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Nurse's Views on Lifelong Learning: A Qualitative Study

Hemşirelerin Yaşam Boyu Öğrenmeye İlişkin Görüşleri: Nitel Bir Çalışma

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ABSTRACT

Aim: This study aims to determine nurses' views on lifelong nursing.

Material and Method: The study is of a qualitative and phenomenological (descriptive) design. The study group consisted of 22 nurses. Individual in-depth interview method was used in the study, and the interviews were continued until data saturation was achieved. Interviews were conducted using a semi-structured interview form and lasted approximately 20 minutes. The study was conducted between August and September 2022, with the permission of the Ethics Committee and written consent from the nurses. Thematic analysis method was used in the analysis of the data.

Results: Five main themes and 18 sub-themes were determined as necessity, attitude, sources of motivation, obstacles and suggestions regarding lifelong learning in this study.

Conclusion: The nurses considered lifelong learning as necessary and that their motivation for lifelong learning was affected by the attitudes of team members and managers, social environment, educational opportunities, individual, familial, institutional, professional, social and physical conditions. While organizing continuing education programs for nurses, it can be recommended to consider working conditions, motivational resources, develop facilities such as libraries and internet access that will support lifelong learning, and provide administrative support.

Keywords: Lifelong learning, Nursing, Nursing education

ÖZET

Amaç: Çalışma, hemşirelerin yaşam boyu öğrenme ile ilgili görüşlerini belirlemek amacıyla yapılmıştır.

Gereç ve Yöntem: Çalışma, nitel tasarım tipinde ve fenomenolojik (betimsel) desenedir. Çalışma grubunu, maksimum çeşitlilik esas alınarak belirlenen 22 hemşire oluşturmuştur. Araştırmada bireysel derinlemesine görüşme yöntemi kullanılmış, görüşmeler veri doygunluğu sağlanıncaya kadar sürdürülmüştür. Görüşmeler yarı yapılandırılmış görüşme formu ile gerçekleştirilmiş ve yaklaşık 20 dk sürmüştür. Çalışma Ağustos – Eylül 2022 tarihleri arasında, Etik Kurul izni ve hemşirelerden yazılı onam alınarak gerçekleştirilmiştir. Verilerin analizinde, tematik analiz yöntemi kullanılmıştır.

Bulgular: Çalışmada yaşam boyu öğrenmeye yönelik gereklilik, tutum, motivasyon kaynakları, engeller ve öneriler olmak üzere beş ana tema ve 18 alt tema belirlenmiştir.

Sonuç: Hemşirelerin yaşam boyu öğrenmeyi gerekli gördükleri, yaşam boyu öğrenmede motivasyonlarının ekip üyeleri ve yöneticilerin tutumundan, sosyal çevre, eğitim olanaklarından, bireysel, ailevi, kurumsal, mesleki, sosyal ve fiziksel koşullardan etkilendiği belirlenmiştir. Hemşirelerin sürekli eğitim programları düzenlenirken çalışma koşulları, motivasyon kaynaklarının dikkate alınması, yaşam boyu öğrenmeyi destekleyecek kütüphane, internet gibi olanakların geliştirilmesi ve yönetsel destek sağlanması önerilebilir.

Anahtar Kelimeler: Yaşam boyu öğrenme, Hemşirelik, Hemşirelik eğitimi

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INTRODUCTION

Today, scientific developments in health services and developing and changing technologies lead to the rapid obsolescence of existing knowledge and skills, which also brings the need for renewal (Denat et al., 2016). These changes and developments require nurses to maintain their personal and professional development and therefore to gain lifelong learning (LLL) skills (Bindon, 2017; Tachtsoglou et al., 2021; Deloria & Wolbring, 2022).

The concept of LLL, which was first used in the early 20th century is nowadays used synonymously with concepts such as “LLL, continuous learning, unlimited learning, adult education and repetitive education” (Arslan, 2018). In the literature, LLL is defined as follows: “a learning system encompassing all personal, professional, formal, informal and non-formal learning from cradle to grave” (Arslan, 2018; Akın, 2022). LLL is a supportive process that develops and strengthens the knowledge, values, skills and understanding that people have gained throughout their lives and enables them to apply (Denat et al., 2016; Şenyuva & Kaya, 2022). LLL enables nurses to follow scientific developments, reflect them to in their practices, and further develop their profession (Tachtsoglou et al., 2020). In general, LLL can be defined as a learning process that covers all professional and individual learning from birth to death. Use of new and advanced technologies in health care services, increase in the expectation of individuals to receive qualified health services, increasing knowledge in nursing and its acceleration in terms of sharing on a global scale, widespread use of evidence-based nursing practice and basing nursing practices on scientific knowledge in this direction are developments that make LLL compulsory (Arslan, 2018). In addition, in terms of the Turkey Higher Education Basic Competencies, LLL is among the basic competencies in the Nursing National Core Education Program (2022) and the Undergraduate Program Qualifications of the Nursing Undergraduate Programs Evaluation and Accreditation Agency (Association for Evaluation and Accreditation of Nursing Education Programs, 2013). These explanations require nurses to see LLL not as a cross-section of their life, but as a life-long process.

In the literature there are descriptive, systematic review and meta-analysis studies dealing with nurses' LLL skills (Davis et al., 2014; Qalehsari et al., 2017; Lera et al., 2020; Mlambo et al., 2021) but no qualitative study that deals with the views of nurses on the subject in depth was found. In the current study, it was aimed to examine the views of nurses about LLL in depth. It is thought that determining the views of nurses about LLL will contribute to the shaping of education programs and educational activities, thus providing qualified service and increasing the quality of patient care.

MATERIALS AND METHODS

Research Type

The study is of a qualitative and phenomenology (descriptive) design, and the individual in-depth interview method was used.

Study Population and Sample

The study group consisted of nurses working in education and training hospitals, university hospitals, private hospitals and public hospitals in Istanbul. The Türkiye Higher Education Qualifications Framework (THEQF) defines “Developing a positive attitude towards lifelong learning” among undergraduate education qualifications. According to this statement of the THEQF, considering that it would be sufficient for the participants to have an undergraduate level, the study was carried out with participants with at least an undergraduate level (THEQF, 2010). In qualitative research, it is recommended that people who are assumed to have an opinion on the research topic, who can share their feelings, thoughts, opinions, experiences, and who can be provided with information about the relevant phenomenon are included as participants in the study (Kümbetoğlu, 2019). While determining the sample of this qualitative study, in order to ensure consistency in reliability criteria, maximum diversity sampling method, which is one of the purposeful sampling methods, was used in a way that would provide diversity of individuals who could be parties to the study subject. In this context, while determining the sample; health workers with different units, experience, gender, age and education in different hospital types (university, state, private, public, training and research and city hospital) were included in the sample.

Table 1. Descriptive Characteristics of the Participants

No	Gender	Age	Professional Experience	Educational Level	Institution	Position	Unit
1.	Male	23	2.5 years	Bachelor's degree	University Hospital	Department Nurse	Organ Transplant Department
2.	Female	28	6 years	Bachelor's degree	University Hospital	Supervisor Nurse	Polyclinic
3.	Female	27	4 years	Bachelor's degree	University Hospital	Supervisor Nurse	Emergency room
4.	Female	42	22 years	Master's degree	University Hospital	Health Care Services Manager	Administrative Department
5.	Female	34	12 years	Bachelor's degree	State Hospital	Supervisor Nurse	Operating room
6.	Female	28	5 years	Master's degree	State Hospital	Surgical Nurse	Operating room
7.	Female	38	8.5 years	Bachelor's degree	State Hospital	Supervisor Nurse	Polyclinic
8.	Female	28	6 years	Master's degree	State Hospital	Educational Nurse	Administrative Department
9.	Female	25	7 months	Bachelor's degree	State Hospital	Emergency nurse	Emergency room
10.	Male	28	4 years	Bachelor's degree	State Hospital	Emergency nurse	Emergency room
11.	Female	46	24 years	Master's degree	Private Hospital	Infection control nurse	Administrative Department
12.	Female	36	14 years	PhD student	Private Hospital	Training and Development Nurse	Administrative Department
13.	Female	27	11 years	Graduate student	Private Hospital	Supervisor Nurse	General Intensive Care Unit
14.	Female	45	25 years	Bachelor's degree	Private Hospital	Supervisor Nurse	Organ Transplant Department
15.	Female	29	20 years	PhD student	City Hospital	Nurse	Board of Health
16.	Male	23	4 years	Bachelor's degree	State Hospital	Nurse	Orthopedic Department
17.	Female	29	4 years	PhD student	State Hospital	Nurse	Pulmonology Department
18.	Female	31	10 years	Graduate student	Training and Research Hospital	Infection control nurse	Administrative Department
19.	Female	36	15 years	PhD student	Training and Research Hospital	Infection control nurse	Administrative Department
20.	Male	31	8 years	Bachelor's degree	Training and Research Hospital	Nurse	Newborn Intensive Care Unit
21.	Female	40	22 years	Master's degree	Training and Research Hospital	Diagnosis-related Grouping Unit Nurse	Administrative Department
22.	Female	43	22 years	Master's degree	University Hospital	Supervisor Nurse	Brain Surgery Department

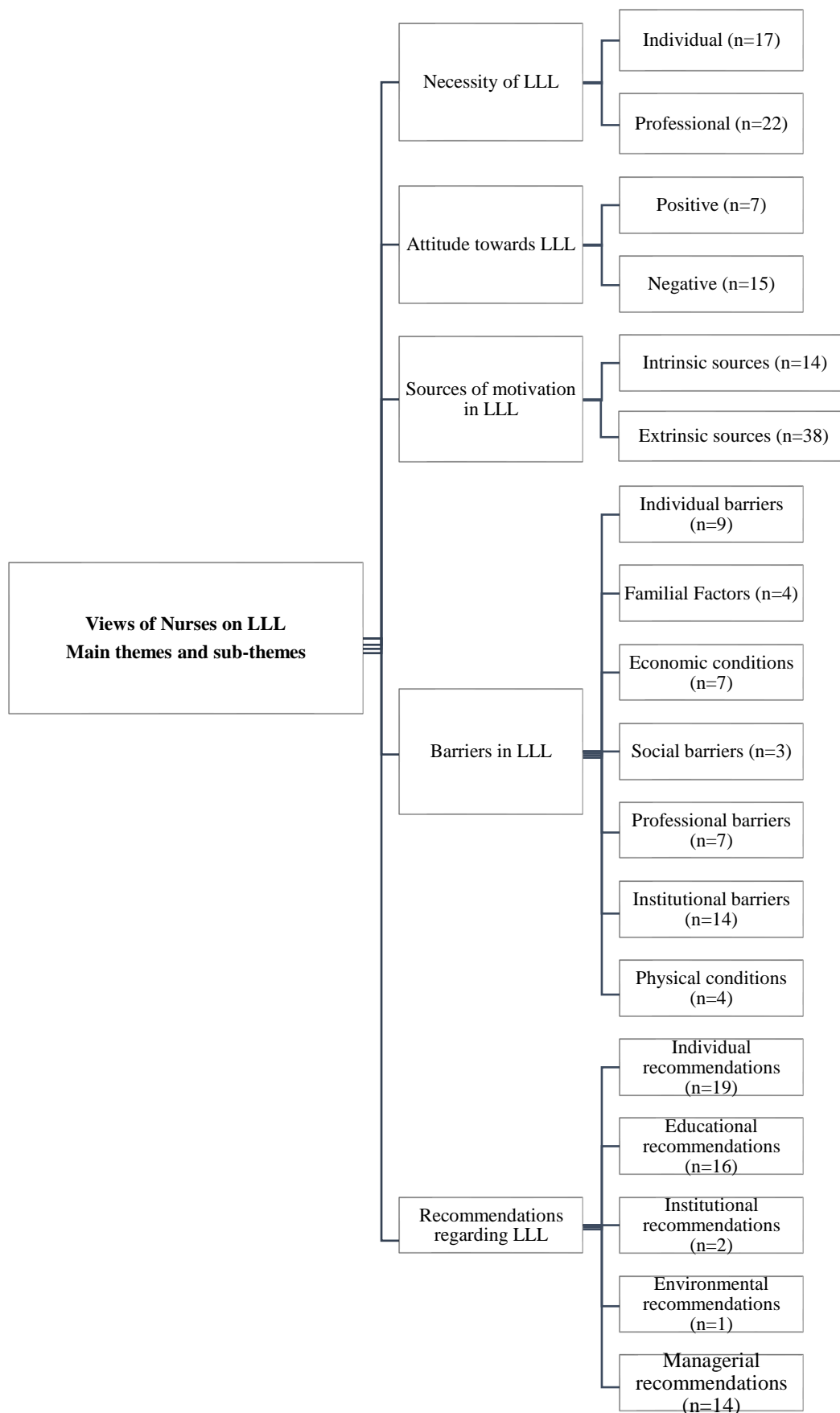


Figure 1. LLL in Nursing Themes and Sub-Themes

A total of 35 nurses were reached by e-mail and telephone using the snowball sampling method, explanations were made about the study and their consents were obtained. In the study, interviews were continued until data saturation was reached, and data collection was terminated after interviews with 22 nurses. Data were collected in the hospitals where the participants worked. The descriptive characteristics of the nurses constituting the study group are presented in Table 1.

Data Collection Tools

The data were collected with a structured interview form prepared by the researchers. The first part of the form contains questions about demographic characteristics (age, gender, educational status, type of institution, department and position, years of experience) and the second contains questions regarding LLL.

- What does the concept of LLL mean to you?
- What is the importance of LLL from an individual and professional perspective?
- How do you evaluate nurses as lifelong learners?
- How would you evaluate the concept of LLL in nursing in terms of individual and institutional responsibilities, sources of motivation, and barriers?
- What are your suggestions regarding LLL?

Data Collection

The nurses were invited to join the study via e-mail and telephone. Appointments were made with the nurses who agreed to participate in the study, and data were collected using face-to-face individual in-depth interviews. The interview was conducted in a calm place with no interruptions. The interviewed nurses were asked to share the contact information of other nurses who might be related to the subject. The interviews were continued until data saturation was achieved. Interviews were conducted between August and September 2022 with a semi-structured interview form. The interview was deepened with sub-questions when necessary. The interviews lasted an average of 20 minutes (minimum 8 min- max 39 min). No repeated interviews were conducted during data collection. The interviews were conducted by two researchers. While one researcher was interviewing, the other recorded the observation notes.

Ethical Consideration

Ethics committee approval (Date: 18.07.2022, and Approval Number: 2022-12) was obtained before starting the study. The data was digitally encoded by hiding user information, appointing a number, and stored in encrypted files. The purpose of the study was explained before the study and interviews were conducted and after their written consent was obtained. Audio recordings were taken of the interviews with the permission of the participants. It is planned that the audio recordings will be digitally destroyed after 2 years using appropriate software.

Data Analysis

Confirmability, which is a criterion of reliability in qualitative research, means the impartiality, objectivity and ethical principles of the researcher. In confirmability, openness and transparency, comparison of findings with the literature, controlled subjectivity, methodological rigor, theoretical saturation and expert opinion are important (Tutar, 2022). In order to ensure reliability during the data collection phase of the research, the interviews were conducted simultaneously and the transcription process of the interviews was also started. Here, the researcher ensured that the phenomenon was conveyed as it was, without including his/her opinions, prejudices and tendencies. The conversations were transcribed verbatim without any changes or additions to the participants' statements. At this stage, the notes taken during the interviews were examined and the necessary parts were added to the text. Consecutive coding was done from 1 to 22 to hide the names of the participants for the interviews. The code "Participant 1" was determined for the first participant interviewed, and sequential codes (Participant 2, Participant 3...) were determined for the subsequent interviewees. In order to ensure the security of the data and to have a good command of the data, the data collected with the voice recorder were transferred to the computer and then the recordings were listened to twice and the interview reports were read three times and corrections were made on the report. The transfers related to the research question were painted in different colors for easy recognition. The data were analyzed manually using the content analysis method without using any software program. Content analysis method aims to determine the basic concepts and the relations between these concepts. In content analysis, data is coded by dividing it into meaningful sections,

codes related to each other are divided into categories, and categories are gathered under a theme. In the study, content analysis was carried out as (1) coding the data, (2) determining the categories and themes, (3) organizing the categories and themes, and (4) defining and interpreting the results (Gunawan, 2015; Baltacı, 2019). After content analysis was carried out independently by two researchers, all researchers came together and reached a consensus on all categories and themes. In order to ensure reliability. The determined themes and sub-themes are presented in Figure 1. Participants did not request feedback on the findings.

RESULTS

Nurse's demographics

Of the participating nurses, most were women (81.9%) and had a Bachelor's degree (45.4%), the mean age was 32.6 ± 7.1 years and the mean time of professional experience was 11 ± 7.56 years. Of the participants, 36.4% worked in state hospitals as nurses (Table 1).

The data regarding LLL were gathered under five main themes and 18 sub-themes (Figure 1). The main themes were the necessity of LLL, attitude towards LLL, sources of motivation, barriers and recommendations. The findings related to the main themes obtained in the study were examined under the headings and the views of the participants were deepened by giving examples.

Findings on the main theme necessity of LLL

Within the scope of the main theme, the necessity of LLL, the sub-themes individual and professional requirements were determined.

In regards to individual requirements, the codes adapting to the conditions of the age, self-realization, adapting to society, gaining problem-solving skills and gaining self-esteem were added. Nurses mostly stated that LLL is necessary for following new developments, emotional and social self-development and self-realization.

"...to solve problems more easily, to motivate oneself more as one learns, to gain self-confidence... to add experience to existing ones, that is, to have different experiences..." (Participant 6).

"...the world is changing, and we need to adapt. Second, I believe that learning new things will open new horizons for people, change their

mindset, and even affect their personality." (Participant 11).

"...I think LLL is a process that improves our relationship with people culturally and socially. Therefore, I believe that it is necessary." (Participant 20)

The nurses stated that LLL supports professional development by following up-to-date literature and new technological approaches, and that it is necessary because it contributes to the professional career and increases the fields of employment.

"...to gain experience, to increase one's professional development, to rise in the profession..." (Participant 6)

"We assume some roles and responsibilities here. If we continue the roles we have assumed with what we have learned in our education, we will enter a vicious circle over time. That is why people need to take on their responsibilities better with the information they get from LLL. We live in a rapidly developing world. If one does not set LLL as a professional goal, they will be left behind." (Participant 8)

"...I think it is very important to follow scientific studies, to reflect them on the field, and to share the trainings with our friends who are new to the profession. In other words, for both your own development and your profession to reach a good place... it is essential to change the perspective of society and yours in that multidisciplinary team... I have responsibilities towards my patient, in this context, I have to learn so that I can give better care, have a clear conscience or feel competent in my profession, I need to refresh my knowledge." (Participant 11)

Findings on the main theme attitudes of nurses to LLL

The main theme attitudes of nurses to LLL was divided into two sub-themes, positive and negative. Most of the nurses stated that their colleagues were uninterested in LLL, were not open to learning, and especially recent graduates had a more negative attitude about it.

"We are not very willing, we are not open to learning... The attitude is, we have learned and let's continue like this." (Participant 5)

"...as far as I have observed, I think maybe those who graduated in our time are a little bit luckier. Because, I think we were the teams most open to

learning. I do not know where it stopped. But I don't many people are open to learning among the recent graduates.” (Participant 7)

“Honestly, I don't think they're very open to the idea. Everyone keeps up with the system and it continues like sheep psychology.... nobody learns anything new” (Participant 9).

Some participants stated that nowadays nurses are turning to LLL due to the necessity of professional development, that the tendency towards LLL has increased, that postgraduate education is given more importance than in the past, and that the attitude of nurses towards LLL is positive.

“In fact, our learning never stops. Nursing no longer is just learning professional knowledge and staying there, it has become a professional group that constantly improves itself.” (Participant 4)

“... because we can't do things in our profession without changing. We individualize, we develop. Therefore, I think that nursing is one step ahead of other professions in terms of LLL.” (Participant 20)

Findings on the main theme sources of motivation in LLL

In lifelong learning, two sub-themes were determined as extrinsic and intrinsic motivation resources under the main theme of motivation sources. Most of the nurses stated that extrinsic sources were effective in turning to lifelong learning. Extrinsic motivation sources in LLL were positive managerial attitude, training opportunities, attitude of team members, sources of professional motivation, the influence of the social environment and physical conditions.

Most of the nurses stated that their managers' perspectives, attitudes and behaviors towards professional and personal development affected their learning desires and motivations. The nurses stated that their managers' preparation of an appropriate educational environment, providing sufficient educational materials, and the necessary budget and sufficient time allocation motivated them to benefit from educational opportunities. Their colleagues' willingness to learn, the institution's appreciation of its employees and support for career development are other factors that increased motivation towards LLL. In addition, the nurses stated that their motivation increased as the importance given to LLL by their

social environment increased.

“For my institution to give me an opportunity to improve myself and to plan training for this... It could send to different institutions or different places for education...” (Participant 2)

“Different pay scales for well-educated nurses will direct them to learn more and make them feel that education is really valuable ... promotion of people who learn more, know more and are open to learning...” (Participant 6)

“The more the institution invests in someone, the more valuable the person feels. My institution cares about me, contributes to my development and constantly sends me to trainings and certificate programs for my development.... This would increase motivation” (Participant 12)

Even though nurses are influenced by extrinsic factors of LLL, stated that the perspective towards learning and the desire to learn are the most important factors leading to LLL and expressed the sources of intrinsic motivation as follows:

“I think the most important thing is that it comes from within, that is, one must adopt the idea.” (Participant 9)

“The more you see your own efficacy increase, the more personal satisfaction you get. As your knowledge, skills and perspective increase... it affects personal satisfaction and the joy of life, it also affects satisfaction, it makes you feel good, I think it has a positive effect on motivation.” (Participant 12)

“I need to feel a need. In other words, I need to have a need to learn. Or I need to love it, I need to become curious.” (Participant 21)

Findings on the main theme barriers in LLL

Under the main theme, barriers of LLL, the seven sub-themes institutional barriers, individual barriers, economic conditions, occupational barriers, familial factors, physical conditions and social barriers were gathered. Individual barriers include lack of motivation, personality traits, health problems and time management. Institutional barriers include managerial problems and working conditions. Most of the nurses stated heavy workload, not meeting training demands, insufficient budget and permissions for external activities, a different interprofessional practices in the process of participation in educational activities as institutional and professional barriers. The nurses stated that their postgraduate

education is not adequately supported by the institution they work for, that they do not receive a reward for their career goals, and that this creates a barrier for LLL. The participants also stated that the negative attitude of the society towards LLL is also a barrier for them.

“Most of the institutions do not grant unpaid leave for education, and they do not allocate enough budget for the training of their personnel. Also, the attitude of your manager in the institution is important, if they are open to training and want that nurses develop themselves, all barriers disappear, but there is no such thing in our institution.” (Participant 11)

“Individual barriers are often regarding to what society would say, or how to explain it to society when something new is learned... or they are faced with an attitude like “why bother”. They can also be blocked on an institutional basis by people who are not open to LLL or development.” (Participant 8)

“Low motivation to learn, that is, not wanting to learn, and always wanting to stand still is being unmotivated. If the person doesn't want to learn, you can't force a change in behavior.” (Participant 15)

“...the thought that hard work will not be rewarded. I mean, why should I do this, what do I have to do and what will I get in return, as a result, there will be no increase in my salary. Because some people are motivated by rewards...” (Participant 17)

“... due to the high workload, we cannot allocate enough time, institutional barriers.” (Participant 22).

Findings on the main theme recommendations regarding LLL

Recommendations regarding LLL were determined under five sub-themes, individual, educational, managerial, institutional and environmental recommendations. Individual recommendations included the desire to learn, learning to learn and time management. Most of the nurses drew attention to the importance of the desire to learn in LLL as an individual recommendation. The participants stated that nurses should follow up-to-date information on individual and professional issues, be curious, determine their own learning needs and analyze their learning style.

“What do you want? In which fields are you

successful, what are your strengths? What do you want to learn your whole life... I would suggest that one gives themselves opportunities and get to know oneself. Unfortunately, not everyone learns for life. Why not? Because some people don't know themselves.” (Participant 1)

“First, one should analyze oneself thoroughly. Both in terms of knowledge and experience, in terms of theoretical and professional skills, and personally. Then making a plan in order of importance. In what aspect do I need improvement the most and what should I do about it? What can I do? And putting them into action, that is, good planning and executing the plan, and then evaluating it. What has this really added to my life?” (Participant 12)

Participants stated that nurses should determine their individual and professional goals as a recommendation regarding education. Within the scope of managerial and institutional recommendations, they emphasized that institutions should analyze the strengths and weaknesses of their employees and develop their employees accordingly. It was suggested that institutions should provide suitable educational environments, material and budget support for LLL, change the attitude of administrators towards education positively, and improve the working conditions of nurses. In the study, it was pointed out that training nurses specific to the department should be employed and the number of employees in the education department should be increased. Nurses recommend providing suitable employment areas and financial compensation to nurses with postgraduate education. Participants think that the trainings planned according to their educational needs will positively change the attitude towards LLL.

“First of all, I would like people to be aware of what they can be successful in, rather than their weak points...” (Participant 1)

“Determination of motivation sources under the name of LLL, creation of a fund and establishment of a LLL unit.” (Participant 15)

“...there should be performance evaluation. What can these people do, what are their competencies? If we put people in the right place according to these competencies, they will be happier.” (Participant 4)

“Institutionally, it is necessary to motivate and encourage people. ... There should be a budget for this. I think it should not be just professional.

I mean, it can also be psychological support, like teaching how to deal with a difficult person.” (Participant 21)

“Appropriate environments are not provided for nurses to learn. The number of nurses is insufficient, the facilities of the nurses are very inadequate. If institutions provide the necessary resources and act fairly and appropriately in terms of motivation, i.e. rewards, recognition and so on, if they use the right person in the right way at the right time, it will be a serious source of motivation for nurses in terms of learning. Hospitals need to take some measures in terms of social and professional development of individuals...” (Participant 22)

DISCUSSION

In the study, which aimed to determine the views of nurses about LLL, the results were discussed in line with the main themes determined as the necessity of LLL, attitude towards lifelong learning, sources of motivation, barriers, and recommendations.

The nurses emphasized that LLL is indispensable for social self-development and realization, to follow current literature and technological developments, and to advance in their careers. In the literature, it is stated that continuing education is critically necessary for nurses, that it is important to increase the quality of the nursing profession to improve the quality of patient care, improve care standards, keep professional information up-to-date and that nurses believe that LLL is the basis for professional development (Bindon, 2017; Lera et al., 2020; Mlambo et al., 2021). The findings of the current study are in line with the literature. Nurses deeming LLL necessary to access changing and developing professional knowledge and to follow science and technology, shows that they attach importance to personal and professional development.

Nurses stated that LLL is necessary to improve their problem-solving skills and increase their self-confidence. Gündoğar (2019) reported a positive relationship between problem-solving skills and LLL. In the Council report of the European Union published in 2018, it is pointed out that problem-solving skills are an important tool in the production of new ideas, products and knowledge and is one of the basic competencies for LLL. It is reported that the problem-solving attitude supports the learning process and the

ability of the individual to deal with learning barriers (The Council of the European Union, 2018). Nurses using problem-solving skills and LLL skills, and continuing their personal and professional development in line with innovative approaches, will also increase the quality of the health services they provide (Qalehsari et al., 2017). In the study, nurses stated that LLL is necessary for problem solving skills, which suggests that the awareness of the participants on this issue is high.

Most of the nurses stated that especially their newly graduated colleagues were not open to learning and were indifferent to LLL. Among the quality improvement criteria in nursing included in the "Basic Competencies Guidelines in Nursing" published by the Ministry of Health General Directorate of Health Services, there is the criterion that nurses should adopt the philosophy of LLL in their professional life (Ministry of Health General Directorate of Health Services, 2021). Within the Turkish Higher Education Qualifications Framework (THEQF), it has been deemed appropriate to adopt the European Qualifications Framework LLL principles for defining THEQF levels (THEQF, 2011). Within the framework of the Nursing National Core Education Program (2022), the nursing undergraduate program competencies include using LLL skills by nurses and adopting LLL among vocational training objectives. There are studies in the literature showing that nurses have a good (Gündoğar, 2019), and students have a (Demirbağ et al., 2022) very high tendency towards LLL. Savcı and Akıncı (2022) reported that nursing students with high individual innovative features also have high LLL tendencies, whereas Uysal Yalçın et al. (2019) determined that nursing students know the concept of LLL, but that they do not know exactly the ways to reach this concept and the resources to be used. Çavuşoğlu and Acar (2020) reported that students value LLL activities and that they try to participate and continue these activities. It is noteworthy that the participants in the current study stated that nurses were uninterested in LLL. This was explained by lack of institutional opportunities, and that external motivation sources were effective in LLL. Based on this finding, it is possible to say that nurses believe in the necessity of LLL, but they need more support and facilitating opportunities in transforming the idea into a behavior.

The participants stated that the importance given to LLL by their social environment, managers and colleagues affected their motivation. Chen and Liu (2019) found that family, society and peers affect learning motivation. Döner, Ceyhan and Taşçı (2022) reported that courses integrated with practices that support LLL increase the LLL tendency of nursing students, and suggested that such elective courses should be integrated into the curriculum. Bolton, Martin and Vivanco (2022) determined that LLL played an important role in preventing the work stress of physicians and nurses. The results of the study support the literature and show that occupational motivation sources are effective in LLL.

Most of the nurses stated heavy workload, not meeting training demands, insufficient budget for external activities and not granting permissions for them, and different interprofessional practices in participation in educational activities as institutional and professional barriers for LLL. Bindon (2017) reported that insufficient time, limited access to training resources and budget/cost were the barriers to nurses' participation in continuing education. Taxtsoglou et al. (2020) found that nurses are willing to participate in continuing nursing education programs, but that among the factors that prevent participation in these programs are the lack of personnel and the problems related to the overtime leaves taken for training. In studies covering Latin American (San-Martin et al., 2017; López-Morales et al., 2020; Viruez-Soto et al., 2021) and African countries (Doorn et al., 2016), it was determined that lack of social support at work and mismatch between effort and reward were problems regarding LLL activities of health professionals. The results of the current study being similar to the literature created the impression that the obstacles in LLL are common at the international level.

In the study, nurses recommended that institutions should determine the learning needs of employees that appropriate educational environments, material and budget support for LLL should be given, that positive change in the attitude of managers towards education is needed, and that the working conditions of nurses should be improved. In the literature, it was reported that developing nurses' attitudes towards LLL and social support played a positive role in job engagement (Doorn et al., 2016; Garcia-Sierra et al., 2016; Pisanti, Doef, Maes, Meier, Lazzari &

Violani; 2016). Taxtsoglou (2020) emphasized that it is necessary to ensure participation in continuous nursing education programs, increase productivity and reduce stress related to working conditions to improve nursing care. In a meta-synthesis study, it was determined that facilitating access to continuing professional development, institutions providing adequate funding for this, and active participation of nurses in continuous professional development trainings for their personal and professional development are necessary (Mlambo et al., 2021). The study findings coincide with the recommendations in the literature and reveal that nurses are expected to be supported institutionally in terms of LLL.

Implication For Nursing Education and Health Policy

The research findings revealed which situations were affected by nurses in terms of motivation sources and barriers in the LLL process, and suggested solutions for these effects. In addition, it gives clues about the development of situations that will enable nurses to be open to LLL. The results of the research will contribute to the development of nursing education towards LLL and some nursing curriculum arrangements within health policies. In addition, it is estimated that nurses will create awareness for the managers of the institutions they work in supporting LLL. Thus, it is thought that the LLL motivation of nurses will increase, this motivation will be reflected in subjects such as patient care, education, management and will improve the nursing profession.

Limitation

The study is limited to voluntary participants.

CONCLUSION

The study results were examined under the headings necessity of LLL, attitude towards LLL, sources of motivation, barriers and recommendations. It is noteworthy that the effect of extrinsic factors and institutional factors is larger in LLL. The participation of nurses in internal and external scientific activities and continuing education activities for professional development should be supported. Tendency towards LLL should be supported by encouraging nurses' participation in activities that address their interests and needs. To increase the desire of nurses towards LLL and to gain a positive attitude, appropriate environments supporting

LLL should be created and access to continuing learning resources should be facilitated. Institutional administrators should encourage nurses who want to receive postgraduate education.

Ethics Committee Approval

Ethics committee approval was received for this study from the Istanbul Arel University Ethics Committee (Date: 18.07.2022 and Approval no: 2022/12).

Author Contributions

Idea/Concept: A.S., H.K., Ö.E., S.U.; Design: A.S., H.K., Ö.E., S.U.; Supervision/Consulting: H.K., S.U.; Analysis and/or Interpretation: A.S., H.K., Ö.E., S.U.; Literature Search: A.S., Ö.E.; Writing the Article: A.S., Ö.E.; Critical Review: H.K., S.U.

Peer-review

Externally peer-reviewed.

Conflict of Interest

The authors have no conflict of interest to declare.

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