



## **The Relationship Between Students' Liking of Children and Clinical Comfort and Worry in Pediatric Clinics**

Pediatric Kliniklerinde Öğrencilerin Çocuk Sevme Durumları ile Klinik Rahatlık ve Endişe Durumları Arasındaki İlişkinin İncelenmesi

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## THE RELATIONSHIP BETWEEN STUDENTS' LIKING OF CHILDREN AND CLINICAL COMFORT AND WORRY IN PEDIATRIC CLINICS

### ABSTRACT

**Aim:** This study was conducted to examine the relationship between students' liking of children and clinical comfort and worry in pediatric clinics.

**Method:** This study is descriptive and cross-sectional. It was conducted with 124 nursing students who took the Child Health and Diseases Nursing course at a state university in Izmir, Türkiye. Research data was collected between February and March 2022 using the "Student Descriptive Information Form", "Barnett Liking of Children Scale", and "Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool". In data analysis, number, percentage, mean, standard deviation, Mann Whitney U test, Kruskal Wallis test and Spearman correlation analysis were performed.

**Results:** The mean age of the students participating in the study was  $21.68 \pm 1.17$  years, 71.8% were female and 87.9% had at least one sibling. It was determined that 64.5% of the students were involved in childcare before, 96% played games with children, and 85.5% enjoyed playing games with children. The Barnett Child Liking of Children Scale mean score of the students is  $82.15 \pm 16.68$ , which is high. The mean score of the Clinical Comfort sub-dimension of the Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool was  $14.04 \pm 2.83$ ; The Worry Assessment sub-dimension score average was determined as  $12.00 \pm 3.42$ . The mean of both sub-dimensions is moderate. A low-level negative correlation was found between the clinical comfort sub-dimension of the Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool and the Liking of Child Scale, and a low-level positive correlation was found with the worry assessment sub-dimension (respectively;  $p < .001$ ,  $p < .001$ ).

**Conclusions and Recommendations:** Nursing department students who are in pediatric clinical practice have a high level of liking for children. This situation positively affected the clinical comfort and worry of the students. It is recommended to include educational activities that will help nursing students establish bonds and communication with children, increase their level of liking of children, and strengthen their communication skills.

**Keywords:** Clinical Practice; Nursing; Pediatrics.



## PEDİATRİ KLİNİKLERİNDE ÖĞRENCİLERİN ÇOCUK SEVME DURUMLARI İLE KLİNİK RAHATLIK VE ENDİŞE DURUMLARI ARASINDAKİ İLİŞKİNİN İNCELENMESİ

### ÖZ

**Amaç:** Bu araştırma, pediatri kliniklerinde öğrencilerin çocuk sevmeye durumları ile klinik rahatlık ve endişe durumları arasındaki ilişkiyi incelemek amacıyla yapılmıştır.

**Yöntem:** Araştırma, tanımlayıcı ve kesitsel türdedir. Türkiye'de İzmir ilinde bulunan bir devlet üniversitesinde Çocuk Sağlığı ve Hastalıkları Hemşireliği dersini alan 124 hemşirelik öğrencisi ile yapılmıştır. Araştırma verileri Şubat-Mart 2022 tarihleri arasında; "Öğrenci Tanıtıcı Bilgi Formu", "Barnett Çocuk Sevmeye Ölçeği" ve "Pediatri Hemşireliği Öğrencileri Klinik Rahatlık ve Endişe Değerlendirme Aracı" kullanılarak toplanmıştır. Veri analizinde sayı, yüzde, ortalama, standart sapma, Mann Whitney U testi, Kruskal Wallis testi ve Spearman korelasyon analizi yapılmıştır.

**Bulgular:** Araştırmaya katılan öğrencilerin yaş ortalaması  $21,68 \pm 1,17$  yıl olup %71,8'i kız cinsiyettedir ve %87,9'unun en az bir kardeşi vardır. Öğrencilerin %64,5'inin daha önce çocuk bakımında yer aldığı, %96'sının çocuklarla oyun oynadığı, %85,5'inin çocuklarla oyun oynamaktan hoşlandığı belirlenmiştir. Öğrencilerin Barnett Çocuk Sevmeye Ölçeği toplam puan ortalaması  $82,15 \pm 16,68$  olup yüksek seviyededir. Pediatri Hemşireliği Öğrencileri Klinik Rahatlık ve Endişe Değerlendirme Aracı'nın Klinik Rahatlık alt boyut puan ortalaması  $14,04 \pm 2,83$ ; Endişe Değerlendirme alt boyut puan ortalaması  $12,00 \pm 3,42$  olarak saptanmıştır. Her iki alt boyut ortalaması da orta seviyededir. Pediatri Hemşireliği Öğrencileri Klinik Konfor ve Endişe Değerlendirme Aracı'nın alt boyutlarından klinik konfor alt boyutu ile Çocuk Sevmeye Ölçeği arasında negatif yönde düşük düzeyde, endişe değerlendirme alt boyutu ile pozitif yönde düşük düzeyde anlamlı bir ilişki saptanmıştır (sırasıyla;  $p < ,001$ ,  $p < ,001$ ).

**Sonuç ve Öneriler:** Pediatri klinik uygulamasına çıkan hemşirelik bölümü öğrencilerinin çocuk sevmeye durumları yüksektir. Bu durum öğrencilerin klinik rahatlık ve endişe durumlarını olumlu yönde etkilemiştir. Hemşirelik öğrencilerinin çocuklarla aralarında bağ ve iletişim kurulmasına yardımcı olarak çocuk sevmeye düzeylerini artıracak ve iletişim becerilerini güçlendirecek eğitim etkinliklerine yer verilmesi önerilmektedir.

**Anahtar Kelimeler:** Hemşirelik; Klinik Uygulama; Pediatri.



## INTRODUCTION

Children need love to gain a basic sense of trust and for their personalities to develop harmoniously and fully. For this reason, love is seen as the most necessary nutrient for the child from birth. The interruption of love for any reason may cause the child to feel that he is being punished. Illness and hospitalization are among these reasons. Therefore, it is important for health professionals, especially nurses in pediatrics, to love children (Conk et al., 2018; Çavuşoğlu, 2013). It is predicted that nurses' liking children will enable them to accept children more easily and to act more carefully and attentively when communicating with them. The first and most important step in deciding to become a pediatric nurse is to love children.

Clinical practices in nursing education enable students to prepare for their profession by contributing to the development of their professional competencies by transforming their theoretical knowledge into practice. Clinical practice helps students gain teamwork and a sense of responsibility while increasing their knowledge, skills, self-confidence, and communication skills (Nabizadeh-Gharghozar vd., 2021; Eminoğlu & Duruk, 2024). However, this process can also be a source of stress due to lack of mentors, insufficient information, fear of making mistakes, and time management problems (Mikkonen et al., 2020; Tuomikoski et al., 2020). In Türkiye, pediatric nursing education is given theoretically and practically to all nursing students in the third year. This course is practiced in clinics/polyclinics with pediatric patients. In this process, students may experience anxiety about issues such as touching, communicating, and calculating low doses of medication in line with their experiences of encountering pediatric patients, communication skills, and coping skills during their practical training in pediatric clinics (Gezer & Alemdar, 2024). In a study conducted by Eminoğlu and Duruk (2024), it was reported that there was a significant positive relationship between the clinical learning environment and care behaviors of nursing students (Eminoğlu & Duruk, 2024). Therefore, stress and anxiety experienced by students in pediatric nursing practices may negatively affect the development of clinical skills and care behaviors (Al-Daken et al., 2024; Eminoğlu & Duruk, 2024; Gezer & Alemdar, 2024; Mutlu et al., 2020).

Students may experience various positive or negative emotions during their practice in pediatric clinics. These feelings can affect the student's motivation, learning level, and willingness to work (Altay & Kılıçarslan Törüner, 2014; Erdem & Duyan, 2011). In a study, it is stated that having siblings and participating in childcare previously affects the students' level of liking children positively (Bektas et al., 2015). Although studies have been conducted on nursing students' levels of liking children, no studies have been found on the effect of this love on students' comfort and worry levels in the clinic (Aytekin, 2019; Baran & Yılmaz, 2019; Bektaş et al., 2015; Happell, 2000; Turgut & Beşirik, 2019). Therefore, it is important to determine nur-

sing students' liking children, clinical comfort and worry, the relationship between them, and the factors affecting them.

### Aim

This study aims to examine the relationship between students' liking children and their clinical comfort and worry in pediatric clinics.

### Research Questions

Are students' level of liking of children associated with their clinical comfort and worry in pediatric clinics?

## METHOD

**Type of Research:** The research was descriptive and cross-sectional.

**Population and Sample of the Research:** The population of the research consisted of third and fourth year Nursing Department students (approximately 127 students) studying at a state university. No sampling method was used in the study. It was aimed to reach the whole universe. The research sample consisted of 124 students (participation rate: 97.6 %) who had taken the Child Health and Diseases Nursing course.

*Inclusion criteria for the study:*

- Being a student in the nursing department
- Having taken the Child Health and Disease Nursing (CHDN) course
- Agreeing to participate in the research.

*Exclusion criteria for the study:*

- Students who will not be present in class on the day of data collection.

**Data Collection:** Research data were collected between February and March 2022. CHDN course is offered in the fall semester. In the data collection, the student descriptive information form prepared by the researchers, the Barnett Liking of Child Scale (BLOCS) and Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool, were used (Al-Qaaydeh et al., 2012; Arslan et al., 2018; Barnett & Sinisi, 1990; Duyan & Gelbal, 2008). A survey form was created using the Google Documents website for data collection and the link to the survey form was shared

with the students. Before sharing, students were informed about the research and their consent was obtained.

### Data Collection Tools

**Student Descriptive Information Form:** This form was prepared by the researchers. In the form, there are nine questions about the sociodemographic variables (gender, age, grade level, presence/number of siblings, previous childcare status, playing with children before, enjoying playing games with children, willingness to work in pediatric clinics) of the students related to the study (Al-Qaaydeh et al., 2012; Altay & Kılıçarslan Törüner, 2014; Arslan et al., 2018; Duyan & Gelbal, 2008).

**Barnett Liking of Child Scale (BLOCS):** It was developed by Barnett and Sinisi (1990) to evaluate the level of liking of children, and a Turkish validity and reliability study was conducted by Duyan and Gelbal (2008). The reliability of the scale is Cronbach Alpha value of 0.92 and test-retest reliability of 0.85. There are 14 items on the scale. The scores that can be obtained from the scale vary between 14 and 98. Individuals are asked to express their opinions in seven degrees, ranging from “I totally disagree” to “I totally agree” to the opinion stated in each item. Four of the items (items 3, 6, 10, and 13) have a negative meaning, and ten have a positive meaning (Barnett & Sinisi, 1990; Duyan & Gelbal, 2008). In this study, the Cronbach Alpha value of the scale was found to be 0.95. High scores obtained from the scale mean that people love children more; low scores mean that the level of liking children is low.

**Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool:** It was developed by Al-Qaaydeh et al. (2012) to evaluate the comfort and worry of nursing students in pediatric clinics, and a Turkish validity and reliability study was conducted by Arslan et al. (2018). The scale is a 4-point Likert-type measurement tool consisting of 11 items and two dimensions worry (5 items) and comfort (6 items). Items three and five of the “comfort” sub-dimension of the scale are reverse coded. The reliability coefficient for the total scale was not given, but Cronbach’s alpha reliability coefficients for the sub-dimensions were presented separately. Cronbach’s alpha coefficients are 0.89 for the worry sub-dimension and 0.68 for the comfort sub-dimension (Al-Qaaydeh et al., 2012; Arslan et al., 2018). In this study, the Cronbach Alpha value of the scale was found to be 0.88 for the worry sub-dimension and 0.72 for the comfort sub-dimension. Individuals with low comfort dimension scores have higher anxiety dimension scores.

**Statistical Analysis:** The IBM Statistical Package for the Sciences (SPSS) 26.0 program was used to evaluate the data. In data analysis, number, percentage, mean, standard deviation, Mann Whitney U test, Kruskal Wallis-H test and

Spearman correlation analysis were calculated. A probability value of  $p < .05$  was considered statistically significant.

**Ethical Approval:** The study was approved by the Non-Interventional Clinical Research Ethics Committee of a university (Date, 29. 12. 2021; Decision no, 470). Additionally, written institutional permission was obtained. Written informed consent was obtained from all students.

## RESULTS

The mean age of the students participating in the study was  $21.68 \pm 1.17$ . 71.8% of the participants were female, 62.1% were 3rd year nursing students, and 87.9% had at least one sibling. 64.5% of the students stated that they had taken care of children before, 96% of them had played with children before, and 85.5% of them liked to play with children (Table 1).

**Table 1.** Sociodemographic characteristics of the students and their experiences with the child

Variables	$\bar{X} \pm SD$	Min-max
Age	$21.68 \pm 1.17$	19-25
	n	%
<b>Gender</b>		
Female	89	71.8
Male	35	28.2
<b>Educational status</b>		
3rd grade	77	62.1
4th grade	47	37.9
<b>Previous childcare status</b>		
Yes	80	64.5
No	44	35.5
<b>Playing with children before</b>		
Yes	119	96.0
No	5	4.0
<b>Enjoying playing games with children</b>		
Yes	106	85.5
No	18	14.5
<b>Willingness to work in pediatric clinics</b>		
Yes	56	45.1
No	26	21.0
Undecided	42	33.9

<b>Status of having siblings</b>		
Yes	109	87.9
No	15	12.1
<b>Number of siblings</b>		
None	15	12.1
1	38	30.6
2	28	22.6
3 and above	43	34.7
<b>Total</b>	124	100.0

X: Mean, SD: Standard Deviation

The mean BLOCS total score of nursing students is  $82.15 \pm 16.68$ , which was found to be high. Pediatric Nursing Students' Clinical Comfort sub-dimension mean score was  $14.04 \pm 2.83$  and the Worry Assessment sub-dimension mean score was  $12.00 \pm 3.42$ . The mean of both sub-dimensions is moderate (Table 2).

**Table 2.** Total and sub-dimension score averages of the scales

	n	$\bar{X} \pm SD$	Number of items	Med (Min-Max)
<b>Barnett Liking of Child Scale (BLOCS)</b>	124	$82.15 \pm 16.68$	14	86(20-98)
<b>Clinical Comfort (Sub-Dimension 1)</b>	124	$14.04 \pm 2.83$	6	14(6-23)
<b>Worry Assessment (Sub-Dimension 2)</b>	124	$12.00 \pm 3.42$	5	12(5-20)

X: Mean, SD: Standard Deviation, Med: Median, Min: Minimum, Max: Maximum

Spearman correlation analysis was performed to show the relationship between the sub-dimensions of the Pediatric Nursing Students Clinical Comfort and Anxiety Assessment Tool and BLOCS. Accordingly, a negative low-level significant relationship was found between the clinical comfort sub-dimension of the Pediatric Nursing Students Clinical Comfort and Anxiety Assessment Tool and the Child Like Scale, and a positive low-level significant relationship was found with the anxiety assessment sub-dimension ( $p < .001$ ,  $p < .001$ , respectively) (Table 2).

**Table 3.** Correlations between Barnett Liking of Child Scale and Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool Total sub-dimension mean scores (n=124)

	Clinical Comfort (Sub-dimension 1)	Worry Assessment (Sub-dimension 2)
<b>BLOCS</b>	$r_s: -0.409$ $p < .001$	$r_s: 0.379$ $p < .001$

$r_s$ : Spearman Correlation Analysis



There was a statistically significant difference between the mean BLOCS scores and the students' previous experience of looking after children, playing games with children, enjoying playing games with children and willingness to work in pediatric clinics ( $p=.011$ ,  $p=.001$ ,  $p<.001$ , respectively). Accordingly, the mean BLOCS scores of students who had previous experience of caring for and playing with children, who enjoyed playing with children and who were willing to work in pediatric clinics were found to be higher ( $p<.05$ ). There was no significant difference between gender and mean BLOCS score ( $p>.05$ ).

A significant difference was found between the Clinical Comfort sub-dimension mean scores of students who had previous experience of playing with children and who stated that they enjoyed playing with children and their willingness to work in pediatric clinics ( $p=.001$ ,  $p=.018$ ,  $p<.001$ , respectively). Accordingly, the Clinical Comfort sub-dimension mean scores of students who had previous experience of playing with children and who stated that they enjoyed playing were found to be lower ( $p<.05$ ). No significant difference was found between the Clinical Comfort sub-dimension mean scores of students with gender and previous childcare status ( $p>.05$ ).

When the sociodemographic characteristics of the students and their experiences with the child were compared with the Worry Assessment sub-dimension, it was found that there was no significant difference between gender and the mean score of this sub-dimension ( $p>.05$ ). When the mean score of this sub-dimension was compared with the previous childcare status of the student, there was no statistically significant difference between them ( $p=.452$ ), and when the situations of playing with children before and enjoying playing with children were compared, there was a statistically significant difference between them (respectively;  $p=.004$ ,  $p=.032$ ). When we compared the students' Worry Assessment meanscore and their willingness to work in pediatric clinics, it was found that there was a significant difference between them ( $p<.001$ ).

A significant difference was found between the mean Worry Assessment sub-dimension scores of students who had previous experience of playing with children and who enjoyed playing with children and their willingness to work in pediatric clinics ( $p=.004$ ,  $p=.032$ ,  $p<.001$ , respectively). Accordingly, the mean Worry Assessment sub-dimension scores of students who had previous experience of playing with children and who stated that they enjoyed playing were found to be higher ( $p<.05$ ). No significant difference was found between the mean Worry Assessment sub-dimension scores of students who had previous experience of looking after children and their gender ( $p>.05$ ) (Table 4).

**Table 4.** Comparison of some characteristics and experiences of the students with the scales

Variables	n	BLOCS $\bar{X} \pm SD$	Clinical Comfort (Sub-Dimension 1) $\bar{X} \pm SD$	Worry Assessment (Sub-Dimension 2) $\bar{X} \pm SD$
<b>Gender</b>				
Female	89	83.49 $\pm$ 1.64	14.04 $\pm$ 0.29	12.02 $\pm$ 0.35
Male	35	78.74 $\pm$ 3.24	14.05 $\pm$ 0.50	11.97 $\pm$ 0.63
<b>P</b>		.276*	.833*	.891*
<b>Educational status</b>				
3rd grade	77	79.03 $\pm$ 2.04	14.05 $\pm$ 0.24	11.63 $\pm$ 0.36
4th grade	47	87.25 $\pm$ 1.90	14.04 $\pm$ 0.54	12.61 $\pm$ 0.54
<b>P</b>		.002*	.210	.097
<b>Previous childcare status</b>				
Yes	80	85.88 $\pm$ 1.38	13.70 $\pm$ 0.29	12.23 $\pm$ 0.37
No	44	75.36 $\pm$ 3.16	14.68 $\pm$ 0.46	11.59 $\pm$ 0.53
<b>P</b>		.011*	.158*	.452*
<b>Playing with children before</b>				
Yes	119	83.50 $\pm$ 1.39	13.80 $\pm$ 0.23	12.22 $\pm$ 0.29
No	5	50.00 $\pm$ 9.02	19.80 $\pm$ 1.31	6.80 $\pm$ 1.35
<b>P</b>		.001*	.001*	.004*
<b>Enjoying playing games with children</b>				
Yes	106	87.27 $\pm$ 1.00	13.70 $\pm$ 0.24	12.33 $\pm$ 0.31
No	18	52.00 $\pm$ 3.57	16.05 $\pm$ 0.88	10.11 $\pm$ 0.90
<b>P</b>		<.001*	.018*	.032*
<b>Status of having siblings</b>				
Yes	109	82.72 $\pm$ 1.57	14.03 $\pm$ 0.26	12.04 $\pm$ 0.31
No	15	78.00 $\pm$ 4.68	14.13 $\pm$ 0.83	11.73 $\pm$ 1.05
<b>P</b>		.305*	.929*	.929*
<b>Willingness to work in pediatric clinics</b>				
Yes	56	88.32 $\pm$ 1.17	13.26 $\pm$ 0.29	13.01 $\pm$ 0.43
No	26	67.34 $\pm$ 4.69	16.96 $\pm$ 0.67	9.15 $\pm$ 0.64
Undecided	42	83.09 $\pm$ 2.12	13.28 $\pm$ 0.29	12.42 $\pm$ 0.43
<b>P</b>		.001**	<.001**	<.001**

X: Mean, SD: Standard Deviation, \*Mann Whitney U Test, \*\*Kruskal Wallis Test

Dunn test and Bonferroni correction P values showed that there was a difference between Yes and No and No and Undecided ( $P < .001$  and  $P < .001$ , respectively). The difference between the groups appears to be due to the group that responded no. No statistically significant difference was found between Yes and Undecided ( $P > .05$ ) (Table 5).

**Table 5.** Dunn test/P-value adjusted by using Bonferroni method for Willingness to work in pediatric clinics

Willingness to work in pediatric clinics	BLOCS	Clinical Comfort (Sub-Dimension 1)	Worry Assessment (Sub-Dimension 2)
Paired comparisons	<i>P</i> *	<i>P</i> *	<i>P</i> *
Yes-No	< .001	< .001	< .001
Yes-Undecided	.128	.723	.573
No-Undecided	.016	< .001	< .001

\*Dunn test; Bonferroni correction

According to the simple regression analysis results, it is seen that the students' liking children's scores significantly explain the clinical comfort and worry assessment scores ( $R = .43$ ,  $R^2 = .185$ ,  $F = 13.734$ ,  $p < .01$ ). The regression equation shows that the children's scores negatively explain the Clinical Comfort scores ( $\beta = -.27$ ;  $p < .01$ ) and positively explain the Worry assessment scores ( $\beta = .19$ ;  $p < .01$ ). The liking children's scores explain 18.5% of the Clinical Comfort and Worry Assessment scores (Table 6).

**Table 6.** Simple regression results regarding the predictive value of BLOCS on Clinical Comfort and Worry Assessment scores

Variables	B	SE	Beta	<i>t</i>	<i>p</i>
Clinical Comfort (Sub-Dimension 1)	-1.605	.638	-.27	-2.516	.000
Worry Assessment (Sub-Dimension 2)	.967	.529	.19	1.826	.000

$R = .430$ ,  $R^2 = .185$ ,  $F = 13.734$ ,  $p < .01$

### DISCUSSION

In this study, which was conducted to examine the relationship between students' liking children in pediatric clinics and their clinical comfort and worry, it was determined that there is a significant correlation between the liking children and clinical comfort and worry levels.

The mean total BLOCS score of the nursing students who participated in our study was  $82.15 \pm 16.68$  and was found to be high (Table 2). The mean scores found for the BLOCS scale in the literature are as follows:  $87.58 \pm 14.13$  in Akgün Kostak et al. (2017);  $68.60 \pm 7.90$  in Ardahan Akgül et al. (2021);  $82.77 \pm 13.54$  in Aytekin (2019);  $83.15 \pm 15.28$  in Baran and Yılmaz (2019);  $80.67 \pm 15.11$  in Yılmaz and Akay (2022);  $52.30 \pm 6.16$  in Akdeniz Kudubeş et al., (2023) (Akgün Kostak et al., 2017; Ardahan Akgül et al., 2021; Aytekin, 2019; Baran & Yılmaz, 2019; Yılmaz & Akay, 2022; Akdeniz Kudubeş et al., 2023). The reason for the high BLOCS score averages of the students participating in this study may be that 64.5% of them have experience in child care, 96% have experience playing with children, 85.5% enjoy playing with children, and 45.1% want to work as a nurse in a pediatric clinic.

The mean score of the Clinical Comfort subdimension of the pediatric nursing students who participated in our study was found to be  $14.04 \pm 2.83$  and the mean score of the Worry Assessment subdimension was  $12.00 \pm 3.42$ . The means of both subdimensions are at a moderate level. (Table 2). When the studies in the literature are examined; In the study of Mutlu et al. (2020), the mean score of the clinical comfort subdimension was found to be  $18.01 \pm 2.06$ , and the mean score of the worry subdimension was  $12.98 \pm 2.84$ . In the study of Akdeniz Kudubeş et al. (2023), the mean score of the comfort subdimension was found to be  $15.61 \pm 3.74$  and the mean score of the anxiety subdimension was found to be  $11.63 \pm 4.32$ . In another study,  $14.64 \pm 2.38$  was found for the clinical comfort subdimension and  $11.72 \pm 2.69$  for the worry subdimension (Üstüner Top & Kulakaç, 2020). It has been reported that nursing students' clinical comfort and worry levels regarding pediatric clinics are at a moderate level (Üstüner Top & Kulakaç, 2020). The clinical comfort and worry sub-dimension mean scores of the students participating in our study are similar to the literature. This is thought to be due to the fact that there are more students who do not want to work in pediatric clinics (21%) and those who are undecided about this issue (33.9%) than those who want to work.

A negative low-level significant relationship was found between the clinical comfort sub-dimension of the Pediatric Nursing Students Clinical Comfort and Worry Assessment Tool and the BLOCS, and a positive low-level significant relationship was found with the worry assessment sub-dimension (Table 3). Our study is similar to studies in the literature in that there is a significant relationship between liking children and clinical comfort and worry. The literature emphasizes that students with high average scores on the loving children scale cope more easily with the worry they experience in the pediatric clinic (Dousis et al., 2022; Sariailioğlu & Köse, 2022). In the study of Akdeniz Kudubeş et al. (2023), it is reported that the increase in the average scores of liking children increases comfort levels and decreases worry levels (Akdeniz Kudubeş et al., 2023).

When the scales were compared with the characteristic features of the students, the grade level affected the students' level of liking children (Table 4). It was determined that the average score of the BLOCS of the 4th-grade students ( $87.25 \pm 1.90$ ) was statistically significantly higher than the average score of the 3rd-grade students ( $79.03 \pm 2.04$ ). In the study of Mutlu et al. (2020), the clinical comfort sub-scale score average of the students who were CHDN course interns was found to be statistically significantly higher than the students who were not CHDN course interns. The 4th-grade students in our study went to three days of clinical practice within the scope of the curriculum. Therefore, it is an expected result that students who met children more in the clinics and had the opportunity to communicate and practice more felt more comfortable while dealing with child patients.

In our study results, it was determined that the level of liking children was higher in the students who stated that they had taken care of children before, played with children, and enjoyed playing with them. In Aytekin's (2019) study, having the experience of looking after children did not affect the level of liking children. In the study of Bektaş et al. (2015), liking to play with children significantly affected the liking children (Aytekin, 2019; Bektaş et al., 2015). Game is a tool that strengthens bonds by providing emotion sharing and social communication. For this reason, it is thought that enjoying playing games with children can increase students' BLOCS scores. Using play in nursing care helps nurses establish bonds and communication with children. Thanks to the game, the nurse can understand the child's feelings and concerns and can reduce his stress and worry. In a study conducted with nurses working in the pediatric clinic (Kahraman et al., 2020), it was determined that nurses who used therapeutic play had a higher liking children's scale mean scores than those who did not. It is thought that nurses who like children and work in the pediatric service can plan interventions to ensure that children are less affected by care practices and painful and uncomfortable procedures, and can use therapeutic play, which is one of these interventions (Kahraman et al., 2020).

In our study findings, although the mean score of girls on the BLOCS was higher than that of boys, it was determined that the difference was statistically insignificant according to gender (Table 4). Although the mean score of students with siblings on the BLOCS was higher ( $82.72 \pm 1.57$ ), it was determined that it was not statistically significant. In the studies conducted with nursing students in the literature, it is seen that the gender of the students does not affect the status of liking children (Baran & Yılmaz, 2019; Bektaş et al., 2015; Turgut & Beşirik, 2019). Unlike our study findings, in a study in which the effect of pediatric nursing practice on students' attitudes towards children and their level of liking children was investigated (Aytekin, 2019), it was reported that while the gender of nurse candidates did not affect their liking children in the pre-test, it was effective in the post-test and that the level of liking children of female students was higher than that of male students ( $p < .05$ ). It is thought that the fact that the mother is primarily responsible

for the care of children in Turkish culture and that the role of caring for the child is assigned to women as a gender role may also cause the low liking children scores of boys (Aytekin, 2019). In our study, the fact that the gender of the participants did not affect the state of liking children can be interpreted as it may be related to the fact that they are not yet in the role of caregivers or that they are not parents.

In our study clinical comfort and worry were not affected in students who had previously cared for children (Table 4). It was determined that the average clinical comfort subscale score of students who had played with children before and enjoyed playing with children was low (respectively;  $13.80 \pm 0.23$ ;  $13.70 \pm 0.24$ ). Although these students had high clinical comfort levels ( $16.96 \pm 0.67$ ), they did not want to work in pediatric clinics. It was concluded that students who played with children before and enjoyed playing with children had higher worry assessment sub-dimension average scores (respectively;  $12.22 \pm 0.29$ ;  $12.33 \pm 0.31$ ) and students with low worry levels wanted to work in pediatric clinics. In the study, it is thought that this may be because there is a large difference in the number of students who say yes to the questions about their experience of playing and enjoying games and those who say no. As a result of the study conducted by Mutlu et al. (2020) with students taking the CHDN course, it was reported that as the worry levels of the students decrease, their general self-efficacy perceptions increase and they see themselves as sufficient to start practicing, and as their clinical comfort increases, they find themselves more competent in child practices (Mutlu et al., 2020). It can be predicted that nursing students, who communicate with and contact children more in pediatric clinical practices, perceive themselves as more competent in this regard, so their worry levels decrease, they love children, and therefore they want to work in pediatric clinics.

In our study, it was determined that the average score of the students in BLOCS was high ( $88.32 \pm 1.17$ ), and this situation affected the students' willingness to work in pediatric clinics (Table 4). Other studies on this subject show that the level of liking children is high in the nursing department students who have been put into practice in the field of pediatrics (Baran & Yılmaz, 2019; Bektaş et al., 2015; Demir, 2020; Happell, 2000). It can be said that applying the CHDN course affects students' liking children, as it enables students to establish more communication with children and strengthen their communication skills (Yılmaz & Akay, 2022). In the study of Kahraman et al. (2020), the fact that nurses who work in pediatric services fondly liking children supports this situation (Kahraman et al., 2020).

The result of this study explains the relationship between increasing the level of liking children in nursing department students in pediatric clinical practices and reducing the clinical comfort and worry levels of the students. For this reason, it will contribute to the literature by shedding light on educators in terms of educational practices that should be planned on these issues.

### Limitations of the Study

The most important limitation of this research is that it is limited only to the students who took the CHDN course in the nursing department of the university where the study was conducted. It is recommended that the study be conducted with larger student populations. It is thought that students' answers may have been affected by environmental factors because the data was collected via an online survey.

### CONCLUSION AND RECOMMENDATIONS

As a result of this study, it was determined that the BLOCS score averages of the nursing department students who went into pediatric clinical practice were high, the clinical comfort and worry levels of pediatric nursing were moderate, and there was a significant correlation between their child liking and clinical comfort and worry. In our study findings, it was determined that the gender of the participating students did not affect the level of liking children, clinical comfort and worry, and the status of looking after children, playing with children, and enjoying playing with children affected the status of liking children. It was concluded that the students who expressed their liking children wanted to work in pediatric clinics. While the previous childcare status did not affect the clinical comfort and worry levels of the students, it was determined that the anxiety levels of the students who played with children and enjoyed playing with children before, were low and these students wanted to work in pediatric clinics.

As the academic achievement of the students in the nursing department and the perception of competence about themselves increase, the students feel more comfortable in the clinic and try to continue the practices. From the first year of nursing education, it is important to determine the status of liking children, clinical comfort and worry, the relationship between them, and the factors affecting them. By ensuring that students with a low level of liking children are more together with children in their undergraduate education, their communication skills and liking children can be improved positively. In this direction, it is necessary to provide students with correct and therapeutic communication techniques with children before they go to pediatric practice to make students feel more comfortable in the clinic, reduce their worry levels and increase their level of liking children. For this purpose, it is recommended that all applications that they may encounter in the clinic be implemented on pediatric simulators, and that students' communication skills with children should be improved by giving therapeutic game lessons.

**Ethics Committee Approval:** Ethics committee approval was received for this study from the ethics committee of İzmir Bakırçay University (Date: December 29, 2021; Decision Number: 470).

**Participant Consent:** Written informed consent was obtained from the participants participating in the study.

### Declaration of Interest Statement

The authors have no conflicts of interest to declare.

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### Author Contribution Rates

Design of Study: ŞBY (70%), SB (20%), SC (10%)

Data Acquisition: ŞBY (20%), SB (20%), SC (60%)

Data Analysis: ŞBY (100%)

Writing Up: ŞBY (45%), SB (45%), SC (10%)

Submission and Revision: ŞBY (40%), SB (60%)



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