

## Overview of Self-Directed Learning Readiness (SDLR) in First-Year Nursing Students

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### Abstract:

Self-directed learning (SDL) solves learning challenges using various learning tools. Nursing requires lifelong learning, and SDL is an important skill for practitioners to stay current and effective. It is required of nursing students to embrace SDL and hone these abilities. Nevertheless, there is no indication of this novel procedure in Lumajang. This study aims to assess nursing students' preparation for SDL and its impact on learning outcomes. This quasi-experimental study purposefully included 91 students who carry out basic nursing clinical practice as participants. The instrument used in this study was the Self-Directed Learning Readiness Scale (SDLRS) questionnaire developed by Fisher. The results of this study showed that there was an increase in the SDLR level from 9 students (9.9%) having a high SDLR level to 78 students (85.8%) and 82 students (90.1%) having a moderate SDLR level to 13 students (14.2%). The nursing students' average SDL preparedness level has a substantial impact on learning outcomes. Nursing training institutes should give the resources required to adopt SDL as a primary teaching technique to ensure competent lifelong professionals.

### Article info:

Submitted:  
05-03-2024  
Revised:  
20-05-2024  
Accepted:  
21-05-2024

### Keywords:

SDLR; nursing student; first-year

DOI: <https://doi.org/10.53713/htechj.v2i3.186>

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## INTRODUCTION

Competency-based curriculum in nursing education is used to meet the standards for Indonesian nurse graduates according to the Indonesian National Qualifications Framework. Problem-based learning (PBL) is one of the learning strategies often used in a Competency-based curriculum. Independent learning has proven to be beneficial for students who undertake lifelong learning, providing satisfaction and independence, while problem-based learning is an approach to constructive learning by enables students to find solutions to complex problems in the real world. The PBL process makes students strain themselves to improve their problem-solving skills (Anwar,2021). Evaluation results in basic nursing clinical practice in 2022 data obtained that students are less innovative and have less initiative in strategies for achieving clinical competency, this is allegedly because basic nursing clinical practice is the first experience for nursing vocational students, new experiences that students are faced with real patients makes it difficult for students who lack strategy achieve predetermined competency targets. The impact caused by nurses incompetent in carrying out their work is students after graduating unable to habitually carry out their duties as a nurse as if they lack skills in managing patients, are less skilled in carrying out procedures maintenance, and are not yet optimal in solving the problems faced in Hospital3, so learning strategies are needed that can improve student motivation as lifelong learners through Self Directed Learning Readiness in basic nursing clinical practice. It weighs 3 credits Basic

nursing clinical practice will take 3 weeks. Clinical Practice Basic Nursing is focused on applying nursing care to clients with impaired oxygenation needs, fluid and electrolyte needs, nutrition, elimination needs, activity needs, self-care needs and decoration, balanced body temperature, balanced sleep rest, and the need to feel safe and comfortable.

Self-Directed Learning Readiness (SDLR) is a condition where students have complete control in the decision-making process related to their learning and accept complete responsibility for it. Later, they will need help and advice from lecturers and clinical staff Instructors. In the SDLR method, the learning process changes from teacher-directed to learner-directed. The instrument used is the Self-Directed Learning Readiness Scale (SDLRS).

As a result, nurses unable to control their own learning may lack the current information and skills required to deal with the complicated and ever-changing nature of the healthcare industry. To tackle these issues, nursing education curricula must focus more on adult education, particularly SDL, thinking learners benefit from being taught how to effectively search for, discover, examine, and apply new knowledge independently. These skills are unique to each student and can be influenced by their attitude, ability, and personality traits. The readiness for self-directed learning (RSDL) depends on both human traits and the curriculum adopted by institutions.

## METHOD

The research design used a quasi-experimental design with one group pretest and posttest design. The sampling technique used total sampling, totaling 91 respondents. Respondents were 2nd semester D3 Nursing Study Program students who carried out basic nursing clinical practice. The analysis uses a paired sample t-test with a confidence level of 95%.

The instrument used in this research was the Self-Directed Learning Readiness Scale (SDLRS) questionnaire developed by Fisher<sup>8</sup>. The SDLRS questionnaire consists of 40 questions with 3 subscales: self-management, desire to learn, and self-control. Research data was collected by distributing the SDLRS questionnaire. The type of data obtained from the SDLRS questionnaire is data on an interval scale. The Indonesian version of the SDLRS questionnaire has been validated by Nyambe<sup>9</sup> on first, second, and third-year medical students at the Faculty of Medicine, Hasanuddin University, during the implementation of Problem-Based Learning with validity test values ( $r > 0.268$ ) and reliability (Cronbach Alpha = 0.90)<sup>7</sup>. There are three aspects assessed, namely self-management (13 subscales), desire to learn (12 subscales), and self-control (15 subscales). There are three categories: high  $> 132$ , medium 84-131, and low  $< 84$ .

Data collection is carried out before students carry out basic nursing clinical practice. After carrying out the pretest, students get the concept of SDLR. The intervention was carried out during basic nursing clinical practice using the Daily Journaling book, students expressed their SDLR concepts. Students are given a posttest at the end of the basic nursing clinical practice implementation to see their SDLR level.

## RESULT

Based on the respondents' characteristics table, it can be explained that most respondents are 19 years old (66%), and the majority are women (90.1%), where some enter higher education through invitation. A teenager is in the transition period from child to adult. According to WHO, adolescence occurs between 10-19 years. Meanwhile, according to Regulation of the Minister of Health of the Republic of Indonesia Number 25 of 2014, teenagers are residents aged 10-18

years. Teenagers generally have a high sense of curiosity, including trying new things in their education.

Table 1. Characteristics of Respondents

Characteristics	Participant		Total	
	n	%	n	%
Age				
18 years	23	25.2		
19 years old	60	66	91	100
20 years	8	8.8		
Gender				
Man	9	9.9		
Woman	82	90.1	91	100
Entrance to college				
Invitation	39	43		
Partnership	35	38.4	91	100
Test (SBMPTN)	17	18.6		

The SDLR level distribution table shows that the majority are in the medium category (66.5%). This can be influenced by SDLR, which is new information that has yet to be well known. Based on the SDLR level distribution table based on gender, most (90%) of female respondents have a medium SDLR level, while the remainder (10%) are in the low category. Based on the SDLR level distribution table based on PT entry, the results showed that most respondents with PTN entry via invitation had the medium SDLR category.

Table 2. Distribution of SDLR Levels by Age, Gender, and College Entrance

Variable	SDLR Levels				Total	
	High		Moderate		n	%
	n	%	n	%		
Age (Years)						
18	1	1	22	24	23	25
19	6	6,5	54	60	60	66.5
20	2	2	6	6,5	8	8,5
Gender						
Man	0	0	9	10	9	10
Woman	9	10	73	80	82	90
Entrance to college						
Invitation	4	4	35	39	39	43
Partnership	3	3	32	35	35	38
Test (SBMPTN)	2	2	15	17	17	19

Based on the pre-post test table, it was found that the SDLR level experienced a significant increase after the intervention was carried out on respondents.

Table 3. Assessment of 2nd Semester Nursing Students' SDLR Levels

Variable	Assessment Time			
	Pretest		Posttest	
	n	%	n	%
SDLR Levels				
High	9	9.9	78	85.8
Moderate	82	90.1	13	14.2
Low	0	0	0	0

## DISCUSSION

Self-directed learning readiness (SDLR) is a person's readiness, as indicated by the abilities, attitudes, and personal characteristics needed for independent learning. A person's SDLR level is, of course, influenced by several factors. Generally, the factors that affect students' SDLR levels are grouped into 2 (two): internal and external factors. Internal factors relate to the entire student's personality, including physical and mental/psychological conditions such as age, gender, intelligence, self-efficacy, etc. At the same time, external factors are sources from outside the student, such as the environment, learning facilities, relationships with lecturers, etc. Based on the results of the SDLR questionnaire for D3 Nursing Study Program Students in semester 2 show that 3 factors affect the SDLR level of students: age, gender, and entrance to PTN. Table 2 shows that most of them have moderate SDLR levels, namely 82 students (90.5%) aged 18-20 years. A person's SDLR level increases as they get older because, with more experience, they will evaluate their learning. However, this study found that students had a moderate SDLR level of 54 (60%) and a height of 6 (6.5%), most at the age of 19 years. In this case, it cannot be denied that many other factors influence the SDLR level of first-year students.

Based on the study's results, it was shown that 91 students were respondents, with more female respondents (90.1%) than male respondents (9.9%). The SDLR level of women is indeed higher than that of men, where the SDLR level of women has a high level of 9 people (10%) and 73 people (80%), while all male respondents have a moderate level, as shown in Table 2. This happens because (Sugianto and Lisiswanti, 2016) (a) Women's intellectual ability is consistently higher than that of men, as seen from several tests showing several abilities. (b) In school achievement, women are assessed more consistently than men, and women consistently do better verbal assignments than men, thus placing women in the top position in terms of achievement. This is in line with research conducted by Lestari and Sandayani (2021) (Lestari and Sandayanti, 2021) that the female SDLR level at the high level has 186 students and 5 students at the low level, while for men at the high level, there are only 86 students and 6 students at the low level. from a total of 283 student respondents.

Based on the entrance to PTN, it showed that the majority of respondents were graduates from the Invitation pathway, with 39 students (43%), 4 students (4%) having high SDLR levels, and 35 students (39%) at moderate SDLR levels. Then, the highest order after Invitation is students from the Partnership pathway, totaling 35 students (38.4%). Of them, 3 students (3%) have a high SDL level, and 32 (35%) have a moderate SDL level. The next entrance, namely the SBMPTN route, has 17 students (18.6%), 2 of whom have a high SDL level (2%) and 15 students at a medium SDL level (17%). Although the selection to enter PTN differs for each respondent in this study, they follow a rigorous selection from high school until selection enters PTN, such as selecting the value of high school report cards and taking the written test exam. So, all students should have the opportunity to get a high SDLR score when they are already in college because they have graduated to enter PTN and have gone through various selections, which are the efforts of their respective studies. However, this cannot be separated from their learning motivation to achieve high targets, believe in their own abilities, and use the available learning facilities optimally so that later, they will get satisfactory results.

Based on the results of the SDLR questionnaire for D3 Nursing Study Program Students in semester 2, table 3 shows that there was an increase in SDLR where from 9 students (9.9%) had a high SDLR level to 78 students (85.8%) and 82 students (90.1%) has a moderate SDLR level of 13 students (14.2%). At a high level, students can exercise independence in their learning by setting goals to learn without help from any party. Students will take advantage of various learning

resources to achieve their goals. Students with independence at a high level can be responsible, have regular time management, and gather a lot of information from any reference. Students with high learning independence will know what students have to do, how students have to do it, and when students do it. Awareness of fulfilling learning needs is based on initiatives owned by students (Asadoorian and Batty, 2005) . Meanwhile, at the moderate stage, students can already realize that students are part of a learning process. Students are ready to develop concepts in learning, but this development must be carried out in more depth, and they must be more confident and sensitive to instructions. Students at the moderate stage can understand how students should learn, such as students can determine a strategy for learning. Students can be future-oriented but still lack experience and motivation, and there is still a desire for adult involvement in the student learning process (Asadoorian and Batty, 2005) .

### CONCLUSION

Internal and external factors affect students' SDLR levels. This study found that age, gender, and entry into PTN influenced a person's SDLR level. In addition, there was an increase in the SDLR level before and after this study was carried out, from 9 students (9.9%) having a high SDLR level to 78 students (85.8%) and 82 students (90.1%) having a moderate SDLR level to 13 students (14.2%).

### ACKNOWLEDGEMENT

The authors thank all respondents who sincerely wished to participate in this study. All who were actively involved, directly or indirectly, could complete this study on time.

### CONFLICT OF INTEREST

There is no conflict of interest in this research.

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