

**INFLUENCE OF ORGANISATIONAL CLIMATE
AND PERSONAL FACTORS ON THE
TEACHING SELF-EFFICACY OF NURSING
EDUCATORS TEACHING IN HIGHER
EDUCATION
INSTITUTIONS IN PAKISTAN**

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ASIA e UNIVERSITY

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ABSTRACT

Nursing education in Pakistan has undergone significant changes since last years. The most important is transition of nursing diploma into degree programme. Due to this transition, higher education institutions in Pakistan are indeed relying on experienced clinical nursing educators to assume the role of an academic educator. This can cause role strain and consequently, nursing educators may experience inability to efficiently teach nursing students in the classroom. Further, organisational climate of higher educational institutions may also call in question the quality of education nursing educators deliver. Thus, this co-relational study was conducted to determine the relationship of organisational climate and the influence of personal factors on their classroom teaching-efficacy. This study also determined the nursing educators' personal and organisational level best predictors of teaching efficacy. Purposive sampling technique was employed. Study was conducted in twelve medical universities of Pakistan considering the nursing educators as study population. Two hundred and twenty nursing educators qualifying inclusion criteria were considered as sample. Teachers' Sense of Efficacy Scale and Organisational Climate Description Questionnaire for Higher Education were employed to assess nursing educators' perception of teaching efficacy and organisational climate. Mean & SD were calculated for nursing educators' demographics and self-efficacy dimensions. Analysis of Variance was conducted to assess differences among teaching self-efficacy dimensions with regard to personal factors of age and teaching experience. Significance of differences between pairs of age and teaching experience groups means was calculated through Post hoc-tukey test. Independent t test was run to determine the difference in teaching efficacy dimensions with regard to qualifications level. Correlation among organisational climate and teaching efficacy was estimated by correlation coefficient. A multiple regression was conducted to determine best personal and organisation-level predictor. This study has provided evidence that nursing educators senior in age with longer years of teaching experience perceived themselves more competent at facilitating classroom teaching than novice colleagues. Moreover, the study also found that organisational climate impacts nursing educators' teaching efficacy. From personal level predictor, teaching experience and from organisational level predictor consideration; head of department supportive behavior has been found strong predictor of nursing educators' teaching efficacy. Overall, the findings of this study provide valuable insights into the factors contributing to nursing educators' teaching efficacy. These findings can be used to inform the development and support of nursing educators to ensure that nursing students receive the highest quality education.

Keywords: Self-efficacy, nursing education, class-room teaching, perception, organisational climate.

APPROVAL

This is to certify that this thesis conforms to acceptable standards of scholarly presentation and is fully adequate, in quality and scope, for the fulfillment of the requirements for the degree of Doctor of Philosophy

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.....
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(26 October 2023)

DECLARATION

I hereby declare that the thesis submitted in fulfillment of the PhD degree is my own work and that all contributions from any other persons or sources are properly and duly cited. I further declare that the material has not been submitted either in whole or in part, for a degree at this or any other university. In making this declaration, I understand and acknowledge any breaches in this declaration constitute academic misconduct, which may result in my expulsion from the programme and/or exclusion from the award of the degree.

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Date: 26 October 2023

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CHAPTER 1

INTRODUCTION

1.0 Background of the Study

Transition from clinician to educator is happening in different parts of the world. In many countries, higher education institutions are indeed relying on experienced clinical nurse educators to assume the role of classroom educator. This is partly due to the shortage of qualified nurse educators who possess classroom-teaching skills (Hoeksel et al., 2019).

Earlier, educational preparation of nursing educators was mostly relating to a clinical teaching in hospital settings (Booth, Emerson, Hackney & Souter, 2016). Nursing educators are expected to teach a single or a group of nursing student in the clinical area. This method involves teaching on patients. The patient or patients are observed, studied and discussed. Clinical teaching methods involve simulation which is one of the clinical teaching strategies that involves simulated environment to imitate real-life situations and this method provides assistances to the nursing students to practice complex skills in simulated laboratory (Gamble, 2017) and demonstration another clinical teaching strategies provides opportunity to nursing students to observe the procedures demonstrated by clinical nurse educators in patient care in clinical settings (Naeem et al., 2018).

Whereas classroom teaching requires nursing educators to be equipped with pedagogical knowledge which involves combination of different teaching methods, learning activities and learning assessments in classroom environment. Since, education and nursing are two distinguishing fields thus clinical skill obviously are not helpful to develop classroom teaching efficacy as it predominantly focuses on psychomotor domain of learning in clinical laboratory and hospitals as how to

demonstrate certain skills while classroom teaching is helpful in in developing intellectual component by incorporating multiple teaching method, learning activities and assessment techniques in classroom which ultimately reflects through ones competency and behavior (Marfell et al., 2017; Smith et al., 2019).

Although, most of the nursing educators around the globe enter higher educational institutions with abreast knowledge of the subject matter of the nursing field but with little and/or no pedagogical knowledge pertaining to the discipline of nursing education. This can impact the quality of instructions nursing educators provide (Booth, Emerson, Hackney & Souter, 2016) and call in question the quality of education nursing students receive (Huda and Alisbinati, 2015).

So, to make this educational transition (clinical teaching to classroom teaching) successful, many countries have implemented measures to provide pedagogical preparation for clinical nurse educators who are moving into academic teaching. This includes training in teaching methodologies, curriculum development, assessment and evaluation, and other areas related to education. Some countries have also established mentoring programs and continuing education opportunities for clinical nurse educators to develop their classroom teaching skills and keep them up to date with the latest developments in nursing education (Nowell et al., 2017; Shieh & Cullen, 2019).

The nursing education system in Pakistan has also undergone significant changes in recent years, including the decision to replace the three-year diploma in nursing with a four-year Bachelor of Science Nursing (B.Sc. Nursing) program. This change is expected to provide nurses with more comprehensive education and training in nursing theory, research, and practice, and to better prepare them for the complex healthcare needs of the population. Additionally, this change is expected to align nursing education in Pakistan with international standards and to enhance the

recognition and credibility of nursing as a profession. The government's commitment to this change is a positive step towards improving the quality of nursing education and healthcare outcomes in Pakistan (Bibi, Kausar, Hussain, Kouser, & Khan, 2020).

Thus, all higher education institutions, both public and private, now solely provide the four-year B.Sc. nursing degree in the country. Currently, eight public and private Universities namely Aga Khan University Karachi, Dow University Karachi, Zia-uddin University Karachi, Liaqat University of Medical Science Jamshoro, Shifa-Tamir-e-Millat University Islamabad, Khyber University Peshawar, University of Health Sciences Lahore and University of Lahore offer the Master of Nursing (M.Sc. Nursing). Three of these universities namely Aga Khan University Karachi, Shifa-Tamir-e-Millat University Islamabad and Khyber University Peshawar offer PhD in nursing. Aga Khan University School of Nursing Karachi is the forerunner institution in Pakistan where the Masters of Science in Nursing” (M.Sc. N) was introduced in 2001 and PhD Nursing was started in the same university in 2014 (Khowaja-Punjwani, 2020).

However, many of these institutions lack the resources necessary for this change. There is currently a shortage of master's and doctoral prepared nursing educators with classroom teaching experience (Huda and Alisbinati, 2015). This is a concern for the nursing education industry, as it can impact the quality of education that students receive. However, there are a number of strategies that nursing programs can use to address this shortage. For example, they can offer mentorship programs for new nursing educators and provide professional development opportunities for current educators (Awalkhan and Ghani, 2018).

Besides, in nursing institutions substandard institutional facilities for teaching and learning have been observed which can have a negative impact on the quality of

education. Exploring the possibility of upgrading these facilities to ensure that students have access to a safe and effective learning environment may involve investing in new technology, updating classroom equipment, or renovating existing spaces to improve their functionality and safety. Another option could be to partner with other educational institutions or organisations to share resources and facilities, which could help to reduce costs and improve access to high-quality learning environments. Ultimately, it's important to prioritize the needs of students and to work collaboratively to find solutions that promote a positive learning environment for everyone (Meghani and Sajwani, 2013; Victor et al., 2016; Shahzadi et al., 2017).

Meanwhile, there is lack of research culture in nursing education, which can be a challenge for nursing discipline. It can limit the development of new knowledge and best practices, as well as the ability to innovate and improve the quality of education that nursing students are to be given. However, there are a number of strategies that nursing education programs can use to address this issue. One approach is to encourage nursing faculty to conduct research and share their findings with others in the field. This can be done through collaboration with other institutions and organisations, as well as through funding and support for research initiatives (Younas, Zeb, Aziz and Sana, 2019).

Moreover, a large number of researches conducted worldwide have discovered that majority of the nursing educators employed in nursing educational institutions are not adequately geared up for classroom teaching and they have to put lot of efforts to make educational transition (clinical teaching to classroom teaching) successful (Brown & Sorrell, 2017; Cooley & De Gagne, 2016; Grassley & Lambe, 2015; Miner, 2019). This can cause role strain (Cranford, 2013; McFadden & Sims, 2017). Consequently, nursing educators experience inability to efficiently teach nursing

students in the classroom (Summers, 2017). The lack of transitional support programmes also calls in to question the substandard teaching capabilities in nursing educators (Heydari et al., 2015).

Since, the graduate level of nursing education requires a different set of teaching approaches that are more advanced and student-centered. It's important for nursing educators to be equipped with the necessary skills and knowledge to effectively engage and challenge graduate-level nursing students. This includes the ability to incorporate multiple teaching strategies and technologies to promote educational transformation and ensure that students are well prepared for the challenges of the nursing profession (Nowak, Speakman & Sayers, 2016). Providing appropriate training for teaching faculty is crucial to ensure that they are prepared to effectively apply educational philosophies and theories in their teaching strategies (Liverman. 2022).

In the current era, teaching in higher education institutions is a big challenge as it has become under intense screening. The purpose of an effective teaching is for more than the transfer of information. In classroom settings, teaching efficacy of the faculty members and students learning outcomes can only be improved if appropriate teaching-learning theories are linked with teaching strategies (Bowden, 2008).

Previous researches on teaching efficacy in tertiary education have inclined to three pedagogical approaches; one of these approaches observes teaching as provision of knowledge from a perspective of which teachers recognize teaching content/material, link it to learning environment, and then convey knowledge (Akerlind, 2004; Bain, 2004).

The second contemplation considers teaching as a learner-centered approach (McKeachie & Svinicki, 2006; Vega & Taylor, 2005). This approach helps students to

assemble, determine, and transform knowledge, whereby teachers improve students' capabilities (Fink, 2003).

The third school of thought believes teaching as an active process of change from teacher-centered to student-centered (Trigwell, Prosser, Marten, & Ramsden, 2005). All three approaches involve a comprehensive process of formulating teaching-learning objectives, preparing teaching content and matching teaching strategies (Kreber, 2005).

Moreover, Bowden (2008) developed a framework which presents link between teaching theories and strategies. According to Bowden, behaviorism, cognitivism, and constructivism are the instructional theories that provide directions to teachers for using different teaching methods in classroom settings. Behaviorist's school of thought suggest teachers for rewarding students' desired behavior that amplify learning and castigate undesired one that decline learning, cognitivists recommend teachers to foster students learning by imparting novel knowledge to the existing and constructivists advocate students' active participation in the learning process. Teaching strategies follow one of these three schools of thought: discussion, lecture, and collaborative teaching. Discussion is used to enhance critical thinking which authenticate existing knowledge, to prop up creativity, and to improve dialog intended to justify contradictory point of view. By lecture method students are provided with information by the teachers to increase knowledge in the classroom. Collaboration encourages small group learning; the group of students be taught in a mutually supportive teaching learning environment.

Bowden also claims that behaviorism school of thought and discussion method has an association because behaviorism hypothesize that behavior can be altered and discussion can change behaviors, collaborative teaching is linked with constructivism;

it promotes activity-based learning and the lecture method of teaching is connected to cognitivism; this method of teaching equipped students with profound knowledge which help them to rationalize existing knowledge base.

In nursing education, persistent use of lecture method has served the profession for a long period of time but in the changing health education system; this passive method of teaching is believed to be ineffective. Although, some of the nursing educators are struggling to implement novel pedagogical methods designed to prepare student nurses to think critically, to develop problem solving skills and to develop skill of collaboration for navigating the educational transition in nursing (Bristol et al, 2019), but still there is a need to match the teaching strategies with the teaching-learning theories to augment students learning outcomes because attaining high-quality in nursing teaching not only requires for pedagogical preparation of nursing educators involved in classroom teaching but also demands for pronounced commitment and high teaching efficacy to offer learners with multiple prospects to cultivate critical thinking abilities, to foster creativity and to participate in learning process as an active agent (Gardner, McGowan Jr, & Moeller, 2010; Laari, Apiribu, Mensah, Dzomeku, & Amooba, 2023).

1.1 Problem Statement

Teachers face numerous challenges in the classroom, including engaging students, addressing diverse learning needs, managing classroom behavior, and staying up-to-date with the latest educational technology and teaching methods (Leslie, 2011). Similarly, nursing educators who are not fully prepared for their role as faculty members face a number of challenges in the classroom including finding innovative teaching strategies to engage students and ensuring effective classroom management practices to create a positive learning environment (Robinson & Dearmon, 2013;

Yancey, 2020; Patterson et al., 2021). The accomplishment of these educational activities is purely contingent to teachers' self-efficacy (Rodríguez, Núñez, Valle, Blas & Rosario, 2009).

Over the decades, teachers' self-efficacy has been a focus of research interest based on Bandura's self-efficacy theory in the general academia. Studies have revealed positive relationships between teachers' self-efficacy and a range of instructional outcomes such as student engagement and achievement (Skaalvik & Skaalvik, 2007). Educators with a high-level teaching-efficacy are helpful in improving students' learning leading to academic success (Shah & Bhattarai, 2023). Moreover, teachers with high level of teaching efficacy are best at managing classroom activities, employing multiple teaching strategies, extending great efforts to motivate their students. Consequently, they are successful in improving measurable knowledge, skills and attitudes that students exhibit as a result of instructions (Woolfolk Hoy & Davis, 2006).

However, the concept of nurse educators' classroom teaching self-efficacy and its relationship with organisational climate (as how organisational climate in term behavior patterns interrelate with their teaching efficacy is an unexplored construct in nursing education research in Pakistan as no evidence on the relationship under investigation was found in national/local literature during data search. Also, there is minimal research in nursing education because nurses in Pakistan are not provided with ample assistance and funds to conduct research in the sphere of nursing education as only a small number of nursing institutes in the universities are dynamic in research because these institutes are funded by the respective universities (Hamid, 2016; Kousar et al., 2017; Younas et al., 2019).

Moreover, the research was also sparked due to the transition in nursing education system in Pakistan which has undergone significant changes in recent years, including the decision to replace the three-year diploma in nursing with a four-year Bachelor of Science Nursing program. One of the key challenges observed during this transition was nursing educators' classroom teaching efficacy as many may have had more experience in clinical teaching rather than classroom teaching (Huda & Alisbinati, 2015; Bibi, Kausar, Hussain, Kouser, & Khan, 2020 & Bourne, Smeltzer, & Kelly, 2021). Since, this educational transition (clinical diploma-degree) requires teaching efficacy in classroom setting linked to formal academic preparation of nursing educators (Weston, 2018 & Dozier et al., 2019). Technically, speaking that these nurse educators are not adequately prepared to teach undergraduate nursing students according to international standards, particularly during this time when the Pakistan is striving to produce competent BSN prepared nurses (Younas et al., 2019).

This educational transition and lack of research in nursing education in the country invited the attention of the researcher to embark upon research with objectives to assess nursing educators' perception of classroom teaching self-efficacy as it can affect the quality of instruction provided to nursing students. Additionally, the transition from teaching diploma courses on an apprenticeship model to degree-level teaching in a classroom setting can be challenging, so to assess nursing educators' confidence in their abilities to make this transition successful was a need of hour. Moreover, determining the influence of age, educational level and classroom teaching experience on nursing educators' teaching efficacy was also important to take into consideration when evaluating nursing educators' teaching efficacy in classroom teaching as nursing educators' age, teaching experience and qualification level may have significant influence on their teaching efficacy. Thus, assessing the influence of

selected personal factors may be helpful in providing opportunities for faculty members to enhance their qualifications and gain experience as teachers which can definitely boost their confidence in their teaching (Morris, & Usher, 2011& Liverman, 2022). Besides, educators' personal factor, the organisational climate is also an important factor that may impact educators' teaching efficacy. Organisational climate with regard to supportive leadership behavior come-up with positive change in educational institutions and also involves in improving teacher's efficacy which in turn improve student learning outcomes (Grace& Meeragandhi, 2022).

Each organisation holds distinctive climate and functions in different ways. In Pakistan, the organisational climate of educational institutions also differs. Public sector institutional climate is found to be more supportive as compared to private educational institutions (Hoy, & Miskel, 2008). Whereas, in nursing education system, heads of private nursing institutes are more autonomous in making decisions than heads of public sector nursing institutes. Moreover, the organisational climate of private nursing institutions is more supportive, and outcome oriented as compare to public sector nursing institutions (Huda & Alisbinati, 2015). This discrepancy in organisational climate further generated the flow of ideas to touch this area as how nursing educators perceive about the organisational climate of higher education nursing institution and what relationship (positive or negative) exists between organisational climate and their classroom-teaching efficacy?

Although research studies conducted worldwide in the sphere of nursing education and in other disciplines may provide some evidence of teachers' self-efficacy and its relationship with organisational climate but still there was dire need of examining nursing educators perception of teaching self-efficacy in classroom settings, influence of personal factors namely age, qualification level and year of

teaching experience on their teaching efficacy and nursing educators' perception of organisational climate and correlation between organisational climate and their teaching efficacy in Pakistan due to unique cultural and professional background as organisational climate of educational institutions in Pakistan is different than those of advanced countries in term of policies and procedures, nursing educators academic preparation, educators entry in service requirement with regard to education level and teaching practice etc.

1.2 Objectives

This correctional study was conducted to realize following objectives:

- i. To examine nursing educators' perception of teaching self-efficacy in
- ii. classroom settings.
- iii. To assess influence of the personal factors namely age, level of education and
- iv. teaching experience on nursing educators' teaching self-efficacy.
- v. To identify which of the personal factors of nursing educators is the best
- vi. predictor of their teaching-efficacy.
- vii. To assess nursing educators' perception of organisational climate.
- viii. To determine the relationship between organisational climate and nursing
- ix. educators' teaching - efficacy.
- x. To identify which of the organisational climate dimensions is the best predictor of teaching self-efficacy of nursing educators.

1.3 Research Questions

The study was aimed to answer the following research questions:

- i. What is nursing educators' perception of their teaching self-efficacy in classroom setting?

- ii. To what extent does the age of nursing educators' influence their perception of teaching self-efficacy?
- iii. To what extent does the level of education influence nursing educators' perception of teaching self-efficacy?
- iv. To what extent do the years of teaching experience influence nursing educators' perception of teaching self-efficacy?
- v. Which one of the personal factors is the best predictor of nursing educators' teaching self-efficacy?
- vi. What is nursing educators' perception of organisational climate in health sciences universities in Pakistan?
- vii. Is there any difference in nursing educators' perception of organisational climate with regard to their age?
- viii. Is there any difference in nursing educators' perception of organisational climate with regard to their educational level?
- ix. Is there any difference in nursing educators' perception of organisational climate with regard to years of teaching experience?
- x. Is there any relationship between organisational climate (Consideration) and teaching self-efficacy of nursing educators?
- xi. Is there any relationship between organisational climate (Intimacy) and teaching self-efficacy of nursing educators?
- xii. Is there any relationship between organisational climate (Disengagement) and teaching self-efficacy of nursing educators?
- xiii. Is there any relationship between organisational climate (Production Emphasis) and teaching self-efficacy of nursing educators?