Exploring the Relationship between Role Ambiguity and Clinical Learning Achievement among B.Sc. Nursing Students: An Indian Perspective

Sharma A

Nursing Tutor, College of Nursing RDASMC Ayodhya

Abstract: *Clinical learning is the cornerstone of nursing education, providing students the opportunity to integrate theoretical knowledge into clinical practice. However, ambiguity in student roles during clinical postings often leads to stress, poor confidence, and diminished learning achievement. This review explores the relationship between role ambiguity and clinical learning achievement among B.Sc. Nursing students, particularly in the Indian context. Evidence from national and international literature suggests that unclear role expectations and supervision gaps hinder student performance and satisfaction. Indian nursing education faces unique challenges- hierarchical work culture, faculty shortages, and inconsistent supervision- which intensify ambiguity. The review recommends strategies such as structured orientation, learning contracts, and faculty–ward collaboration to enhance role clarity and learning outcomes.*

Keywords: Role ambiguity, Clinical learning, Nursing students, India, Clinical achievement, Nursing education

1. Introduction

In India, the B.Sc. Nursing programme serves as a foundation for preparing professional nurses capable of meeting global healthcare demands. The clinical learning experience constitutes nearly 60% of this programme, as mandated by the Indian Nursing Council (INC, 2022). Yet, the success of this component largely depends on how well-defined the students' roles and expectations are within clinical settings.

Role ambiguity arises when nursing students are uncertain about their clinical responsibilities, authority, and evaluation criteria. This uncertainty often stems from unclear communication between college faculty and ward staff, lack of structured supervision, and variations in hospital policies (Gupta & Tiwari, 2020). Consequently, role ambiguity negatively impacts students' confidence, motivation, and clinical skill acquisition (Sharma & Rani, 2022).

This review aims to examine the link between role ambiguity and clinical learning achievement within Indian nursing education and propose actionable recommendations to improve clarity, satisfaction, and clinical performance.

Objectives

1) To review existing literature on role ambiguity in nursing education.
2) To explore its relationship with clinical learning achievement among B.Sc. Nursing students.
3) To identify Indian contextual factors contributing to role ambiguity.
4) To recommend interventions for improving role clarity and clinical achievement in Indian nursing institutions.

2. Conceptual Framework

The concept of role ambiguity originates from the work of Rizzo et al. (1970), who defined it as the lack of clarity regarding expected behaviour associated with a particular role. In the context of nursing education, ambiguity arises when students do not clearly understand:

- What tasks they are permitted or expected to perform;
- Who supervises or evaluates them;
- How their clinical performance is assessed.

Clinical learning achievement refers to the student's ability to translate theoretical learning into practice, demonstrate psychomotor competence, and achieve predefined clinical objectives (Angasu et al., 2021).

A simplified conceptual relationship may be represented as:

Role Clarity → Self-efficacy → Confidence → Clinical Learning Achievement

3. Review of Literature

a) Indian Evidence

Indian nursing research has only recently begun exploring the psychosocial aspects of clinical learning:

- **Dasgupta (2012)** investigated nurses in Kolkata hospitals and found that role ambiguity significantly contributed to burnout and job dissatisfaction, indirectly affecting learning and professional growth.
- **Gupta & Tiwari (2020)** surveyed 300 B.Sc. Nursing students in Uttar Pradesh and identified "unclear expectations during clinical postings" as the most frequent stressor affecting clinical performance.
- **Abraham et al. (2021)**, in a Kerala-based study, found that lack of supervision and vague clinical objectives reduced student satisfaction and self-efficacy.
- **Sharma & Rani (2022)** reported a moderate level of role ambiguity (mean score 68.4 ± 12.6) among Punjab nursing students, with a significant negative correlation ($r = -0.48$) between role ambiguity and clinical achievement.

- **Kaur & Saini (2023)** observed that inconsistent supervision by ward nurses, coupled with poor coordination between faculty and clinical staff, leads to confusion and anxiety among students.
- **Chatterjee & Singh (2019)** emphasized that in many North Indian colleges, students' roles remain undefined beyond observational duties, limiting hands-on learning.

Collectively, these studies highlight that Indian B.Sc. Nursing students often lack clarity about their expected roles, resulting in suboptimal learning outcomes.

b) International Evidence
Internationally, role ambiguity has been linked to decreased student performance and satisfaction:
- **Abdelaziz et al. (2025)** in Egypt found that unclear role expectations reduced clinical goal achievement among nursing interns.
- **Alammar et al. (2020)** in Saudi Arabia reported that students with higher role clarity demonstrated significantly better clinical competence and motivation.
- **Ozga et al. (2020)** validated the Clinical Learning Environment, Supervision, and Teacher (CLES+T) scale and confirmed that supportive supervision enhances role clarity.
- **Galletta et al. (2018)** showed that lack of respect and vague supervision roles contributed to stress and learning barriers among nursing students.

Factors Influencing Role Ambiguity in Indian Settings
1) **Dual supervision:** Students receive instructions from both faculty and ward in-charges, often leading to contradictory directions.
2) **Staff shortage:** Clinical nurses are overburdened with service responsibilities, leaving minimal time for student teaching.
3) **Unstructured orientation:** Many institutions lack pre-posting briefings outlining student responsibilities.
4) **Hierarchical work culture:** Students hesitate to seek clarification due to fear of reprimand.
5) **Inconsistent evaluation:** Varied clinical grading systems across universities add to confusion.

Measurement Tools

Tool	Description	Indian Adaptations
Rizzo's Role Conflict and Ambiguity Scale (1970)	Measures degree of clarity in one's role.	Adapted in studies by Dasgupta (2012), Sharma & Rani (2022).
Clinical Learning Environment Inventory (CLEI)	Evaluates student perceptions of clinical setting.	Used in Delhi and Kerala studies.
Self-Perceived Clinical Competence Scale	Measures student confidence and skill mastery.	Used in AIIMS and INC-affiliated institutions.

Relationship Between Role Ambiguity and Clinical Achievement
Empirical evidence suggests that:
- Role ambiguity negatively correlates with clinical learning outcomes (Sharma & Rani, 2022).
- Students who perceive high role clarity demonstrate stronger self-efficacy and competence (Abdelaziz et al., 2025).

- Supportive supervision and regular feedback mitigate ambiguity's adverse effects (Kaur & Saini, 2023).

The findings highlight that clarity in student responsibilities, constructive feedback, and supportive preceptors significantly improve clinical learning outcomes.

Implications for Indian Nursing Education
1) **Structured Clinical Orientation:** Clear briefings before postings can help students understand their responsibilities.
2) **Learning Contracts:** Agreements between faculty, clinical supervisors, and students ensure mutual clarity.
3) **Preceptor Training:** Nurses should receive mentorship training to guide students effectively.
4) **Faculty–Ward Coordination Meetings:** Regular interactions can align academic and hospital expectations.
5) **Curriculum Integration:** Role clarity components should be explicitly included in INC guidelines for all years of study.

Research Gaps and Future Directions
- Limited Indian data directly measuring the impact of role ambiguity on academic and clinical outcomes.
- Need for tool validation in regional languages (Hindi, Punjabi).
- Lack of interventional studies assessing the effectiveness of role clarity training modules.

Future research should focus on **longitudinal studies** and **mixed-method approaches** to explore student perceptions alongside performance outcomes.

4. Conclusion

Role ambiguity remains a subtle but significant barrier to clinical learning among B.Sc. Nursing students in India. When students are unsure of their expected roles, confidence and competence decline. Indian nursing education must prioritize clear role communication, structured supervision, and supportive mentorship to ensure optimal learning achievement. Bridging this clarity gap is essential for preparing competent, confident, and autonomous nurses for India's evolving healthcare landscape.

References

[1] Dasgupta P. Effect of Role Ambiguity, Conflict and Overload in Private Hospitals' Nurses' Burnout. Indian J Ind Psychol. 2012;38(2):23–28.
[2] Gupta S, Tiwari R. Stressors in Clinical Learning among Nursing Students in North India. J Nurs Educ Pract. 2020;10(5):44–51.
[3] Abraham R, Thomas S, Varghese M. Clinical Learning Environment and its Influence on Student Achievement. Kerala Nurs J. 2021;19(3):12–18.
[4] Sharma N, Rani P. Role Ambiguity and Clinical Achievement among B.Sc. Nursing Students. Int J Nurs Res Educ. 2022;14(2):78–84.
[5] Kaur A, Saini J. Clinical Supervision and Role Clarity in Indian Nursing Colleges. Indian J Cont Nurs Educ. 2023;10(1):56–62.

Volume 15 Issue 2, February 2026
Fully Refereed | Open Access | Double Blind Peer Reviewed Journal
www.ijsr.net

Paper ID: SR26207123814　　　　DOI: https://dx.doi.org/10.21275/SR26207123814　　　　563

[6]   Chatterjee R, Singh S. Clinical Learning Environment in Indian Nursing Colleges: A Review. J Health Allied Sci. 2019; 8 (4): 201–207.

[7]   Rizzo JR, House RJ, Lirtzman SI. Role Conflict and Ambiguity Scale. Organ Behav Hum Perform. 1970;5(2):150–163.

[8]   Abdelaziz M, et al. Role Ambiguity and Nursing Interns' Achievement of Clinical Rotation Goals. BMC Nurs. 2025;24(12):98–105.

[9]   Ozga D, et al. Validation of the CLES+T Scale in Nursing Education. Nurse Educ Today. 2020; 88: 104364.

[10]   Alammar K, et al. Students' Perception of Clinical Learning and Supervision. Open Nurs J. 2020; 14: 82–89.

[11]   Galletta M, et al. Lack of Respect and Role Uncertainty in Clinical Placements. BMC Med Educ. 2018; 18: 246.

[12]   Angasu K, et al. Achievement of Clinical Learning Outcomes among Undergraduate Nursing Students. BMC Nurs. 2021; 20 (12): 85–91.

[13]   Thomas P, Binu M. Mentorship Practices and Student Satisfaction in Clinical Teaching. Nurs J India. 2021; 112 (1): 26–30.

[14]   Indian Nursing Council. Revised B.Sc. Nursing Curriculum: Competency-Based Framework. New Delhi: INC; 2022.

[15]   Ministry of Health and Family Welfare (MoHFW). Strategic Directions for Nursing 2023–2030. Government of India; 2023.

Volume 15 Issue 2, February 2026
Fully Refereed | Open Access | Double Blind Peer Reviewed Journal
www.ijsr.net

Paper ID: SR26207123814   DOI: https://dx.doi.org/10.21275/SR26207123814   564