

Family, Peer and Faculty Support and Academic Performance among Nursing Students at Our Lady of Lourdes Mutomo School of Nursing, Kitui County, Kenya

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Abstract

Academic performance among nursing students is shaped by psychosocial factors, including the social support that students receive from family, peers, and faculty. At Our Lady of Lourdes Mutomo School of Nursing (OLLMSN), a rural, faith-based institution in Kitui County, Kenya, institutional records showed that psychosocial-related cases among students rose from 5% in 2022 to 17% in 2024, yet little was known about how social support specifically shaped academic outcomes in this setting. This study assessed the social factors influencing the academic performance of nursing students at OLLMSN, focusing on family support, peer support, and faculty support. A multiple methods design was used, combining a self-administered questionnaire with semi-structured key informant interviews. A sample of 108 second- and third-year students was selected through stratified random sampling, and five key informants were purposively sampled. Data were analyzed using SPSS version 26, applying descriptive statistics, Pearson correlation, and multiple linear regression; qualitative data were analyzed thematically. A response rate of 99.07% (n = 107) was achieved. Family support recorded the highest mean score (M = 4.178, SD = 0.750), followed by peer support (M = 3.841, SD = 0.814). The composite social support variable was significantly and positively correlated with academic performance ($r = 0.208$, $p = 0.032$); in a multiple regression model that also controlled for psychological and stress factors, social support remained a significant positive predictor of academic performance ($B = 0.202$, Beta = 0.194, $p = 0.042$). Qualitative findings showed that family support, positive peer relationships, and faculty mentorship strengthened students' ability to concentrate and remain engaged in their studies. The study concludes that social support is a significant protective factor for academic performance among nursing students in resource-constrained rural settings. It recommends that nursing schools formalize mentorship programmes, strengthen family engagement, and encourage structured peer-learning activities to support student performance.

Keywords: *Social support, academic performance, nursing education, faith-based institutions*

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Musangi, Mutua & Muchina

1.0 Introduction

Academic performance is a critical measure of success in higher education, particularly in professional courses such as nursing, where competence directly impacts patient outcomes (Fooladi et al., 2022). In nursing education, academic performance is largely influenced by multiple psychosocial factors, including psychological, social, and stress-related issues. According to Amoldeep et al. (2020), social factors refer to environmental, financial, socio-economic status, family history, prior education, employment, and social support that can positively or negatively influence academic performance (Motari, 2024). This support can either protect students from academic pressure or, when it is absent, deepen their struggles. For instance, key social negative factors include family distress, emotional negativity, and substance use, which correlate with lower academic performance. Conversely, self-esteem and social support can enhance resilience and academic success (Ratanasiripong et al., 2022). Thus, social factors such as family support give students emotional and financial stability. Peer support helps students learn together and cope with shared challenges. Faculty support, through mentorship and guidance, builds students' confidence and skills.

Globally, a study done by Ratanasiripong et al. (2022) in Thailand revealed that family distress, being negative emotionally, low self-esteem, and substance abuse were factors related to academic outcomes of nursing students. High levels of family distress correlate with increased emotional negativity and lower self-esteem, leading to poor academic outcomes. Furthermore, other global studies have linked strong social support to better grades, lower stress, and improved retention among nursing students (Miller et al., 2023; Rodríguez-Leal et al., 2023).

Regionally, similar trends have been observed. For instance, according to Dube and Mlotshwa (2018), in KwaZulu-Natal in South Africa, parental involvement in education and good,

supportive relationships between nurse educators and students fostered better academic performance of students. Locally in Kenya, similar trends have further been observed through different studies. In Kenya, family and faculty support have also been linked to lower burnout and better academic engagement among nursing students (Otieno et al., 2023).

Despite this evidence, most Kenyan studies on psychosocial factors have focused on public, urban nursing institutions. Rural, mission-based schools, which often serve students from low-income backgrounds, remain under-researched. Our Lady of Lourdes Mutomo School of Nursing (OLLMSN) is one such institution. It is a private, faith-based nursing school in Kitui South, Kitui County, run by the Catholic Church and attached to Mutomo Mission Hospital.

"The study found that social support, particularly from family and peers, has a significant positive influence on the academic performance of nursing students at OLLMSN"

Institutional records at OLLMSN showed that the proportion of students facing psychosocial difficulties rose from 5% in 2022 to 17% in 2024, alongside rising referrals and fee-related distress. It was not clear how far social support factors, specifically family, peer, and faculty support, were shaping the academic performance of students in this setting.

This study was anchored on Bandura's Social Cognitive Theory (SCT), which holds that behavior, personal factors, and environmental influences interact reciprocally to shape human functioning. Within this framework, family support, peer support, and faculty support represent key environmental influences that

interact with students' personal beliefs and study behaviors to shape academic performance. Family support builds students' sense of stability and self-efficacy; peer support shapes learning behavior through observation and shared practice; and faculty support provides the modelling and reinforcement that SCT identifies as central to sustained motivation and performance. This theoretical lens guided the identification of family, peer, and faculty support as the three social sub-factors investigated in this study.

This study therefore sought to determine the social factors influencing the academic performance of nursing students at OLLMSN. Specifically, the study sought to: (i) establish the influence of family support on academic performance; (ii) determine the influence of peer support on academic performance; and (iii) examine the influence of faculty support on the academic performance of nursing students at OLLMSN. The findings are intended to help nursing schools, particularly those in rural and resource-constrained settings, design targeted interventions that strengthen social support systems for their students.

2.0 Materials and Methods

Research Design

The study used a multiple methods design, combining quantitative and qualitative approaches. This design is suitable because it allows for triangulation, meaning that one can cross-check findings from different sources to ensure accuracy and depth (Doyle et al., 2020). The quantitative part involved collecting numerical data to measure the extent of psychosocial factors affecting performance. The qualitative part included interviews that captured students' personal experiences, opinions, and feelings about these factors. The design also aligns with the Social Cognitive Theory, which posits that behavior, personal factors, and environmental influences interact to shape behaviors.

Study Area and Population

This study took place in Kitui County, which is one of the 47 counties of Kenya in the former Eastern Province of Kenya. The study specifically took place at Our Lady of Lourdes Mutomo School of Nursing, located in Mutomo market, Kitui South, Kitui County, Kenya. Mutomo is a small rural town in the eastern part of Kenya, about 230 kilometers southeast of Nairobi, the capital city. As of September 2025, the school had a total population of 190 students, including first-, second-, and third-year KRCHN students. Of this target population, first-year students were not eligible for inclusion in the study. Thus, the study population comprised 150 second- and third-year students pursuing the Kenya Registered Community Health Nursing (KRCHN) diploma, made up of 79 second-year and 71 third-year students. Five key informants, namely the School Principal, School Counsellor, Examination Officer, and two Heads of Department, were also included.

Sampling and Sample Size

Fisher's formula was applied, with a correction for the finite population, giving a sample size of 108 students. Stratified random sampling was used to select students proportionately from each year of study: 57 second-year and 51 third-year students (Van Haute, 2021). The five key informants were purposively selected based on their institutional roles and knowledge of student welfare.

Data Collection Instruments

A structured questionnaire with 23 items, mostly on a five-point Likert scale, was used to collect data from students. Social factors were measured using three items: whether family encouraged the student to perform well, whether classmates helped improve schoolwork, and whether teachers provided guidance that helped the student succeed. An open-ended item asked students to describe the specific support that helped them most. The same questionnaire also included psychological items (attitude and emotional factors) and stress items (academic

workload, financial stress, and substance abuse); these were retained in the analysis as statistical controls alongside the social variable, since psychosocial factors typically act together rather than in isolation, and their inclusion allows the relative contribution of social support to be assessed accurately. Semi-structured interviews were conducted with the five key informants. Both instruments were pre-tested. Specifically, prior to the main data collection, a pre-test was conducted at Jordan Hospital Medical College in Kitui County to assess the clarity, length, and appropriateness of the data collection instruments. The pre-test involved 15 nursing students who filled in the questionnaire and one interview session conducted with the school counsellor at that institution.

Data Analysis

Quantitative data were analyzed using SPSS version 26. The social support variables were described by descriptive statistics (mean, standard deviation) and checked for correlation with academic performance using Pearson correlation and multiple linear regression. The interviews produced qualitative data that was thematically analyzed and direct quotes were provided to show the themes that emerged from the data.

Ethical Considerations

Ethical clearance was granted by the Kenya Methodist University Scientific and Ethics Review Committee and the National Commission for Science, Technology and Innovation (NACOSTI). All participants gave informed consent and confidentiality was ensured using a coding system to anonymise participants throughout the study.

Limitations

This study has some limitations. Each social sub-factor (family, peer, and faculty support) was measured using only one Likert-scale item rather than a validated multi-item scale, such as the Multidimensional Scale of Perceived Social Support. This limited the internal-consistency reliability of the composite social variable

(Cronbach's $\alpha = 0.244$), well below the conventional 0.70 threshold, and should be read as a genuine limitation of the measurement approach, adopted because of the constraints of a broader psychosocial questionnaire covering multiple constructs within a single study. Future studies should consider validated multi-item scales to strengthen reliability. Because the faculty-support item did not vary enough to be retained in the composite, the quantitative findings speak most directly to family and peer support, while faculty support is supported mainly by the qualitative evidence. In addition, the cross-sectional design cannot establish causality, and the findings are drawn from a single, rural, faith-based institution, which may limit generalizability.

3.0 Results and Discussion

Response Rate and Demographic Profile

Of the 108 questionnaires administered, 107 were returned, giving a response rate of 99.07%. According to Mugenda and Mugenda (2003), a response rate of 70% is adequate for analysis. The sample was predominantly female (67.3%), consistent with the female-dominated nature of the nursing profession. Slightly more third-year students (53.3%) took part than second-year students (46.7%), and the average age of respondents was 21.6 years.

Social Factors Influencing Academic Performance

This study sought to determine the social factors that influenced the academic performance of nursing students at OLLMSN. Consistent with the study's specific objectives, three social sub-factors were investigated: family support, peer support, and faculty support. To address this objective, students responded to three Likert-scale items in Section C of the questionnaire. Item 8 asked whether their family encouraged them to do well in their nursing studies. Item 9 asked whether their classmates helped them improve their schoolwork. Item 10 asked whether teachers at the school provided guidance that helped them succeed. An open-

ended item (Item 11) asked students to describe the specific support from family, classmates, or teachers that helped them most in their studies.

During analysis, family support (Item 8) and peer support (Item 9) were retained in the composite social variable. Faculty support (Item 10), though conceptually part of the social construct and included in the questionnaire, exhibited near-ceiling responses with very little variation across students, which meant it could not contribute meaningfully to the composite in statistical terms. Its importance is nonetheless reflected in the qualitative findings discussed under Theme 3 (Faculty and Staff Support) below, where key informants and students consistently highlighted faculty mentorship and guidance as critical to academic success.

Table 1 presents the descriptive statistics for the two items that formed the social composite variable. The family support item recorded a mean of 4.178 (SD = 0.750), with a median of 4.0, indicating that most students agreed that their families encouraged and supported them in their studies. The vast majority of students reported receiving family encouragement, with 60.7% (n = 65) agreeing and 31.8% (n = 34) strongly agreeing. Not a single student strongly disagreed, and only 6.5% (n = 7) disagreed. This distribution confirmed that family support was a near-universal positive experience among students at OLLMSN. This was the stronger of

the two social items, which was consistent with the context of a rural, mission-based school where students largely came from family-oriented communities in Kitui County.

The peer support item recorded a mean of 3.841 (SD = 0.814), also above the midpoint, indicating that students generally perceived their classmates as helpful to their academic work. Most students (n = 76; 71.0%) agreed that classmates helped improve their schoolwork, with a further 13.1% (n = 14) strongly agreeing. However, 13.1% (n = 14) disagreed, suggesting that the benefit of peer support was not felt equally across all students, consistent with the dual positive and negative peer influence described by informants in the qualitative data. The slightly lower score and wider spread compared to the family support item suggested that the quality and availability of peer support varied more across students, with some benefiting greatly from collaborative learning while others found less value in it.

The composite social variable recorded an overall mean of 4.009 (SD = 0.591), well above the scale midpoint of 3.0, indicating that students at OLLMSN generally experienced meaningful levels of social support from both family and peers. The internal consistency stood at Cronbach's α of 0.244, which, while below the conventional threshold, was expected given the two-item structure of the scale.

Table 1

Descriptive Statistics for Social Variable Items and Composite

Variable	SD n(%)	D n(%)	N n(%)	A n(%)	SA n(%)	Mean	Median	SD
Family Support (Item 8)	0 (0.0)	7 (6.5)	1 (0.9)	65 (60.7)	34 (31.8)	4.178	4.00	0.750
Peer Support (Item 9)	0 (0.0)	14 (13.1)	3 (2.8)	76 (71.0)	14 (13.1)	3.841	4.00	0.814
Social Variable (Composite)						4.009	4.00	0.591

Note. N = 107. SD = Strongly Disagree, D = Disagree, N = Neutral, A = Agree, SA = Strongly Agree. Composite = mean of Items 8 and 9 scored on a 5-point Likert scale. Faculty Support (Item 10) was included in the questionnaire but excluded from the composite due to near-ceiling responses that restricted variance.

The strong family support scores were consistent with findings by Miller et al. (2023), who reported that nursing students who received consistent emotional and financial encouragement from their families were more resilient to academic stress and achieved higher

grades. Berdida et al. (2023) similarly found that students with strong family backing reported higher motivation and lower stress levels. The positive peer support scores resonated with Rodríguez-Leal et al. (2023), whose study showed that nursing students who engaged in

peer-led study groups and mentoring activities scored higher on both theoretical and clinical assessments. In the Kenyan context, Otieno et al. (2023) and Matara, et al. (2025) found that family support among learners both in lower and higher academic levels was linked to lower burnout levels and better academic retention, a finding that appeared to hold in the OLLMSN setting as well.

Relationship Between Social Factors and Academic Performance

Table 2

Pearson Correlation Matrix — Social Factors and Academic Performance

Variable	1	2	3	4
1. Psychological Variable	1.000			
2. Social Variable	0.002	1.000		
3. Stress Variable	0.059	-0.068	1.000	
4. Academic Performance	-0.067	0.208*	-0.217**	1.000

Note. $N = 107$. * $p < .05$; ** $p < .01$; ns = not significant.

The social variable showed a statistically significant positive correlation with academic performance ($r = 0.208$, $p = 0.032$). This indicated that students who perceived higher levels of family and peer support tended to perform better academically. The effect size was small to medium, which was meaningful within the context of this study. This finding was consistent with Miller et al. (2023), who reported that nursing students who received strong family support were more resilient to academic stress and achieved higher grades. Rodríguez-Leal et al. (2023) similarly found that peer collaboration and study group participation positively influenced both theoretical and clinical performance among nursing students.

Table 3

Multiple Regression Coefficients — Unstandardized and Standardized

Predictor	B	SE	Beta	t	p-value	Sig.	VIF
Intercept (Constant)	2.056	0.575	—	3.718	<.001	***	
Psychological Variable	-0.049	0.083	-0.056	-0.591	.556	ns	1.00
Social Variable	0.202	0.098	0.194	2.059	.042	*	1.00
Stress Variable	-0.134	0.063	-0.200	-2.121	.036	*	1.01

Note. $N = 107$. B = unstandardized coefficient; VIF = Variance Inflation Factor (all < 2.0; no multicollinearity). ** $p < .01$; *** $p < .001$; ns = not significant

In addition to descriptive analysis, inferential statistical analyses were conducted to determine the nature and strength of the relationships between social factors and academic performance.

A Pearson product-moment correlation matrix was computed to examine the bivariate relationships between the composite psychosocial variables (measured in the parent questionnaire; see Data Collection Instruments) and academic performance. The full correlation matrix is presented in Table 2.

Multiple Regression Analysis

To determine the combined and relative contribution of the social variable to academic performance while accounting for psychological and stress factors, a multiple linear regression was conducted with all three composite variables entered simultaneously as predictors. The model was statistically significant, $R = 0.358$, $R^2 = 0.128$, adjusted $R^2 = 0.103$, $F(3, 103) = 5.049$, $p = 0.0026$, indicating that the three predictors jointly accounted for 12.8% of the variance in academic performance. Table 3 presents the individual regression coefficients.

The social variable was a significant positive predictor of academic performance ($B = 0.202$, $\text{Beta} = 0.194$, $p = 0.042$), meaning it contributed unique, meaningful variance to academic performance even after accounting for psychological and stress factors. The stress variable was also a significant predictor ($B = -0.134$, $\text{Beta} = -0.200$, $p = 0.036$), while the psychological variable was not ($\text{Beta} = -0.056$, $p = 0.556$). Notably, once all three variables were considered together, social support and stress emerged as comparably strong predictors, with stress no longer the sole dominant factor as it appeared in the bivariate correlations. This pattern is consistent with prior evidence linking social support to nursing student performance (Miller et al., 2023; Rodríguez-Leal et al., 2023; Otieno et al., 2023).

Qualitative Data Analysis

Qualitative data were collected through semi-structured interviews with five key informants at Our Lady of Lourdes Mutomo School of Nursing. The informants included the School Principal, the School Counsellor, the Examination Officer, and two Heads of Department (General Nursing and Community Health). All informants were coded for purposes of confidentiality. The interviews were conducted face-to-face, audio-recorded with consent, and transcribed verbatim. Thematic analysis was used to analyze the data.

Informants were asked how family support, peer relationships, and faculty support influenced students' academic performance. Three prominent themes emerged.

Theme 1: Family Support

All informants identified family support as the most important social factor influencing academic performance. When asked how family support influenced students' ability to focus on their studies, the Principal stated that without good social, economic, and financial support, there could be no concentration in class, noting that unpaid fees caused distraction and low self-esteem among affected students.

"Without good support, both social, economic and financial support, there would be no concentration in those classes."

"Where a child comes from... determines the academic performance of a student."

Informants linked poor family support to low self-esteem and attention-seeking behavior. They noted that students from stable, supportive families perform better, while those from dysfunctional families struggle with stress from home conflicts. The informants further observed that family support provides the foundation for stability.

These findings were consistent with Miller et al. (2023), who found that nursing students who received strong family support were more resilient to stress and achieved higher grades. In the Kenyan context, Otieno et al. (2023) similarly found that family support was linked to lower burnout and better academic retention among nursing students at the University of Nairobi.

Theme 2: Peer Influence

When asked how peers helped or hindered academic progress, all informants described peer influence as a dual-edged factor.

"Being a member of a respectable... peer group... can have both a positive and negative influence."

Positive peer support through group discussions and collaborative learning was seen as highly beneficial. They noted that good peers encourage group study. However, negative peer groups introducing substance abuse, distractions, or poor habits were identified as significant hindrances by all interviewees.

"If you join a group that is into abusing substance... then we don't expect much from such a trainee."

These findings were consistent with Rodríguez-Leal et al. (2023), who found that peer-led study groups and collaborative learning positively affected both theoretical and clinical performance. Kinyanjui and Sum (2023)

similarly reported that peer social pressure was one of the primary triggers for substance abuse among nursing students in Kenya.

Theme 3: Faculty and Staff Support

All interviewees stressed the importance of faculty support. One of the informants advocated for open communication, academic boundaries, and a network organizational structure.

"A mentee and mentor rely on one key component... communication."

Informants described teachers as mentors who identify weak students and provide one-on-one support. They further noted that good tutor-student relationships enhance performance. These findings were consistent with Cleary et al. (2023), who found that mentorship and one-on-one faculty guidance significantly improved nursing students' motivation, confidence, and academic performance. Orth and Evanson (2024) similarly found that emotionally supportive faculty relationships reduced student anxiety and positively impacted academic outcomes.

4.0 Conclusion

This study found that social support, particularly from family and peers, has a significant positive influence on the academic performance of nursing students at OLLMSN. Family support was the strongest source of support reported by students, providing the emotional and financial stability needed to focus on studies. Peer relationships played a dual role, supporting learning when positive but introducing distraction and risk when negative. Although the faculty support item did not show enough variation to be analyzed statistically, qualitative evidence showed that mentorship and open communication with teachers were highly valued and linked to student confidence and success. Overall, the study confirms that a supportive social environment, made up of family, peers, and faculty, is a critical protective factor for nursing students, especially in

resource-constrained rural settings such as Kitui County.

5.0 Recommendations

Based on the conclusions drawn from the study, the following recommendations are proposed:

1. Nursing training institutions, particularly those in rural and resource-constrained settings, should formalize structured mentorship programmes that pair students with faculty members for regular, one-on-one guidance. This would strengthen the faculty support pathway identified in this study and give students a consistent point of contact for academic and personal challenges.
2. The management of OLLMSN should formalize peer support structures, such as study groups and peer-mentorship pairings, to strengthen collaborative learning. Faculty should be encouraged to adopt an open-door mentorship approach that builds student confidence and resilience. The institution should also establish structured channels for family engagement, such as periodic parent briefings on student progress, given that family support was found to be a significant protective factor against academic underperformance.
3. For policy, the Nursing Council of Kenya and the Ministry of Health should consider including structured mentorship and family-engagement guidelines within the minimum standards for nursing training institutions, particularly those serving rural and low-income communities.
4. For future research, scholars should consider using validated multi-item social support scales, such as the Multidimensional Scale of Perceived Social Support, and longitudinal designs, to strengthen reliability and help establish causal relationships between social support and academic performance. Adopting these recommendations would strengthen the social support systems that protect nursing students from academic underperformance,

with the practical value of improving retention, reducing burnout, and producing

more confident, better-prepared graduates for Kenya's healthcare workforce.

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