Nursing Students Engagement and Motivational Education Environment as A Requirement to Improve Student's Self-Esteem.

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ABSTRACT

INTRODUCTION: Nursing student engagement and educational environment play an important role in students' self-esteem. Therefore, all aspects of an person's life like academic achievement, the success in the job and social and professional development are affected by self-esteem, for that reason, the present study was aimed to investigate nursing student engagement and motivational education environment as requirements to improve Student's Self-Esteem. SUBJECT AND METHODS: A cross-sectional approach was used included 138 undergraduate male and female nursing students from the Shaqra University, (Kingdom of Saudi Arabia). Three electronic tools built-in Google drive to collect data: Student engagement scale, Motivational educational environment questionnaire, and Self-Esteem Scale. RESULTS: More than half of the student nurses had a high engagement level in females and males but slightly high in females than males. Educational environment subcategories and show that the total educational environment in the level of motivational environment slightly high in females (93.9%), as compared with males. Self-esteem among it was high level (equal) in female and male. CONCLUSIONS: There were positive relationships between the total educational environment, many of their areas, and self-esteem among nursing students so, motivation educational environment were a requirement to improve the level of self-esteem among nursing students. Hence, allowing student choices throughout the classes will provide an ideal learning opportunity as well as foster a sense of "belonging to learning" that is essential to developing learning competence and lifelong dedication (and high-quality nursing staff with high-quality performance).

Keywords: Engagement, Educational environment, Nursing Students, Self-esteem.

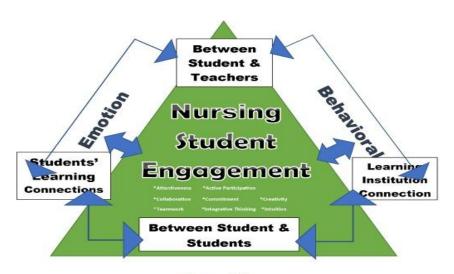
Introduction

One of the major determinants of student achievement is students' participation in relevant academic learning activities. Identifying the most effective teaching strategies to maintain and enhance participation of nursing students in academia and clinical settings has always been a challenge for educationalists. nurse Accordingly, a set of strategies is necessary to and enhance nursing students' academic engagement (Ghasemi, Moonaghi, &Heydari, 2020). Identifying the most

effective teaching strategies to maintain and enhance the participation of nursing students in academia and clinical settings has always been a challenge for nurse educationalists

Nursing Student Engagement (NSE) comprises three principal components: behavioral, emotional, and cognitive engagement. Attentiveness, integrative thinking commitment, intuition, collaboration, teamwork, creativity, and active participation are aspects of these three components. The Nursing Student Engagement Network Model

identifies the facets of engaged relationships' between the nursing learning institution and key related parties such as the institution, fellow students, and teachers.(Figure 1) (Hudson, & Carrasco, 2019).



Cognitive

Figure 1. Nursing Student Engagement Multidimensional Network (Hudson & Carrasco, 2015, expanded by Hudson, 2018)

Student engagement nowadays involves than just including more students at organizational events; its scope has grown beyond what was previously thought. It is now seen from several viewpoints, and no single factor is considered adequate to determine engagement. The participation of students including their emotional, cognitive and behavioral participation in the learning environment is considered as true engagement. Only engaging students in course material may not be enough, but also help students to get a better outcome. Nursing student engagement is essential in this respect that they have to pay double role. They not only engage in the classroom but also in a clinical setting (Sattar, Kouar, & Gillani, 2018).

Nursing students are anticipated to deliver high standards of care using clinical reasoning to develop a solution, decision-making, communication, and application of knowledge in a challenging clinical environment. The nurturing of these capabilities relies on student engagement processes that include cognitive, emotional,

and behavioral learning. Students do not use the interactive technologies and clinical resources available if they are not participating in the learning environment. This increases the student's expectation to transform from a beginner to an expert learner or to be a safe and effective student nurse. The growing gap between theoretical knowledge and practice has been of interest to nurses' educators and practitioners. There is a need to develop higher capabilities such clinical reasoning, as judgment, incorporation of theory into practice, participation in clinical, teacher encouragement, and student-student collaborative interaction among nursing students (D'Souza et al, 2014).

Academic achievement and course satisfaction are linked to the educational environment, which is a significant determinant of students' behavior. One of the most critical determinants of curriculum success is the learning environment, and the quality of the learning environment has a significant effect on learning (1). Furthermore, the educational environment is a key determinant of students' behavior, and its components are linked to academic success and course satisfaction (2).

How, why, and what students learn are all influenced by their educational environment. (3).To enhance the quality of the educational environment, institutions imparting higher education should create and implement a strategy for their higher school improvement (Aghamolaeiet al., 2014).

Nursing students develop personal and social self-esteem in their educational environment. Clinical staff and nurse instructors, as well as their awareness of the intended learning outcomes for the student's clinical learning time, are vital in constructing a good learning environment where theory and practice complement each other. It is expected from clinical staff and nurse educators to collaborate in facilitating the students' learning experience and acquisition of clinical skills during clinical practice (Bvumbwe, 2015). Learning is influenced by both the student's learning style and the environment in which the learning takes place. The learning environment not only affects the student's approach to learning but also the student's academic outcome, motivation level, self-esteem level, and degree of learning effectiveness. Moreover, assessment of the learning environment is an important aspect of providing high-quality education (Muhamad and Yusoff, 2015).

General self-esteem refers to overall perceptions of individuals about their worth, social self-esteem refers to individuals perceptions of the quality of their relationships with peers; and personal self-esteem refers to individuals' most intimate perceptions of self-worth. It has been suggested that the roots for building high self-esteem may lie in the educational process (Stuart, 2014)

Summarizing in light of perceived self-evaluation considerations and feeling, or in short, the global emotional state of the self is referred to as self-esteem. It can be positive leading to more happiness or negative leading to self-questioning and possibly depression. Self-esteem is how different abilities and traits are evaluated by people on a scale between negative and positive by people. Also known as a disposition to experience oneself as being able to deal with basic life challenges (Abdulghani et al, 2020).

In the context of education, self-esteem is based on students' evaluation of their abilities to achieve academic success. In this case, self-esteem can be low medium, or high. High self-esteem describes a student with a positive perception towards attaining academic excellence on subject matters. Moderate self-esteem describes a student with a carefree outlook on his or her academics. At this level of self-esteem, the student is willing to accept any grade above failure. On the other hand, low self-esteem describes students with negative perceptions towards attaining academic excellence on subject matters (Okoye, & Onokpaunu, 2020).

Significance of the Study

The educational environment plays important role in students' self-esteem. Hence self-esteem affects all aspects of an individual's life, such as academic achievement, job success, as well as social and professional development. In the educational phase, self-esteem is a critical academic construct. It is commonly accepted as one of the most significant factors in students' learning outcomes. Since students with high self-esteem actively participate in the process oflearning, they are more trusted in themself, they are energetic and interested to learn and accomplish better on the exams. On the other hand, low self-confident students do not actively take part in learning, stay passive, and this is likely to influence patient care negatively for this reason., the existing study was aimed to investigate nursing student and motivational educational engagement environment as requirements to improve student's self-esteem through, determination of the level of nursing student engagement also, students' opinions regarding the educational environment, lastly, level of nursing student's self-esteem and the relation between study variables.

Subject and Methods

The researchers used a cross-sectional approach. Nursing students from the Shaqra University, Kingdom of Saudi Arabia were the respondents in this study. Participants were identified via convenience sampling, and 138 undergraduate male and female nursing students from year 2 to year 4, enrolled in the academic year 2019 - 2020 in three campuses of applied medical sciences college included Al-Dawadmy, Ouawavivah. and Province. This research used three electronic tools

built-in Google drive to collect data: An Student Engagement Scale (SES), developed by **Doğan** (2014), a Motivational educational environment questionnaire developed by **Gamal** (2012), and Self-Esteem Scale developed by **Rosenberg** (1965).

The SES questionnaire was made up of twosections: section one involvesa demographic characteristics datasheet, containing a code number, age, sex, and academic year; part two consists of three factors and 31 items namely; Emotional engagement (10 items); Cognitive engagement (12 items) and Behavioral engagement (9 items). Five possible responses of participants were measured on a Liker scale ranged 1, 2, 3, 4, and 5 for the responses; strongly disagree, disagree, uncertain, agree, and strongly agree respectively. Then the total score was calculated and converted into a percent score by dividing the total score as followed: low < 50 %, moderate 50 -75 %, and high engagement \geq 75%. The reliability of the scale was tested and found that this SES questionnaire had high internal consistency (Cronbach's α coefficients were 0.880, 0.910, and 0.880 for emotional engagement, cognitive engagement, and behavioral engagement, in that order).

In terms of determining the students'views regarding the educational environment, the questionnaire consists of (102) statements gathered under three main dimensions learning environment. physical environment. psychological environment, it also covered ten subscales namely: nursing curriculum, student assessment, classrooms, skills laboratories, clinical settings, the relationship between nursing students and staff which include students relationships with faculty administration, health team members, the relationships of students with their peers, and services provided by the administration to students.

Participants' responses were evaluated in (4) point Likert scale, ranged 1, 2, 3, and 4 for the responses; strongly disagree, disagree, agree, and strongly agree correspondingly, whereas negative elements' scores were inverted. The rafts of the statements were summed up and the total score was calculated and converted into a percent score. Percent score above 60%, is considered a motivation educational environment, and a

percent score below 60% is considered an unmotivated educational environment.

The reliability and consistency of were tested by **Sun et al., (2007) &Tavatol and Dennis (2011).** A high internal consistencythrough Cronbach α coefficients was observed to measure the reliability of the three main dimensions of the educational environment questionnaire mentioned above was (0.900, 0.810, 0.770) respectively.

About tool number three regarding the Self-Esteem Scale by Rosenberg, the researchers used self-report assessment to measure nursing student's self-esteem. It consisting of ten statements divided into five positives and the other five negative statements. Participants' responses were evaluated in (4) point Likertscale, ranged 1, 2, 3, and 4 for the responses; strongly disagree, disagree, agree, and strongly agree correspondingly, whereas negative items' scores were reversed. The rafts of the statements were summed up and the total score was calculated and converted into a percent score. Self-esteem was considered high if the percent score 60 or above, moderate if the percent score ranged from 40 - < 60, and Low if the percent score ranged from 20 - < 40. The reliability with Cronbach alpha coefficient was (0.95) that indicated high internal consistency.

Twelve nursing students(10% of the study sample) were selected randomly for conducting pilot studyto assure the applicability, clarity, and feasibility of the instruments. The students took around 20 - 25 minutes to finish the questionnaire no adjustments were made. The Students took about twenty to twenty-five minutes to finish the questionnaire and no modifications were made.

In the absence of an internal review board at the university, the researchers were able to obtain approval to conduct the study through the deanship of scientific research and obtain official permission to select the samples and data collection from deans of colleges of applied medical sciences at a government university in Saudi Arabia. The researchers explained the study's purpose to the participants and ensured their anonymity.

Statistical design

The collected data were computerized, reviewed, categorized, tabulated, analyzed, and

offered Statistical Package for Social Sciences version 20 was used to create a descriptive and statistical form (IBM Corp., USA). The researchers use numerical data reported as mean (standard deviation) to test the data (SD). Frequency and percentage were used to express qualitative data. The independent t-test and one-way analysis of variance test were used to determine if there was a difference between quantitative variables. The correlations between different numerical variables were tested using Pearson's correlation test. P-value ≤0.05 was considered significant, and highly significant at p≤0.001.

Results:

Table (1): Contains personal characteristics of students and show that the majority of nursing student age \geq 21 years old with Mean \pm SD(21.80 \pm .945). Most of the participants were female (59.4%) and the majority (67.4%) in academic Year 4. All the nursing students were single (100.0%) and the majority of nursing student in Shaqra Collage (43.5%) while the lowest (24.6%) in EL-Dawademy Collage.

Tale (2): Illustrated that mean differences of the nursing student regarding engagement and shows a highly significant difference between all dimensions with regard to student engagement main categories score ($p \le 0.05$) and the total mean opinion high slightly in male (114.2321±7.60620). The highest mean and maximum opinions of nursing students related to cognitive engagement, then emotional engagement, and Behavioral engagement is the lowest mean and maximum opinion.

Figure (1):revealed that the level of nursing student engagement and shows that more than half of the student nurses (56.1% and 55.4%) had high engagement levels in females and males but slightly high in females than males.

Table (3):describes nursing student's opinions regarding educational environment subcategories and shows that total educational environment in the level of motivational environment slightly high in females (93.9%), as

compared with a total educational environment in the un-motivational level of environment high in male (8.9%). Also, it shows that the highest percentage 1stin level of the motivational environment (98.8%) related to female learning environment was upon the students' assessment, while the lowest mean opinion in the female nonmotivational environment (1.2%) with the learning environment. The 2nd highest parentage was found in the female psychological environment (92.7%) especially in relations with peers, and with health team (100.0%), relations with faculty, staff, and students (97.6%). And the 3rdphysical environment is the highest percentage was upon in nursing student's classrooms and hospitals (clinical setting) (96.3%, 74.4% respectively). As compared to an un-motivational environment high slightly in the physical environment was upon related to female skills lab (32.9%, 40.2% respectively) also, in the female psychological environment (7.3%).

Figure (2):describes levels of nursing student self-esteem among the study sample, and proves that it was high level (equal) in female and male.

Table (4): There were significant statistical discrepancies between male and female students' opinions on subcategories of the educational environment, as shown. (Schedule, curriculum, teaching methods) and self-esteem opinion, and p-values of .014 and .010, respectively, also There are statistically significant discrepancies between male and female students' perceptions of the relations with faculty, staff and students, relations with peers and self-esteem opinion and p-values of .014, .023, .010 and .014 respectively.

Table (5): shows that there is an association between total educational environment score and Self-esteem score. Also, there is no statistical significance between engagement score and self-esteem score.

Table 1: Student's demographic data in the study sample (n=138)		
Demographic data	N	%
Age:		
<21	8	5.8
21+	130	94.2
Mean ± SD	21.80± .945	
Gender:		
Female	82	59.4
Male	56	40.6
Academic Year:	45	32.6
Year 3 Year 4	93	67.4
Marital status:		
Single	138	100.0
Married		
Collage:		
Shaqra	60	43.5
EL-Dawademy	34	24.6
El-Quayaia	44	31.9

Table 2:-Mean differences of Nursing student regarding engagement.

Student engagement main categories	Mean ± SD		One sample t- test		P- value
(maximum score)	Female	Male	Female	Male	
Emotional engagement(47.00)	41.7317± 4.07052	41.9464±4.38767	92.838	71.541	.000
Cognitive engagement (58.00)	51.6585 ±4.84123	51.6250±5.00386	96.626	77.206	.000
Behavioral engagement(24.00)	20.7805±2.32551	20.6607±2.42170	80.918	63.844	.000
Total Nursing student engagement (123.00)	114.1707±7.24323	114.2321±7.60620	142.735	112.387	.000

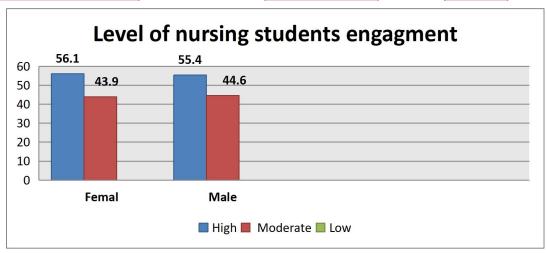


Figure (1): Percentage of total score engagement level among nursing students.

Table 3: Nursing students 'satisfaction levels regarding educational environment subcategories (n=138).

Educational environment subcategories	Level of Health			
S	Motivational Environment		Non -Motivational Environment	
	Female %	Male%	Female %	Male%
Learning Environment	98.8	92.9	1.2	7.1
Schedule, curriculum, teaching	39	25.0	61.0	75.0
methods				
Students' assessment	95.1	87.5	4.9	12.5
Physical Environment	67.1	80.4	32.9	19.6
 Classrooms 	96.3	92.9	3.7	7.1
Skills lab	59.8	73.2	40.2	26.8
 Hospital(clinical setting) 	74.4	83.9	25.6	16.1
Psychological Environment	92.7	89.3	7.3	10.7
Relations with faculty, staff and	97.6	96.4	2.4	3.6
students				
 Relations with peers 	100.0	100.0	00.0	00.0
Relations with health team	100.0	100.0	00.0	00.0
Relations with faculty administration	80.5	89.3	19.5	10.7
Services provided by administration	72.0	83.9	28.0	16.1
Total educational environment	93.9	91.1	6.1	8.9

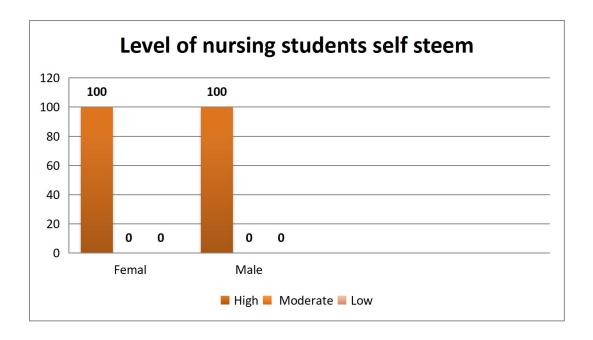


Figure (2): Percentage of nursing students' total score self-esteem level.

Table 4: Relation between educational environment subcategories and self-esteem.

Educational environment	Pearson	Self-esteem		
subcategories	Correlation	Female	Male	
Schedule, curriculum,	R	.327*	.340*	
teaching methods	P-value	.014	.010	
Students' assessment	R	117-	116-	
	P-value	.297	.396	
Classrooms	R	.204	.201	
	P-value	.066	.137	
Skills lab	R	.095	.067	
	P-value	.397	.621	
Hospital(clinical setting)	R	060-	.088	
· ·	P-value	.595	.517	
Relations with faculty, staff	R	.327*	.304*	
and students	P-value	.014	.023	
Relations with peers	R	.340*	.327*	
-	P-value	.010	.014	
Relations with health team	R	.023	.086	
	P-value	.836	.530	
Relations with faculty administration	R	.044	.126	
	P-value	.693	.354	
Services provided by	R	076-	.003	
administration	P-value	.500	.984	

Correlation is significant at the 0.01 level (2-tailed).**
Correlation is significant at the 0.05 level (2-tailed).*

Table 5: Correlation between total nursing students' engagement, educational environment and self-esteem score.

Variables	Self-esteem		
	r	P	
Engagement	.164	.054	
Total educational environment	0.446	0.00	

*p≤0.01.

Discussion

The present study aims to decide the requirements of nursing student engagement and health educational environment to improve student's self-esteem. Thus, the results of this research will be introduced in two parts to achieve the research purpose and answer the research questions.

I: Engagement, Health educational environment, and Self-Esteem among nursing student.

Considering engagement, the results of this study showed that more than half of the research samples had a high level of engagement, but it was slightly higher in

females than in male students. Perhaps it was a result of having the students together in one college with their feelings of enthusiasm, inspiration, and challenge. In addition, they actively get involved in the content while learning. It is slightly higher in female nursing students due to their better social skills, higher working power, and readiness to give to their college as well as their persistence during difficult situations or may be related to describes actively engaged students approaching challenging tasks eagerly, exerting intense effort using active (that is, deliberate) problem-solving strategies, and persisting in the face of difficulty.

These findings in the same line with Hampton, Welsh, and Wiggins, (2020) reported

that nursing students had the highest level of engagement. Also, this result may be related to the students' exposure to knowledge, critical thinking, and academic achievement in the learning environment, which are features of students' cognitive learning consequences. It was also found that compared with students who were born with a lack of internal orientation and engaged in extra work outside of school requirements, those who were more proficient and challenging students used more cognitive strategies and performed more satisfying cognitive activities.

Engagement, and clarified that enhance work engagement can foster quality of care and create a better defense against losing nurses. In addition, the study result shows that highly significant difference between all dimension with regard to student engagement main categories score (p≤0.05) and the highest mean and maximum opinions of nursing student related to cognitive engagement, engagement, and emotional behavioral engagement is the lowest mean and maximum opinion. This result may be related to students after exposure to the learning environment gain knowledge, critical thinking, and academic achievement this characteristic of student's in cognitive learning outcomes. Also, found that students who were more mastery and challenge-oriented used more cognitive strategies and engaged in more met cognitive activities than students who were less intrinsically oriented and doing extra work beyond the requirements of the school.

This result agrees with Mennenga, (2013) study conducted on students in higher education the findings showed a significant difference in student engagement (p < 0.001). Also, this results in the same line with Hampton and Pearce, (2016), who reported that significant differences were noted for engagement level between generations of students. Also, this result congruence with D'Souza et al., (2014), He stated that nursing students were of greater engaged in the clinical learning environment. He also added that critical and creative thinking, adaptability, problem-solving skills, and the ability to manage one's own learning are considered important factors in the cognitive and behavioral learning process. The ability to

communicate with others and interpersonal skills are regarded as essential for emotional and behavioral learning. The ability to communicate with others and interpersonal skills are considered vital for emotional and behavioral learning. While, this result disagrees with **Bond et al., 2020** study conducted in the United States and the United Kingdom in higher education and reported that behavioral engagement (86%), is the highest score, while the cognitive dimension is the lowest score reported only (56%) studies.

According to nursing students' opinions regarding educational environment subcategories, a learning environment that is not as obsolete as traditional classrooms but that is specifically engineered to support thinking. They enjoy a learning environment that challenges them to learn more by changing techniques and teaching methods and practices. The finding of the present study clarified that the learning environment is the highest percentage upon related to female students' assessment in the motivational environment level, as compared to motivational environment level the two-third of the male nursing student opinion upon related to schedule, curriculum, teaching methods. This may be related to the relationship between a teacher and his or her students, in my opinion, seems to be the most vital part of a safe and enjoyable learning environment. When students recognize that their teacher is concerned about them, they feel comfortable asking questions, making mistakes, and taking risks to learn something new. This result disagrees with van Alten et al., (2019), there was a minor positive effect on learning outcomes, but no influence on student satisfaction with the learning environment was found.

Regarding the psychological environment, the finding of the present study reported that all-female nursing student opinion related to relations with peers, relations with the health team, and the majority of female opinion related to relations with faculty, staff, and students and relations with faculty administration upon un-motivational environment level, as compared to motivational environment level the high score less than half of the student opinion related to services provided by the administration. This could be

linked to the teacher's assistance in forming this community in which all students get along and celebrate one other's differences. Students feel that they are part of a collaborative learning effort throughout the day, sharing their skills and encouraging one another. This result agrees with Papastavrou et al., (2016), that reported that their satisfaction was positively correlated with the construction of all learning environments, namely the relationship with peers, the mentoring relationship (mentor), and the teaching atmosphere of the role of nurse teacher. In addition, this result is consistent with D'Souza et al. (2014). A study of nursing students in Oman showed that areas of participation, collaboration, the high domain of relationships, skills of communication, IP skills, and working in groups were covered topics in addition to active learning, learning feedback to aid, relationships of teacherstudent, student- peer relations, and cooperative learning and also agree with Gaber, & Moustafa, (2015).

In term of the physical environment the current study finding reported that the highest percentage of female nursing student opinion related to classrooms and Hospital (clinical setting) upon related motivational to environment level, as compared to motivational environment level less than half of the participant opinion related to skills lab. This may be related to students feel motivated to learn within the boundaries and expectations of a safe classroom. Through modeling and encouragement of safe environment rules, students feel motivated to do the right thing and help one another. Also, the teachers emphasized intrinsic motivation classroom to keep students interested and invested in their own learning goals. The extrinsic motivators help in understanding the expectations and internal motivation. This study agreed with Lapkin et al., (2010), reported that in undergraduate nursing programs in Nepal. Students were satisfied with the LE overall.

The present study revealed that the total educational environment is high in the motivational environment and slightly high in females than males (93.9%, 91.1% respectively), as compared with the total educational environment, un-motivational

environment level was low. This result is consistent with the study of Al Helal and Al Turki, (2019), conducted in Riyadh, and reported that the educational environment is an important determinant for the success and accomplishments of learners in the medical field.

Considering the point of self-esteem of student nurses, the results of the current study showed that 100% of the studied nurses had a high level (equal) positive self-esteeming in both female and male. This may be due to nurse students' high self-esteem claims to make better impressions on others compared to people with low self-esteem. Also, students' high self-esteem helps people to be more willing to speak up in teams and to say their opinions about the group's approach and Selfesteem has a strong relation to feelings of happiness. The findings of the current study are in agreement with Ibrahim, (2015), who found that both male and female students' respondents showed a positive perception of their selfesteem. In addition to that, it showed a high level of self-esteem. Also, it is in the same line with Duruk, Kurban, & Kurban, (2017), study was conducted on nursing students in high school in a city in the Aegean Region and who found that 57% had high self-esteem. These results disagreed with the study of Fawzyet al., (2020), conducted at Assiut University on nursing students in higher education and that included the study findings revealed that both female nursing students and male nursing students had moderate levels of self-esteem (42% and 43%) respectively.

II: Relationships between engagement, educational environment, andself-esteem.

Regarding the relationship between educational environment subcategories and self-esteem, the findings of the present study revealed that there was a statistically significant relationship between positive subcategories educational environment (Schedule, curriculum, teaching methods), and self-esteem. This result may be related to good educational environment improves nurses' satisfaction, physical and psychological health, create positive feelings, strengthening learning workplace, and building organization's image as the best in curriculum,

teaching method, and student motivation, therefore, encourages student nurses to be high self-esteem in their college. Nurse educators also strive to enhance students' skills and awareness, as well as to increase protective factors and minimize pressure factors, by improving nursing students' sense of value, using participatory teaching considering students' feedback. These findings supported Sliman, & Mahmoud Khalil, (2019), in their study which was conducted at the College of Nursing, Zigzag University found that there is a positive significant correlation between self-esteem scores for nursing students and their agreement upon many of the areas education environment especially agreement in the nursing curriculum(r=0.17, p=0.01). And student assessment (r=0.13, p=0.03).

Additionally, the results of this study showed a significant difference in the relation between self-esteem and education environment subcategories as (relations with college, staff, and students, as well as relations with peers and self-esteem).

This result agrees with Meškauskienė, study conducted (2017),at Lithuanian University and who demonstrates that selfesteem can assist teachers in comprehending the essence of self-esteem and its impact on students, as well as developing their own skills providing a positive social-emotional environment for students that will increase their self-esteem It is critical to create an educational environment in which a humanistic atmosphere, based on respect for the student, prevails, would be dominating, increasing students' responsibility, independence, freedom of choice, and belief in their own skills. It is critical to create an educational environment in which a humanistic climate based on respect for the student reigns supreme, enhancing students' responsibility, independence, freedom of choice, and belief in their skills. While, this result disagrees with Nyadanu et al., (2015), the study revealed that because there was little interaction between lecturers and students resulting in the average relationship, the prevailing relationship did not directly or not enough to influence academic attainment but rather encouraged high selfesteem which in turn stimulated high academic and level attainment significantly (p< 0.01).

Regarding the relationship between Engagement, and Self-esteem, Students' school engagement is widely regarded as critical for positive adjustment in the school and success in academics. the present study found that there was no statistically significant positive relationship between nurses' student engagement and self-esteem. This result may be related to engagement generates forces that would foster individuals to become attached to his/her environment and in turn will foster individuals to remain with his/her student school, before building self-esteem. These results incongruence with the study of Mihalec-Adkins & Cooley, (2020), revealed that Results indicate significant associations school engagement and between selfesteem. .Also disagree with Bang, Won, &Park,(2020), reported there was a reducing depressive symptom by enhancing school relationship between engagement, and selfesteem. The study of Lavy & Naama-Ghanavim, (2020), found also that teacher caring was associated with students' selfesteem, well-being, and school engagement. In addition, Karababa, (2020), among Turkish adolescent's Cross-sectional studies indicate a positive relationship between school engagement and self-esteem.

Regarding the relationship between the total educational environment and Selfesteem, the present study found that there was a statistically significant positive relationship between nurses' student's total educational environment and self-esteem. This may be due to student nurses with high self-esteem will be satisfied with their classroom environment, learning opportunities, relationships with work colleagues, in addition to recognition and appreciation of nursing activists. All of these factors can develop self-esteem among student nurses. These results agreed with the study of Coelho, Bear, & Brás., (2020), in their study which was conducted in Portugal reported that the results clarified that students with higher positive perceptions of school environment at the beginning of fifth of the school environment in the growth of self-concept and self-esteem., the findings also highlight the

importance of school climate in the development of self-concept and self-esteem.

Lastly, when colleges make it easy for students to train and practice the behavioral and social skills needed to work in cooperation with others, they will get satisfied to know they have helped to prepare students for a world where they will need to coordinate their contributions with others to accomplish success in their work, balance personal relationships cleverly, and add to the community.

Conclusion

Generally, this study assesses efforts to monitor and support students' deep understanding of their sense of nursing engagement and revealed positive correlations between total education environment, many of their areas, and self-esteem among nursing students. Therefore, a motivating educational environment was required to develop levels of self-esteem among nursing students.

Recommendations

- While the majority of students are engaged, some, especially male students, are not; these students need additional support to increase their engagement. Through;
- Encourage roles in the learning environment that promote well-roundedness, reflection, planning, engagement, compassion, sharing, and transparency.
- Allow students to make choices during class, which will create a wonderful learning environment;
- Include a variety of curricular instructional formats to engage all types of learners and sustain all students' engagement and interests;
- Group learning (including individualized feedback) to improve successful "teamwork," which is a job prerequisite for today's quality nursing care.
- Classrooms and skill labels should be adequately ventilated, with sufficient lighting and constant power supply; a dustbin should be supplied to aid in maintaining cleanliness; constructed in such a way that various technologies can

- be used successfully; well supplied with more technological audio-visual aids and nursing skills equipment in terms of quality and quantity to commensurate with the numbers of students.
- The faculty administration needs to pay more attention to auxiliary and recreational services like the cafeteria, restrooms, and resting areas.
- Student evaluation can be enhanced by encouraging students to discuss test results and receive positive input on their success.
- Changes in student interactions with hospital personnel and administration, in particular, should be geared more toward junior students, who are the most impacted by these issues.
- Faculty administration takes on advisory positions by communicating with students, increasing accountability, consulting with students, and empowering students to express their concerns and integrate into the institution.

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