

Students Related Factors Perceived to Influence Classroom Learning in Selected Nursing Institutions in Enugu Metropolis.

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ABSTRACT

Effective classroom learning among nursing students may depend on a range of factors related to students, teachers, and the learning environment. These factors can be student-related, teacher-related and institution-related factors. Understanding these factors may provide useful information for improving students' learning experiences and academic preparation. This study assessed student-related factors perceived to influence classroom learning among nursing students in selected institutions in Enugu Metropolis, Nigeria. A cross-sectional descriptive research design was adopted for the study. The target population of the study comprised 325 eligible nursing students, including 213 students from the Department of Nursing, University of Nigeria Enugu Campus (UNEC), and 112 students from the College of Nursing Sciences, University of Nigeria Teaching Hospital (UNTH). Because the eligible population was relatively small and accessible, total population sampling was used. The instrument for data collection was a researcher-developed questionnaire. The collected data were analysed with descriptive statistics, including frequencies, percentages, means, and standard deviations. A criterion mean of 2.50 was used for decision-making. The results revealed that the highest-rated student-related factors perceived to influence classroom learning were lack of self-motivation ($M=3.39$, $SD=0.80$), unresolved emotional problems ($M=3.39$, $SD=0.68$), and poor state of health ($M=3.39$, $SD=0.75$). This was followed by lack of interest in the course being taught ($M=3.35$, $SD=0.78$). The least-rated factor was lack of pocket money to meet personal needs ($M = 2.81$, $SD = 0.96$). The finding also revealed that the overall mean perception score was 3.13 ($SD = 0.54$) among UNEC student nurses, while that of their counterparts from UNTH was 3.10 ($SD = 0.43$). The result showed that the mean perception scores of both groups of students on student factors influencing classroom learning were almost equal. This study suggests nursing students perceived several personal, psychological, and health-related factors as important influences on classroom learning that may be experienced across different nursing education settings.

Keywords: Classroom learning; nursing students; student-related factors; perception; motivation; nursing education.

INTRODUCTION

Effective learning requires a conducive classroom. A conducive classroom offers a secure, encouraging, and stimulating setting where students are at ease and inspired to learn. The classroom is a space used in order to

accomplish learning goals (Wanti, 2024). Classroom learning is the traditional educational approach where students congregate in a physical space to receive instruction from a teacher. It offers an organised setting where students can interact face-to-face with teachers or peers. It reduces distractions, promotes active engagement, and strengthens bonds between educators and learners. It provides chances for in-the-moment communication, prompt feedback, and cooperative learning exercises. Additionally, the social component of classroom learning helps develop communication skills and creates a sense of community in an organised setting. The classroom setting allows for immediate feedback from the students as well as enhancing the transfer of knowledge from the teacher to the students. A conducive classroom will produce a good result in the teaching-learning process (Wanti, 2024).

Classroom learning can be influenced by many factors. Some of these factors are student-related, teacher related, and parental related and environmental related factors. Student-related factors are seen as traits from the students' perspectives that affect their ability to interact in the teaching and learning process. These factors include motivation, stress, anxiety and depression, self-efficacy, resilience, self-esteem, insufficient funds, self-regulation and study skills. When it comes to classroom learning performance, learning motivation can be the most basic element that might affect it (Xue, 2021). Motivation can be seen as the student's propensity to value classroom learning activities and to get the intended benefits from it. Motivation can be intrinsic or extrinsic. The inclination to participate in an activity that a student is interested in and that brings about personal happiness is known as intrinsic motivation. Extrinsic motivation, on the other hand, is seen when a student is interested in classroom activities because of rewards, like a student getting paid for achieving an A on a test. A major driving force in motivation is the self-determination theory (Ryan & Deci, 2017). In this theory, three basic needs of students must be fulfilled for intrinsic motivation to occur. They include the need for the student to feel a sense of freedom (autonomy), the need to interact effectively in the environment and demonstrate mastery (competence), and the need to exhibit a sense of belonging (**relatedness**). A study has shown that students who have higher intrinsic motivation engage in active learning and have better academic performance (Zhou & Ahmed, 2025). The study conducted among junior college nursing students found that extrinsic motivation significantly influenced students' performance in Introduction to Nursing, whereas intrinsic motivation was not a significant predictor of academic outcomes (Le et al., 2026).

Nursing students are prone to stress due to the hectic nature of the nursing program. Stress affects the psychological well-being of the students. A study conducted among female nursing students in South Korea revealed that stress affects students' academic performance, physical and emotional health (Hwang & Kim, 2022). Anxiety and depression are important psychological barriers to classroom learning. Anxiety is an emotional state characterised by feelings of apprehension, worry, tension, and physiological arousal in response to perceived threats or uncertain situations. It includes feelings of tension, nervousness, panic, and apprehension toward the learning process and academic exams (Wang & Bai, 2025). Although moderate levels of arousal may enhance attention and task engagement under some circumstances, excessive anxiety could interfere with concentration, working memory, and academic performance. Severe anxiety could affect the student academic outcome. Studies have found significant negative correlations between anxiety with academic outcome (Wang & Bai, 2025. Du et al 2020). In Ghana, lower cumulative weighted averages were strongly associated with severe anxiety ($p=0.020$) and depression ($p=0.016$) (Arthur et al, 2025).

Self-efficacy refers to students' beliefs in their ability to organize and execute the actions required to accomplish academic tasks. Students with high self-efficacy tend to set his or herself a higher goals and work harder to achieve the set goals. Lee et al. (2024) revealed that students with high self-efficacy do have good academic outcomes. A vital defence against the detrimental consequences of academic stress and burnout among students is resilience. Villan et al (2025) revealed that resilience has a negative impact on students' academic burnout, while stress from personal inadequacies, fear of failing, inadequate study facilities, bad teaching methods, and external motivation has a favourable impact. Poor study habit has negative influence on classroom learning. Students struggling with emotional distress often have irregular study patterns, lower attendance and less effective revision. Moreover, financial issues, poor health status and poor reading styles can affect the students' teaching and learning process. Molesworth et al. (2025) found that the majority of undergraduate nursing students in Scotland experienced significant financial worries during their degree, and those worries negatively influenced academic performance.

Statistics on nursing professional examinations in Nigeria have shown that in November 2024, a total of 88% passed the professional nursing exam; in November 2025, a total of 73% passed, while in May 2026, the number reduced to 69% (Nursing and Midwifery Council of Nigeria, 2026). These examination statistics can establish a **broader concern about nursing education**, which provides contextual justification for your research. What can be the contributing factors to this decline in student performance in the professional exam? Evidence shows that poor performance is hardly due to a single factor but a complex interaction of factors (Adamu & Kawuwa, 2026). This study is motivated by the practical need to reverse declining academic standards as seen from the nursing results. The findings from this study are essential for developing sustainable, efficient, and context-relevant strategies to revitalise the educational sector in Enugu State, thereby securing a more prosperous future for the nursing profession.

METHODOLOGY

Study Area

The study was carried out in the Department of Nursing Science, University of Nigeria Enugu Campus (UNEC) and the College of Nursing Science, University of Nigeria Teaching Hospital (UNTH), Enugu, Enugu State. Enugu State is located in the southeastern geopolitical zone of Nigeria and is bordered by Abia State to the south, Benue and Kogi States to the north, Ebonyi State to the east, and Anambra State to the west. Enugu State is historically known as the Coal City.

Research Design

A cross-sectional descriptive research design was adopted for the study. The design was considered appropriate because the study sought to assess students' perceptions of student-related factors associated with classroom learning at a particular point in time.

Population and Participants

The study population comprised 325 eligible nursing students from the two selected institutions. The UNEC component consisted of 213 students in the 400- and 500-level classes, while the UNTH component consisted of 112 students in the 200- and 300-level classes. These academic levels were selected because the students had accumulated substantial exposure to classroom and clinical learning experiences and were therefore considered capable of providing informed perceptions regarding factors that may affect classroom learning. Because the eligible population was relatively small and accessible, total population sampling was adopted. Thus, all students who met the eligibility criteria were invited to participate in the study. The inclusion and exclusion criteria were as follows: students were eligible to participate if they were enrolled in the specified academic levels, were available during the period of data collection, and provided informed consent. Students outside the specified academic levels, those who were unavailable during data collection, and those who declined participation were excluded. For example, 100- and 300-level students of the Department of Nursing, UNEC while 100 level students of the College of Nursing, UNTH, were all excluded.

Procedure

Before the research was conducted, an ethical permit was gotten from the University of Nigeria Teaching Hospital Health Research Ethics Committee in Enugu, Enugu State (Reference No: NHREC/O5/01/2008B-FWA00002458-1RB00002323). Before the data collection commenced, administrative approval was sought from the heads of the institutions used. The researchers and two trained research assistants visited the selected university and college of Nursing first for formalisation. A date was fixed for the data collection. Data collection was conducted during break periods to minimise disruption of academic activities. Participants were informed about the purpose of the study, and written informed consent was obtained before participation. Participation was voluntary, and anonymity and confidentiality were maintained throughout the study.

Instrument for data collection

The instrument for data collection was developed by the researchers. The questionnaire was subjected to face and content validation by three experts in nursing education and educational psychology. Their observations and

recommendations were incorporated into the final instrument. The questionnaire consisted of 32 items. It was divided into two sections: Section A contained 11 items assessing participants' demographic characteristics, while Section B contained 21 items assessing student-related factors perceived to influence classroom learning. Items in Section B were rated on a four-point Likert scale: Strongly Agree (4), Agree (3), Disagree (2), and Strongly Disagree (1). The items were arranged in a four-point Likert-type scale with an average mean of 2.50 used to determine agreement. A criterion mean of 2.50 was used to determine agreement or disagreement with each item.

Validity and reliability

A pilot study was conducted among 33 nursing students, representing approximately 10% of the study population, from the College of Nursing Sciences, Bishop Shanahan Hospital, and the Department of Nursing, Imo State University, Owerri. The students who participated in the pilot study were excluded from the main study. The internal consistency reliability of the instrument was assessed using the split-half method, which yielded a reliability coefficient of 0.85, indicating satisfactory internal consistency.

Data analysis

Collected data were analysed using IBM SPSS Statistics version 20.0. Descriptive statistics (Frequencies and percentages) were used to summarise demographic characteristics, while means and standard deviations were used to summarise responses to the student-related factor items. A criterion mean of 2.50 was used to determine agreement on the four-point Likert scale.

RESULTS

Of the 325 eligible students, 284 completed and returned the questionnaire, yielding a response rate of 87.4%. Thus, a total of 41 respondents did not respond to the questionnaire. The demographic information from the subjects is shown in Figure 1 showed that 81.4% of the respondents were females while 18.6% were males. About 88.7% of the student nurses were single; the fathers and mothers of the students were civil servants, representing 63.8% and 66.6%, respectively. Most student respondents' fathers and mothers were holders of Degree/HND, representing 35.1% and 56.1%, respectively. About 75.9% of the respondents lived in the city, and 99.6% were Christians. The UNEC was represented by 65.6% of the respondents, while 34.4% were from UNTH. About 35% of the respondents were 500 level.

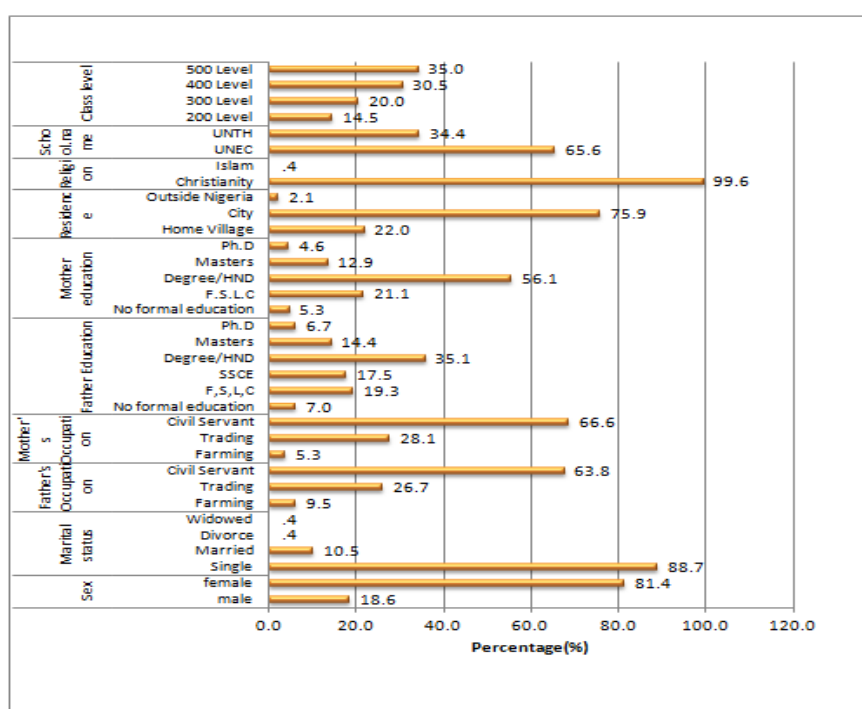


Figure 1: Demography of the respondents

Table 1 below showed that student nurses rated student factors influencing classroom learning as perceived by nursing students above the criterion mean score, to obtain a mean score of 3.12, $SD=0.50$, with the 95% confidence interval moving from 3.06 to 3.18. Specifically, they indicated that the key student factors influencing learning were lack of self-motivation ($M = 3.39$, $SD=0.80$), Unresolved emotional problems ($M=3.39$, $SD=0.68$), and poor state of health ($M=3.39$, $SD = 0.75$). This was followed by lack of interest in the course being taught ($M=3.35$, $SD=0.78$). The least as indicated agreed upon, among others, was lack of pocket money to attain personal needs ($M=2.81$, $SD = 0.96$). It is worthy of note that all the items of this subscale (student factors) were indicated above the criterion mean score of 2.5. This means that they were identified as student factors influencing learning in the area.

Table 1: Mean and standard deviation of student factors influencing classroom learning as perceived by nursing students ($n = 284$)

SN	Student Factors	SA	A	D	SD	N	Mean	SD	95% CI	
									Lower	Upper
1	Lack of self-motivation	132	112	29	11	284	3.29	0.80	3.19	3.38
2	Unresolved emotional problems	139	123	17	5	284	3.39	0.68	3.31	3.47
3	Poor state of health	148	109	18	9	284	3.39	0.75	3.31	3.48
4	Poor attitude toward learning	132	121	18	10	281	3.33	0.75	3.25	3.42
5	Poor aptitude in the course being taught	113	134	26	10	283	3.24	0.76	3.15	3.33
6	Lack of interest in the course being taught	140	114	17	12	283	3.35	0.78	3.26	3.44
7	Learning disabilities	107	99	50	24	280	3.03	0.95	2.92	3.14
8	Indiscipline	85	120	60	18	283	2.96	0.88	2.86	3.06
9	Lack of readiness to learn	115	134	23	12	284	3.24	0.77	3.15	3.33
10	Poor attention span (easily distracted)	119	135	22	7	283	3.29	0.72	3.21	3.38
11	Poor state of sensory organs	98	121	43	20	282	3.05	0.89	2.95	3.16
12	Inferiority complex	72	118	72	20	282	2.86	0.88	2.75	2.96
13	Intellectual ability	99	118	41	21	279	3.06	0.90	2.95	3.16
14	Academic self-concept	76	138	54	16	284	2.96	0.83	2.87	3.06
15	Poor relationship with the teachers	79	126	62	15	282	2.95	0.84	2.85	3.05
16	Learning readiness	86	144	38	14	282	3.07	0.80	2.98	3.16
17	Lack of enthusiasm	94	137	37	12	280	3.12	0.79	3.02	3.21
18	Learning pace	96	127	53	5	281	3.12	0.77	3.03	3.21
19	Prior experience	72	124	64	23	283	2.87	0.89	2.76	2.97
20	Lack of pocket money to attain personal needs	81	92	79	27	279	2.81	0.96	2.70	2.93
21	Absenteeism	114	99	45	19	277	3.11	0.92	3.00	3.22
	Subscale:						3.12	0.50	3.06	3.18

Table 2 showed that the mean perception score of student factors influencing classroom learning among student nurses from UNEC was 3.13, $SD=0.54$, while that of their counterparts from UNTH was 3.10, $SD=0.43$. The result showed that the mean perception scores of both groups of students on student factors influencing classroom

learning were almost equal.

Table 2: Mean and standard deviation between student nurses from UNEC and UNTH on student factors influencing classroom learning

SN	Student factors					UNEC							UNTH		
		SA	A	D	SD	N	Mean	SD	SA	A	D	SD	N	Mean	SD
1	Lack of self-motivation	90	68	20	8	186	3.29	0.83	42	44	9	3	98	3.28	0.76
2	Unresolved emotional problems	90	81	12	4	187	3.37	0.70	49	42	5	1	97	3.43	0.64
3	Poor state of health	98	70	11	8	187	3.38	0.78	50	39	7	1	97	3.42	0.67
4	Poor attitude toward learning	86	80	11	7	184	3.33	0.76	46	41	7	3	97	3.34	0.75
5	Poor aptitude in the course being taught	72	90	17	8	187	3.21	0.78	41	44	9	2	96	3.29	0.72
6	Lack of interest in the course being taught	85	83	9	9	186	3.31	0.78	55	31	8	3	97	3.42	0.78
7	Learning disabilities	75	69	27	14	185	3.11	0.92	32	30	23	10	95	2.88	1.00
8	Indiscipline	55	81	41	10	187	2.97	0.85	30	39	19	8	96	2.95	0.92
9	Lack of readiness to learn	75	88	15	9	187	3.22	0.79	40	46	8	3	97	3.27	0.74
10	Poor attention span (easily distracted)	81	86	14	4	185	3.32	0.71	38	49	8	3	98	3.24	0.73
11	Poor state of sensory organs	64	82	24	14	184	3.07	0.88	34	39	19	6	98	3.03	0.89
12	Inferiority complex	51	78	44	12	185	2.91	0.88	21	40	28	8	97	2.76	0.89
13	Intellectual ability	66	76	25	15	182	3.06	0.91	33	42	16	6	97	3.05	0.87
14	Academic self-concept	57	78	40	11	186	2.97	0.87	19	60	14	5	98	2.95	0.74
15	Poor relationship with the teachers	52	80	44	8	184	2.96	0.84	27	46	18	7	98	2.95	0.87
16	Learning readiness	58	91	27	9	185	3.07	0.81	28	53	11	5	97	3.07	0.78
17	Lack of enthusiasm	59	94	23	7	183	3.12	0.77	35	43	14	5	97	3.11	0.84
18	Learning pace	68	76	36	5	185	3.12	0.81	28	51	17		96	3.11	0.68

19	Prior experience	50	81	41	15	187	2.89	0.89	22	43	23	8	96	2.82	0.88
20	Lack of pocket money to attain personal needs	56	64	49	13	182	2.90	0.93	25	28	30	14	97	2.66	1.02
21	Absenteeism	76	64	34	9	183	3.13	0.89	38	35	11	10	94	3.07	0.98
	Subscale:					187	3.13	0.54					98	3.10	0.43

DISCUSSION

In the present study, all student-related factors exceeded the criterion mean, reinforcing the established consensus that personal characteristics strongly influence academic outcomes. A clear hierarchy emerged, with motivational and health-related factors rated higher than external financial concerns. Specifically, the most influential factors were **lack of self-motivation** ($M = 3.39$, $SD = 0.80$), **unresolved emotional problems** ($M = 3.39$, $SD = 0.68$), and **poor state of health** ($M = 3.39$, $SD = 0.75$). These findings align with Zhou and Ahmed (2025), who found in their study that students who have higher intrinsic motivation engage in active learning and have better academic performance. This finding is consistent with evidence suggesting that motivation is an important determinant of students' engagement and academic performance. Similarly, Lee et al (2026) found that extrinsic motivation significantly influenced students' performance in Introduction to Nursing ($OR = 1.073$, $p = .018$). This may be because students, particularly those who are still developing interest in a course, may respond to external incentives before intrinsic interest is fully established. The finding is in convergence with the study of Hwang and Kim (2022) that found that unresolved stress affects students' academic performance. Unresolved emotional stress lowers perseverance and saps motivation, making long-term study challenging. It can cause the gradual withdrawal from educational activities and decreased participation in classroom activities. Maintaining memory, emotional control and mental acuity all depend on a good state of health. Due to their demanding academic schedules and hospital responsibilities, nursing students pursuing a nursing career often have disrupted sleep habits, which may be detrimental to their health and academic performance. Jabeen (2025) also found in a study conducted among nursing students that poor sleep quality affects nursing students' academic performance. Good quality of sleep promotes a healthy life and contributes to good performance in classroom activities.

In the present study, *lack of pocket money to attend to personal needs* was rated lower than all other student-related factors, although its mean (2.81) still exceeded the criterion mean of 2.5. This suggests that within this specific Nigerian cohort, internal psychological and health-related barriers (lack of self-motivation, unresolved emotional problems, poor physical health) are perceived as more immediate obstacles to classroom learning than direct financial shortages. The finding does not imply that financial resources are irrelevant; rather, it indicates a contextual hierarchy of perceived impediments.

This result contrasts with a study by Molesworth et al. (2025), who reported that the majority of undergraduate nursing students in Scotland experienced significant financial worries during their degree, and those worries negatively influenced academic performance. The divergence is likely attributable to fundamental differences in the learning environment, socioeconomic structures, and students' coping mechanisms between Nigeria and Scotland.

The near-identical mean scores between UNEC, with a mean of 3.13 and $SD 0.54$ and UNTH, with a mean of 3.10 and $SD 0.43$, suggest that the small difference is not statistically meaningful. The two groups rate their own student-related factors almost equally. Possible reasons include that both institutions are situated in southeast Nigeria and they train students for the same professional license examinations. This may contribute to the likely challenges students go through in their academic activities. This finding is similar to the study conducted by Akinpelu et al (2024), who carried out a study in Nigeria and found that dental and medical students had similar positive perceptions of the educational environment. Based on the findings, student-related barriers to learning

are perceived similarly across programme types; therefore, nurse educators should intervene by addressing some pertinent issues like mental health support, study skills workshops, stress management, and financial counselling. These can be broadly applied, rather than tailored separately for university-based and hospital-based students.

CONCLUSION

The study found that nursing students generally perceived the assessed student-related factors as relevant to classroom learning, as all items recorded mean scores above the criterion mean of 2.50. The highest-rated factors were lack of self-motivation, unresolved emotional problems, and poor state of health, followed by lack of interest in the course being taught. Lack of pocket money to meet personal needs received the lowest mean rating, although it remained above the criterion mean. Descriptively, students from UNEC and UNTH reported similar overall perceptions of student-related factors influencing classroom learning. These findings suggest the need for nursing educators and institutional administrators to strengthen interventions addressing students' motivation, emotional wellbeing, health, interest in their courses, and other personal factors that may hinder effective classroom engagement.

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Contributions of Authors

All authors wrote, reviewed and edited the manuscript to ensure that the final work can be published.

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