pdf>
- Pusa, S., Saveman, B. I., & Sundin, K. Family systems nursing conversations: influences on families with stroke. *BMC Nursing* 21, 108 (2022). <https://doi.org/10.1186/s12912-022-00873-7>
- Salameh, B. M., Malak, M. Z., Obiedate, K. M., & Bani-Hani, M. (2025). Relationship between professional identity, professional self-concept, and academic burnout among Palestinian fourth-year nursing students. *International Journal of Educational Research*, 133, 102743. [https://doi.org/10.1016/S0883-0355\(25\)00216-2](https://doi.org/10.1016/S0883-0355(25)00216-2)
- Simply Psychology. (2023, July 31). Snowball Sampling Method: Techniques & Examples. *Simply Psychology*. <https://www.simplypsychology.org/snowball-sampling.html>
- Sandelowski M. (2010). What's in a name? Qualitative description revisited. *Research in Nursing and Health*, 33(1), 77–84. <https://doi.org/10.1002/nur.20362>
- Tanlaka, E. F., & Aryal, S. (2025). Interpretivist Constructivism: a valuable approach for qualitative nursing research. *Open Journal of Therapy and Rehabilitation*, 13(01), 8–19. <https://doi.org/10.4236/ojtr.2025.131002>
- Teo, K., Churchill, R., Riadi, I., Kervin, L., & Cosco, T. (2021). Help-seeking behaviours among older adults: A scoping review protocol. *BMJ Open*, 11(2), e043554. <https://doi.org/10.1136/bmjopen-2020-043554>
- Tso, S., & Yousuf, A. (2015). Student giving health advice to family and friends. *The*

Clinical Teacher, 13(3), 219–222.
<https://doi.org/10.1111/tct.12413>

Wu, P. (2024). The impact of clinical practice stress on nursing professional competence among undergraduate nursing students: A cross-sectional study. *Florence Nightingale Journal of Nursing*, 32(3), 206–214.
<https://doi.org/10.5152/fnjin.2024.24102>

Wu, X., Lu, Y., Zeng, Y., Han, H., Sun, X., Zhang, J., Wei, N., & Ye, Z. (2024). Personality portraits, resilience, and professional identity among nursing students: a cross-sectional study. *BMC Nursing*, 23(1).
<https://doi.org/10.1186/s12912-024-02007-7>

Zhang, Y., Li, Y., Wang, X., & Liu, J. (2024). Moral distress and compassion fatigue among nursing interns: The mediating roles of moral resilience and professional identity. *BMC Nursing*, 23, 307.
<https://doi.org/10.1186/s12912-024-02307-y>

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