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QUALITATIVE STUDIES

Paradoxical experiences of nursing students in Canada with the concept-based curriculum

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Abstract
Constant assessment, revision, and reform of nursing curricula are dynamic processes in nursing programs that meet the learning needs, address new health trends, and challenges. Converting to a concept-based curriculum (CBC) is an educational approach that teaches concepts rather than focusing on subject-specific content. After many years of implementing CBC, there is a need to understand the academic lived experiences of nursing students' learning with CBC. Therefore, this qualitative phenomenological study aimed to uncover the meaning of the experiences of the nursing students at the School of Nursing in Cape Breton University in Canada after nine years of reforming the nursing curriculum to a concept-based one. Giorgi's phenomenological descriptive method was employed to collect and analyze data from five undergraduate students from September 2022 to June 2023, using semi-structured, recorded interviews. This method was employed to gain an understanding of students lived academic experiences with the CBC, enabling researchers to capture the essence and meaning of these phenomena. Researchers utilized reflective journaling throughout data collection and analysis to enhance the study's trustworthiness. This study revealed that nursing students had different learning experiences with the CBC. The major General Structural Description (GSD) that emerged was living in a paradoxical experience. The findings focus on the contradiction in nursing students' learning under a CBC. Many potential challenges were encountered, including transition difficulties, structural issues, and difficulties with learning outcomes; however, students also shared their positive and supportive experiences. In light of both the current literature and the results of this study, further research is recommended to explore practical strategies for optimizing CBC delivery and enhancing its impact on nursing education and practice.

Keywords: Academic lived experiences, concept-based curriculum, descriptive phenomenology, Giorgi's method, nursing students

Introduction

Constant assessment, revision, and reform of nursing curricula are dynamic processes in nursing programs that meet the learning needs of students and address new health trends and challenges (Iwasiw et al., 2020). The heavy content of traditional nursing education, which focuses on learning separate topics related to specific organs and diseases (e.g., maternity, pediatrics, mental health, medical-surgical), has been challenging for students to boost their critical thinking (Brussow et al., 2019; Gooder & Cantwell, 2017). To prepare students to work within the clinical practice, many nursing educators advocate for approaches that promote conceptual learning (Feller, 2018; Giddens & Brady, 2007; Choperena et al., 2025). A conceptual analysis learning was defined as a process in which learners organize concept-relevant knowledge, skills, and attitudes to form logical cognitive connections that result in assimilation, storage, retrieval, and transfer of concepts to applicable situations, familiar and unfamiliar (Fletcher et al., 2019). Concept-based learning (CBL) focuses on teaching the underlying concepts of all diseases along with their exemplars, which can be applied in practice (Tweedie et al., 2024; Al-Omari et al., 2024). The following is an example of concept-based learning, the concept of gas exchange is taught through numerous examples of clinical conditions across different age groups and related to various causes. This approach enables students to know more about the principles of gas exchange and apply them to diverse patient conditions, and promote deeper critical thinking. By exploring concepts through varied contexts, learners can

identify patterns and their relationships to improve a more transferable knowledge of the nursing matter (Nielsen et al., 2021).

CBL supposes that students' learning and understanding are enhanced when the focus is on broad concepts that transcend all environments, including health and illness, as well as the life span (Laverentz et al., 2024; Harrison, 2020). Approaches to CBL are student-centered and utilize active learning strategies to develop knowledge, skills, and abilities essential in nursing, including improving critical thinking and clinical reasoning, supporting the integration of theory into practice, and inspiring a collaborative and lifelong learning spirit (Benner, 2012; Repsha et al., 2020; Romanowski et al., 2021). The transition from these individual learning strategies to a comprehensive educational model is realized through the concept-based curriculum (CBC), which seeks to institutionalize these benefits throughout the nursing program. A study found promising results on the effect CBC may have on critical thinking and clinical judgment, and other perceived benefits (Buckner et al., 2024). By shifting the pedagogical focus from isolated facts to interrelated patterns, CBC supports a 'conceptual lens' that allows students to recognize universal clinical principles. This cognitive agility is vital in high-acuity environments, where the ability to synthesize complex data into sound clinical judgment is the primary determinant of outcomes. CBC teaches nurses to be adaptable and resilient with evolving healthcare practices worldwide. Therefore, this curriculum appears to be suitable for implementation in nursing programs worldwide. In Canada, the CBC has been adopted by nursing programs at the institutional level, as part of the national accreditation and competency frameworks set by the Canadian Association of Schools of Nursing (CASN). Although the government does not require CBC, financial support from federal and provincial sources for nursing education—such as funding for increased enrollment, clinical placements, and simulation-based and virtual learning—helps create the necessary framework for delivering CBC (Government of Ontario, 2025). CBC structures education around fundamental concepts to enhance clinical reasoning and facilitate knowledge transfer, ensuring that nursing education meets the challenges of increasingly complex clinical practice (Aldiabat et al., 2025).

In an effort to boost nurse competency, Cape Breton University implemented a CBC model in 2016 for three distinct educational pathways: the Direct Entry, Advanced Standing, and LPN to BSN Bridging program. A study discussed that the university opted to transition to a CBC because it provides a systematic foundation for delivering nursing education, centred around well-defined concepts and their practical applications (Aldiabat et al., 2025). By shifting the focus away from mere content memorization, the CBC encourages critical thinking and eliminates artificial separations within the curriculum. Furthermore, concept-based education assists newly graduated nursing students in effectively translating theoretical knowledge into clinical practice, enhances meaningful learning experiences, helps students link new information to prior knowledge, motivates them to apply their broader conceptual understanding across contexts, and improves their clinical judgment skills. In earlier iterations, students followed a content-based curriculum four-year undergraduate program that could be completed in eight semesters (each lasting 13 weeks) over four years. However, the revised CBC at Cape Breton University accelerated the program to three years, though it still consists of eight semesters. Theory courses and nursing practice hours were concurrently taught throughout the semester in the earlier structure. Unlike this integrated arrangement, the new model adopts a condensed clinical block format that prioritizes nursing practice on Mondays and Tuesdays, followed by theory courses from Wednesday to Friday. The program introduced a sequential arrangement, with students typically engaging in a block of theory courses followed by a scheduled block of nursing practice hours in most semesters.

However, there have been few reports of students' experiences with a CBC to date (Brussow et al., 2018; Gooder & Cantwell, 2017; Aldiabat et al., 2025). In 2016, the School of Nursing at Cape Breton University decided to transition from a content-based curriculum to a CBC and to streamline the nursing program from four years to three years. However, since the implementation of the concept-based nursing curriculum at the School of Nursing at Cape Breton University, little is known about the lived experiences of nursing students with CBC. In general, no studies have been conducted on the lived experiences of nursing students following years of implementing the CBC. Following nine years of CBC implementation at the School of Nursing, Cape Breton University, Canada, this study investigates the lived experiences of nursing students to better understand the impact of the curriculum on their learning. The lead author had a strong interest in exploring and directing this research as it relates to curriculum evaluation. Modifications in the curriculum influence not only the content learned by students but also their overall learning experiences. Gaining insight into their viewpoints is essential for understanding how concept-based curricula influence engagement, confidence, and the development of clinical reasoning in professional practice. This study was guided by the central research question: 'What is the meaning of the lived experience of learning within a concept-based nursing curriculum from the perspective of students?' To our knowledge, this is the first study in Canada to explore the academic lived experiences of nursing students within such a framework. The study expected that the results would advance understanding of both the

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opportunities and challenges of learning within a CBC, particularly with respect to students' development of clinical reasoning, confidence, and preparedness for nursing practice.

Method

The study applies Giorgi's phenomenological framework to uncover the essence of nursing students' experiences within a CBC. The framework is appropriate for the project because it provides a guideline for exploring unfamiliar phenomena and allows researchers to clarify the essential meaning of an experience from the participants' perspectives (Giorgi, 2020; Englander & Morley, 2023). Furthermore, this method can provide a rich and in-depth understanding of the academic lived experiences of nursing students. The population of the study is nursing students at Cape Breton University, Canada. To ensure a diverse sample and enrich the data, all nursing students from three programs are the population, such as Direct Entry (a three-year program for students entering directly from high school), Advanced Standing (a two-year program for students with a previous university degree), and Bridging (a two-year program for licensed practical nurses pursuing a Bachelor of Nursing degree). However, as this is a qualitative research design, not all students participated in the study. Only a few who met the inclusion and exclusion criteria were involved. The inclusion criteria were male and female, active students, Canadian or international nursing students in their fifth level of study or above, and recruited through multiple channels (e.g., email, advertisements, and personal referrals). Students do not need to have previously taken a CBL/CBC. Meanwhile, the exclusion criteria included students at the lowest level of study and individuals who were no longer enrolled (e.g., on leave, withdrawn, or graduated).

Purposive sampling was the best approach for qualitative studies, as it allows researchers to choose participants who have relevant experiences or characteristics, providing high-quality data (Denieffe, 2020). Sample size was determined according to the principle of information power, aiming to obtain a spectrum of experiences relevant to the study questions. All participants provided written informed consent and were aware that they could withdraw from the study at any point without consequence. To maintain confidentiality and anonymity, participants were asked to choose pseudonyms, as students were located on the same campus as the researchers. After obtaining ethical approval from the Research Ethics Board at Cape Breton University (approval number 2022041), the author collected data from participants through in-person or virtual semi-structured interviews, guided by a list of open-ended questions. The research team works together with specific task divisions to achieve the research objectives. The interview guide was developed to focus on the learning experiences during CBC implementation among nursing students. The team began by reviewing evidence on the CBC and its impact on the learning process and students' experiences. A pilot review of the interview questions was conducted before data collection. The interview guide was reviewed by students who met the inclusion criteria but did not participate in the study. These students provided feedback on clarity, wording, and relevance, and they reported that the questions were clear and understandable. Minor refinements were made in response to their feedback to ensure that the interview questions were appropriate and comprehensible. During the formal interview process, researchers used open-ended questions to gather detailed experiences based on study objectives.

Four interviews were conducted in a private office at the School of Nursing in Cape Breton University, and one was conducted virtually through Microsoft Teams from September 2022 to June 2023. Each interview lasted between 45 and 60 minutes and was transcribed. The interviews started by asking the following open-ended question: "Please describe a situation or experience that best depicts what it is like for you to be a nursing student learning in a CBC at the School of Nursing in Cape Breton University." In addition, participants were asked the following other open-ended questions that were discussed and validated by the research team. The questions were can you tell me about your experience learning in a concept-based nursing program? Would you please explain what benefits you have gained from learning in a concept-based program? Could you please discuss the challenges you have faced or are currently facing during concept-based learning? Let me know what helps you succeed in this concept-based nursing program. In which ways does this concept-based nursing program enhance your learning? What factors influence your performance in this concept-based program, and how? What are your concerns about learning in this concept-based program? How do you think faculty members/educators and staff can help you progress in this concept-based program? The interview questions were developed by the first author and reviewed and agreed upon by the other authors before pilot testing. Following the students' pilot review, the questions were further discussed and confirmed by all authors. Recruitment continued until the data had enough depth and scope to address the study objectives, which was attained following 7 interviews. No participant reported discomfort, but 2 withdrew during data collection.

Data generation, along with analysis, followed reflexive thematic analysis in the process (Braun & Clarke, 2024). This approach aligns with social constructivist epistemology, that enabling the interpretation of meaning constructed by

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study participants via reflective engagement with data. Reflexive thematic analysis provides in-depth exploration and then reveals complex interplays between participants' experiences and social influences. Analysis adhered to the five phases of reflexive thematic analysis such as reviewing the descriptions, identifying meaning units from the words used by participants, shifting the participants' words to a greater level of discourse to the language of science in generating focal meanings, integrating focal meanings so that students transform into situational structural descriptions (SSDs) for every participant and eliminating particular information then integrating the essence to develop a general structural description for all participants. This is also known as the "meaning of the experience." (Giorgi, 2020). The participants' words were elevated to a level of discourse in scientific language through a phenomenological analysis. The process presented the essence of the students' general structural descriptions (or the description of the experience or the central theme, which was "living in a paradoxical experience"), including direct quotations. The research team read transcripts verbatim, wrote reflective memos, noted meaningful content, and generated themes. All authors reviewed, refined, defined, and named themes, reaching consensus on the final thematic structure through intensive discussion. Finally, the study delineated four distinct SSDs, which constituted the General Structural Description (GSD) framework, such as chaotic educational transition and adjustment, challenges in program and curriculum structure, impediments to learning outcomes, and supportive and positive learning experiences.

The study adhered to the trustworthiness criteria for enhancing research quality by assuring credibility, dependability, transferability, and confirmability (Lincoln & Guba, 1985; Cutler et al., 2021). Credibility was supported through in-depth interviews and regular discussions among the research team to verify emerging meanings and themes. Dependability was enhanced by maintaining a clear audit trail of analytic decisions. Transferability was addressed by providing rich descriptions of the participants and context. Confirmability was strengthened through reflexivity and team consultation; the first author kept a reflexive journal to document personal assumptions about CBC and minimize researcher influence throughout data collection and analysis. Furthermore, the first Author consulted and discussed the process and the findings with other research team members, and he used a reflexive journal to jot down his own beliefs, understanding, or knowledge about the CBC before and throughout the data collection and analysis to minimize his influence as a researcher and educator.

Numerous measures were implemented to safeguard the human rights of the participants, as participants were students and a vulnerable population. Firstly, the researchers collaborated with the Research Ethics Boards at Cape Breton University to ensure that the study was conducted ethically, prioritizing the rights and interests of the participants. The researchers treated the participants with fairness. Students were also informed that their academic tasks and grades would not be influenced by whether they chose to participate or not. All data, whether in hard copy or electronic format, were securely stored in a locked filing cabinet in a private office, accessible only by the principal investigator. Furthermore, computerized research information was stored in designated research files accessible only to the researchers.

Results

The study involved two participants from the regular direct entry nursing program, two from the advanced standing program, and one from the bridging nursing program. Two participants were at the 6th level, one at the 5th level, one at the 7th level, and one at the 8th level, with an average age of 24 years. Four participants were female, and one was a male nursing student. The findings of this study revealed that nursing students had different learning experiences with the CBC. The major GSD that emerged was "Living in a Paradoxical Experience". Students reported that their engagement with the CBC both presented challenges and rewards. The data reflect a GSD "Living in a Paradoxical Experience", where students navigate the tension between appreciating supportive faculty and facing challenges. Though participants acknowledged the responsiveness, flexibility, and encouragement offered by instructors, they described feeling overwhelmed by the intensity and pace of content delivery, the excessive amount of group work, and the limited opportunities for in-depth learning or clinical application. This duality of feeling, both supported and burdened, highlights a paradox in which the educational environment fosters care and adaptability at the interpersonal level. However, this environment remains constrained by structural demands that compromise students' ability to fully absorb and apply knowledge in meaningful ways.

The study delineated four distinct SSDs which constituted the GSD framework as follows chaotic educational transition and adjustment, challenges in program and curriculum structure, impediments to learning outcomes, and supportive and positive learning experiences. Students underwent a significant educational transition and adjustment upon entering Term 3. Participants reported specific challenges associated with the shift from a CBC in Terms 1 and 2 to a CBL model initiated in Term 3. This shift was perceived as abrupt and insufficiently supported, with limited orientation

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or preparatory guidance provided. The adjustment to CBL was described as difficult due to conceptual overlaps and content gaps within the new framework. As a result, the participant felt inadequately equipped with the foundational knowledge required to engage with the material.

"I don't feel I have enough knowledge to fully grasp the material being taught. The sole challenges, I would assert, revolved around the transition during term 3. This shift occurred as we transitioned from a more traditional style to a concept-based approach to learning. [There was] a lack of substantial orientation or enough preparation for this transition. Adjusting to concept-based learning presented challenges for me. The difficulty arose from the presence of both overlapping and gapped concepts, making the transition a bit challenging" (P4).

Students in concept-based learning programs reported facing challenges with the program and curriculum structure. They described that some courses felt overly intensive, with a workload that was perceived as overwhelming by both themselves and their peers. The compressed delivery of extensive content limited opportunities for clinical application and hindered the development of deep learning. They recommended that greater curricular flexibility, such as an optional extended program, could enhance knowledge retention and better support students in achieving the depth of understanding required for nursing practice.

"I found some of the courses to be a bit heavy, and at times, it felt overwhelming due to the amount of work. I gathered from feedback received from fellow students that many shared the sentiment that it was excessively heavy. The volume of material covered seemed challenging to apply in a clinical setting or to have the opportunity to do so. Because an excessive amount of information is being conveyed within a limited timeframe, grasping entirely new knowledge takes considerable time. I'm uncertain if they [decision-makers at the School of Nursing (SON)] could enhance the flexibility of the curriculum. Perhaps a tailored approach could be considered. If there were mechanisms to allow those willing to invest an extra year, though it might necessitate the development of entirely new programs, individuals like me would have gladly committed to an additional year for a more thorough learning experience. Thus, ensuring that each piece of information is well-understood and retained is vital. The current time constraints impede the depth of learning needed for such impactful professions" (P1).

Students also raised issues related to Impediments to Learning Outcomes. They indicated that academic challenges, particularly related to the volume of group work, are common across the cohort. While teamwork and collaboration are acknowledged as essential in nursing practice, the frequency and variability of group projects across courses, coupled with clinical placements, created logistical and workload difficulties. Students questioned the necessity of such an extensive group work component, noting that unequal participation and scheduling conflicts, as in one instance where they had to meet the professor alone on behalf of the group, negatively impacted their learning outcomes.

"I believe that facing academic challenges is inherent in curriculum-based learning, and it seems to be a common concern among my entire class. The issue, to a significant extent, revolves around the substantial amount of group work incorporated into the curriculum. While we acknowledge the importance of collaboration in nursing, every course involves one to three group projects, often with varying team compositions. Clinical commitments have added an extra layer of complexity in the previous and current semesters. It appears that the prevalence of these challenges is pervasive throughout the program. While I recognize the collaborative spirit behind group work, I question the necessity of its excessive volume. In one instance, our group faced difficulties finding a suitable time to meet with the professor, so I represented the entire group in a solo meeting. This is one of the examples of how the CBC influences our learning outcomes. This situation exemplifies an unfair distribution of group work responsibilities, which negatively impacts their learning outcomes" (P2).

However, although the students reported the above challenges and concerns, they indicated that their learning experience remains supportive and positive. The students described their overall experience as positive, emphasizing the supportive nature of the instructional staff. They indicated that the instructors were responsive to student needs, demonstrating flexibility by adjusting pacing and offering additional sessions to reinforce learning. The learning environment was perceived as accommodating, with faculty acknowledging the difficulty of mastering extensive content within limited timeframes and making efforts to mitigate challenges.

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"Overall, I've found the experience enjoyable. All the instructors have been incredibly supportive, recognizing the limited time available to cover a substantial amount of material. They are willing to make adjustments if necessary, and that's essentially all they can do. The environment is comfortable, allowing students to request a slower pace, and the faculty is more than willing to provide extra classes and study sessions before exams. It's evident that they [the instructors] understand the challenge of assimilating a vast amount of information within a brief timeframe" (P5).

Discussion

The study established new knowledge on the aspirations that nursing students hold towards a CBC. The perceptions reflected that the students' enacted experiences had both strengths and drawbacks in emerging forms. The finding indicated that nursing students experienced a chaotic educational transition and adjustment as they reported significant challenges associated with the shift from a CBC to a CBL model. Research suggests that the implementation of the CBC framework is often a source of significant concern for students. Chief among these issues is a perceived deficiency in orientation and preparation that leads to substantial adjustment challenges. In light of this, our findings reinforce the notion that fundamental shifts in educational paradigms are a major trigger for student stress and anxiety (Cooper et al., 2018; Ruiz-Alonso-Bartol et al., 2022). However, good transition strategies must be implemented for these challenges to be adequately met. Such detailed orientation programs can be valuable for nursing students. For instance, a brief orientation workshop or online module could explain core CBC principles, compare CBC and content-based curricula, and help students understand the curriculum change. They can help form their perception of the necessity of adhering to the principles of the CBC when working on their writing assignments. Such programs should describe the difference between CBC and other methods so that learners can understand the programs.

Ongoing support is important for maintaining the processes of adaptation and success in implementing CBC (Ige et al., 2024). This includes getting in touch with academic advisors or a mentor who can assist students through the initial steps (Saiyad & Mahajan, 2023). Additionally, peer support networks help students feel less isolated by allowing them to share notes and collaborate on solutions (Pointon-Haas et al., 2023). To ease the transition between educational frameworks, institutions should offer bridge programs and orientation courses that help students adjust to new modes of learning (Bojović et al., 2020). Such programs could include activities related to identifying professional competencies and the CBC framework, such as time management assessments, segmentation, and goal setting. Furthermore, prioritizing faculty development ensures that educators are better prepared to support students throughout transitions. Workshops can equip nursing educators with CBC approaches and knowledge to improve CBC learning (Sistermans, 2020). Educators should be encouraged to adopt a learner-oriented approach by providing constructive feedback and employing effective teaching techniques (Fuentes-Cimma et al., 2024). These methods must remain adaptable to the diverse talents, learning abilities, and individual paces of each student.

Our study found that nursing students in CBL programs faced challenges with the program and curriculum structure. They needed help with the CBC program, which may have included areas such as intensity, lesson pace, and the volume of work assigned. This finding is consistent with previous research, which indicates that structural deficiencies can lead students to feel overwhelmed and inadequately prepared for clinical practice (Giddens & Morton, 2010; Gooder & Cantwell, 2017; Kumm & Laverentz, 2017; Ullah et al., 2024). Although CBC emphasizes core ideas and competencies, this breadth may come at the expense of comprehensive mastery in specialized clinical subjects (Yasin et al., 2025). They expressed that some concepts are being covered repeatedly in CBC, though other study areas are not. One possibility could be the model of curriculum flexibility, as several participants have expressed the need for variable pacing. Institutions could address this by providing an extra term for learners needing more time to thoroughly grasp the content. This approach strengthens an understanding and results in more durable learning outcomes. The flexibility of the curriculum can be attributed to the fact that students learn at different paces and in various ways (Valtonen et al., 2021). The suggestions could involve designing a flexible curriculum to accommodate these differences, such as creating modular courses that allow students to complete the course in discrete segments. Furthermore, the curriculum's composition may be periodically reviewed and modified based on user feedback. The institution should ensure that faculty are prepared with the knowledge to recognize students who may be experiencing issues and provide them with the necessary support, such as tutoring or adjustments to the timetable (Farakish et al., 2022).

In this study, students raised an issue related to impediments to learning outcomes. The students highlighted that academic challenges are common across the cohort, such as the volume of group work assignments. Consistent with previous research, students value collaboration for building nursing skills but feel the workload in group projects is often unfairly distributed (Chang & Brickman, 2018; Theobald et al., 2017; McKay & Sridharan, 2024). Other researchers support this view, noting that while group work enhances learning through synergy, it presents significant management challenges

for nursing educators if not properly structured. To overcome these challenges, faculty members should incorporate methods for more effective distribution of individual and group projects (Forsell et al., 2021; Nakamura et al., 2024). Additionally, the approach helps distribute the workload fairly and contributes to students' improvement in both collaborative and individual learning skills. Fair task allocation within groups must be supported by clear governing rules to mitigate unequal contributions and 'social loafing.' These guidelines warrant that all members contribute equitably toward the group's collective goals. To enhance equitable group work, institutions can schedule regular check-ins or vision sessions, along with formal and structured peer assessments. The crucial difference here is that nursing educators may also introduce more individual assignments alongside group projects to effectively balance the grading system. A study noted that individual assignments enable students to demonstrate their understanding and ability to perform tasks independently as part of self-regulated learning (Granberg et al., 2021). This approach allows faculty to accurately assess each student's competency level. Moreover, this dual strategy ensures that students reap the benefits of collaborative learning while maintaining a fair and accurate assessment process (Chang & Brickman, 2018; LaBeouf et al., 2016). Additionally, there is a need for consistent faculty development programs that emphasize techniques for creating effective group learning experiences. Educators may be taught methods for implementing and ensuring active participation, understanding, and facilitating group processes, as well as building upon the talents within a group (Burgess et al., 2020). Thus, it is possible to maximize the efficiency of collaboration and mitigate its potential disadvantages by enhancing the competence of nursing educators in organizing collaboration.

Although students faced significant challenges during the transition to a CBC model, their feedback was not entirely negative. They emphasized positive aspects of their education such as the approachability of the faculty and a supportive learning environment. Also, the availability of instructors to explain what is going on more quickly than usual and their willingness to provide extra resources are highly appreciated. This aspect aligns well with the literature, which suggests that faculty and student support messages can promote learning by enhancing faculty-student interactions (Guzzardo et al., 2020; Rusticus, 2023). Another factor involves faculty members and educators, as they have obligations towards their students and should facilitate learning. Constructive feedback remains indispensable in improving a positive learning culture such as effective tutor-student interactions, meaningful guidance, and the provision of helpful study aids (Rusticus, 2023). Some factors that influence students include when faculty members are available to meet their individual needs and have the willingness to do so. Furthermore, faculty members should receive communication and effective skills training to better and address students' sentiments (Navarro-Mateu et al., 2020). In that case, concerned listening and effective communication can contribute to developing a positive relationship between the faculty and students (Estrela et al., 2024). Such openness facilitates a two-way feedback loop that allows students to provide input that faculty can use to modify teaching strategies and enhance course content. Another essential factor is maintaining an open culture within the framework of the learning organization (Malik et al., 2021). When students are empowered to voice their concerns, it enhances the potential for continuous improvement within the curriculum and the broader educational system (Twining et al., 2020). Strategic feedback channels allow institutions to identify necessary curricular adjustments such as evaluation forms.

The findings of the study have several implications for lending a positive voice to nursing education practice. Firstly, there is a strong need for proper preparation and sufficient support for implementing new curricula. Consequently, nursing schools should implement thorough orientation activities and supportive frameworks that empower students to cope with academic and clinical challenges. Moreover, curriculum structures should accommodate students' diverse learning needs and learning speeds. For instance, offering optional extra classes for students who require additional time to understand the content. Secondly, as with group work, the practice is also vital but must be well-regulated to limit the overwhelming pressure on students. By balancing individual and collaborative assignments through structured guidelines, institutions can mitigate learner anxiety and improve academic performance. Despite the merits of these research findings, the study faced several limitations such as the researchers' subjectivity. The researchers' deep engagement with the participants' experiences may have inadvertently introduced personal biases. Additionally, the lack of participant diversity presents a constraint; all participants identified as White Canadians, with four females and one male. This homogeneity limits the transferability of the findings to more diverse populations that share similar experiences. Furthermore, there was noticeable hesitation among students to participate in the study, possibly due to the researchers' affiliation with the same nursing school. This dynamic may have created concerns about confidentiality or perceived power imbalances that affect students' willingness to engage and share experiences.

Considering the findings of the study, suggestions for further research and its practical application have been identified. Future research needs to determine the outcomes on students' performance and ability to provide care in hospital or community settings. Empirical studies comparing conventional content-based curricula with CBC could help

determine which approach is more effective in developing nursing competencies. In practice, it may be necessary for nursing schools to focus on improving support during transition. This includes developing elaborate orientation programs and providing constant assistance for students' adaptation. Institutions must define clear criteria for flexible learning to ensure programs align with student needs and educational goals. Another critical aspect of differentiation involves balancing the structure of assignments, particularly concerning collaborative group work. Similarly, faculty development warrants significant attention and financial investment to ensure institutional success. Consistent faculty training, both pre-service and in-service, is essential for maintaining equity in student support during group projects. A standardized strategy solidifies the foundation of student competency, ensuring all learners meet global benchmarks.

Conclusion

This paper examined the contradiction in nursing students' learning under a CBC. Many potential challenges were encountered, including transition difficulties, structural issues, and difficulties with learning outcomes. However, students also shared their positive and supportive experiences. Hence, these results highlight the importance of careful execution and ongoing examination of CBC to identify areas for improvement. Addressing these challenges and capitalizing on the highlighted strengths will advance the success of nursing education programs. Doing so effectively prepares students to meet the evolving demands of both populations and healthcare organizations. The continually changing practice environment for nurses raises critical questions regarding the future of nursing education. Consequently, ongoing research and continuous curriculum development are necessary to ensure that educational refinements directly benefit patient care.

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AI statements

The final text reflects the authors' review and approval, with no part of the core research or analysis generated by AI.

Author's declaration

All authors contributed significantly to the research process, manuscript writing, and publication stages.

Availability of data and materials

The authors confirm that the data supporting the findings of this study are available upon reasonable request.

Competing interests

None.

Ethical clearance

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Publishers and journal's note

This qualitative research is noteworthy for its evaluation of the CBC curriculum in Canada. The results are expected to offer new perspectives for nursing education in Asia and other continents. The Editor-in-Chief appreciates this study, noting its potential to contribute meaningfully to the advancement of nursing curriculum development on a global scale.

References

Aldiabat, K. M., Musa, M., Shubair, M., Subrata, S. A., Kennedy, K., & Kimberley, L. (2025). Against the current: Lived experiences of nursing educators with concept-based curriculum in Canada. *American Journal of Qualitative Research, 9*(1), 180-195. https://doi.org/10.29333/ajqr/16033

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Al-Omari, E., Dorri, R., Blanco, M., & Al-Hassan, M. (2024). Innovative curriculum development: Embracing the concept-based approach in nursing education. *Teaching and Learning in Nursing, 19*(4), 324-333. https://doi.org/10.1016/j.teln.2024.04.018

Benner, P. (2012). Educating nurses: A call for radical transformation-how far have we come?. *The Journal of Nursing Education, 51*(4), 183–184. https://doi.org/10.3928/01484834-20120402-01

Bojović, Ž., Bojović, P. D., Vujošević, D., & Šuh, J. (2020). Education in times of crisis: Rapid transition to distance learning. *Computer Applications in Engineering Education, 28*(6), 1467–1489. https://doi.org/10.1002/cae.22318

Braun, V., & Clarke, V. (2024). Supporting best practice in reflexive thematic analysis reporting in palliative medicine: A review of published research and introduction to the Reflexive Thematic Analysis Reporting Guidelines (RTARG). *Palliative Medicine, 38*(6), 608–616. https://doi.org/10.1177/02692163241234800

Brussow, J. A., Roberts, K., Scaruto, M., Sommer, S., & Mills, C. (2019). Concept-based curricula: A national study of critical concepts. *Nurse Educator, 44*(1), 15–19. https://doi.org/10.1097/NNE.0000000000000515

Buckner, M., Camp, S., & Murabito, S. (2024). Outcomes of concept-based curricula: An integrative review. *The Journal of Nursing Education, 63*(11), 725–729. https://doi.org/10.3928/01484834-20240711-02

Burgess, A., van Diggele, C., Roberts, C., & Mellis, C. (2020). Team-based learning: Design, facilitation and participation. *BMC Medical Education, 20*(S2). https://doi.org/10.1186/s12909-020-02287-y

Chang, Y., & Brickman, P. (2018). When group work doesn't work: Insights from students. *CBE Life Sciences Education, 17*(3), ar42. https://doi.org/10.1187/cbe.17-09-0199

Choperena, A., Rosa-Salas, V., Esandi-Larramendi, N., Diez-Del-Corral, M. P., & Jones, D. (2025). Nursing educational framework: A new nurse-driven, conceptually guided approach. *International Journal of Nursing Knowledge, 36*(1), 29–38. https://doi.org/10.1111/2047-3095.12459

Cooper, K. M., Downing, V. R., & Brownell, S. E. (2018). The influence of active learning practices on student anxiety in large-enrollment college science classrooms. *International Journal of STEM Education, 5*(1), 23. https://doi.org/10.1186/s40594-018-0123-6

Cutler, A. N., Halcomb, E., & Sim, J. (2021). Using naturalistic inquiry to inform qualitative description. *Nurse Researcher, 29*(3), 29–33. https://doi.org/10.7748/nr.2021.e1788

Denieffe, S. (2020). Commentary: Purposive sampling: complex or simple? Research case examples. *Journal of Research in Nursing, 25*(8), 662–663. https://doi.org/10.1177/1744987120928156

Englander, M., & Morley, J. (2023). Phenomenological psychology and qualitative research. *Phenomenology and The Cognitive Sciences, 22*(1), 25–53. https://doi.org/10.1007/s11097-021-09781-8

Estrela, C., Oshita, M. G. B., Perazzo, M. F., Alencar, A. H. G., Silva, J. A., Estrela, L. R., Cintra, L. T., & Estrela, C. R. (2024). Quality of communication between professors and university students in the process of learning. *Brazilian Dental Journal, 35,* e246081. https://doi.org/10.1590/0103-6440202406081

Farakish, N., Cherches, T., & Zou, S. (2022). Faculty success initiative: An innovative approach to professional faculty onboarding and development. *Journal of Formative Design in Learning, 6*(2), 113–126. https://doi.org/10.1007/s41686-022-00069-x

Feller, F. (2018). Transforming nursing education: A call for a conceptual approach. *Nursing Education Perspectives, 39*(2), 105–106. https://doi.org/10.1097/01.NEP.0000000000000187

Fletcher, K. A., Hicks, V. L., Johnson, R. H., Laverentz, D. M., Phillips, C. J., Pierce, L. N. B., Wilhoite, D. L., & Gay, J. E. (2019). A concept analysis of conceptual learning: A guide for educators. *Journal of Nursing Education, 58*(1), 7–15. https://doi.org/10.3928/01484834-20190103-03

Forsell, J., Forslund Frykedal, K., & Chiriac, E. H. (2021). Teachers' perceived challenges in group work assessment. *Cogent Education, 8*(1). https://doi.org/10.1080/2331186X.2021.1886474

Fuentes-Cimma, J., Sluijsmans, D., Riquelme, A., Villagran, I., Isbej, L., Olivares-Labbe, M. T., & Heeneman, S. (2024). Designing feedback processes in the workplace-based learning of undergraduate health professions education: A scoping review. *BMC Medical Education, 24*(1), 440. https://doi.org/10.1186/s12909-024-05439-6

Giddens, J. F., & Brady, D. P. (2007). Rescuing nursing education from content saturation: The case for a concept-based curriculum. *The Journal of Nursing Education, 46*(2), 65–69. https://doi.org/10.3928/01484834-20070201-05

Giddens, J. F., & Morton, N. (2010). Report card: An evaluation of a concept-based curriculum. *Nursing Education Perspectives, 31*(6), 372–377. https://pubmed.ncbi.nlm.nih.gov/21280444/

Giorgi, A. (2020). *Psychology as a human science: A phenomenologically based approach*. University Professors Press.

Gooder, V., & Cantwell, S. (2017). Student experiences with a newly developed concept-based curriculum. *Teaching and Learning in Nursing, 12*(2), 142–147. https://doi.org/10.1016/j.teln.2016.11.002

Government of Ontario. (2025). *Ontario Continues to Expand Nursing Workforce*. Ontario.ca. https://news.ontario.ca/en/release/1006000/ontario-continues-to-expand-nursing-workforce

Granberg, C., Palm, T., & Palmberg, B. (2021). A case study of a formative assessment practice and the effects on students' self-regulated learning. *Studies in Educational Evaluation, 68*(1), 100955. https://doi.org/10.1016/j.stueduc.2020.100955

Guzzardo, M. T., Khosla, N., Adams, A. L., Bussmann, J. D., Engelman, A., Ingraham, N., Gamba, R., Jones-Bey, A., Moore, M. D., Toosi, N. R., & Taylor, S. (2020). "The ones that care make all the difference": Perspectives on student-faculty relationships. *Innovative Higher Education, 46*(1). https://doi.org/10.1007/s10755-020-09522-w

Harrison, C. V. (2020). Concept-based curriculum: Design and implementation strategies. *International Journal of Nursing Education Scholarship, 17*(1). https://doi.org/10.1515/ijnes-2019-0066

Ige, W. B., Ngcobo, W. B., & Afolabi, O. (2024). Implementation of competency-based education for quality midwifery programmes in Africa: A scoping review. *BMC Nursing, 23*(1), 685. https://doi.org/10.1186/s12912-024-02333-w

Iwasiw, C., Goldenberg, D., & Andrusyszyn, M. A. (2020). *Curriculum development in nursing education* (4th ed.). Jones & Bartlett Learning.

Kumm, S., & Laverentz, D. M. (2017). Concept-based curriculum evaluation: 5-year process. *Teaching and Learning in Nursing, 12*(4), 242–245. https://doi.org/10.1016/j.teln.2017.06.004

LaBeouf, J. P., Griffith, J. C., & Roberts, D. L. (2016). Faculty and student issues with group work: What is problematic with college group assignments and why?. *Journal of Education and Human Development, 5*(1). https://doi.org/10.15640/jehd.v5n1a2

Laverentz, D. M., Guilkey, D. K., & Johnson, R. G. H. (2024). Curricular mapping: Assessing exemplars in an integrated concept-based curriculum. *Nurse Educator, 49*(5), E250–E254. https://doi.org/10.1097/NNE.0000000000001622

Lincoln, Y. S., & Guba, E. G. (1985). *Naturalistic inquiry*. SAGE Publications.

Malik, R. F., Buljac-Samardžić, M., Amajjar, I., Hilders, C. G. J. M., & Scheele, F. (2021). Open organisational culture: What does it entail? Healthcare stakeholders reaching consensus by means of a Delphi technique. *BMJ Open, 11*(9), e045515. https://doi.org/10.1136/bmjopen-2020-045515

McKay, J., & Sridharan, B. (2024). Student perceptions of collaborative group work (CGW) in higher education. *Studies in Higher Education, 49*(2), 221–234. https://doi.org/10.1080/03075079.2023.2227677

Nakamura, A., Kasai, H., Asahina, M., Kamata, Y., Shikino, K., Shimizu, I., Onodera, M., Kimura, Y., Tajima, H., Yamauchi, K., & Ito, S. (2024). Impact of group work on the hidden curriculum that induces students' unprofessional behavior toward faculty. *BMC Medical Education, 24*(1), 770. https://doi.org/10.1186/s12909-024-05713-7

Navarro-Mateu, D., Franco-Ochoa, J., Valero-Moreno, S., & Prado-Gascó, V. (2020). Attitudes, sentiments, and concerns about inclusive education of teachers and teaching students in Spain. *Frontiers in Psychology, 11*. https://doi.org/10.3389/fpsyg.2020.00521

Nielsen, A., Lanciotti, K., Garner, A., & Brown, L. (2021). Concept-based learning for capstone clinical experiences in hospital and community settings. *Nurse Educator, 46*(6), 381–385. https://doi.org/10.1097/NNE.0000000000000964

Pointon-Haas, J., Waqar, L., Upsher, R., Foster, J., Byrom, N., & Oates, J. (2023). A systematic review of peer support interventions for student mental health and well-being in higher education. *BJPsych Open, 10*(1), e12. https://doi.org/10.1192/bjo.2023.603

Repsha, C.L., Quinn, B.L., & Peters, A.B., (2020). Implementing a concept-based nursing curriculum: A review of the literature. *Teaching and Learning in Nursing, 15*(1), 66–71. https://doi. org/10.1016/j.teln.2019.09.006

Romanowski, A., Allen, P., & Martin, A. (2021). Educational revolution: Integrating concept-based curriculum and active learning for mental health nursing students. *Journal of the American Psychiatric Nurses Association, 27*(1), 83–87. https://doi.org/10.1177/1078390319890031

Ruiz-Alonso-Bartol, A., Querrien, D., Dykstra, S., Fernández-Mira, P., & Sánchez-Gutiérrez, C. (2022). Transitioning to emergency online teaching: The experience of Spanish language learners in a US university. *System, 104,* 102684. https://doi.org/10.1016/j.system.2021.102684

Rusticus, S. A., Pashootan, T., & Mah, A. (2023). What are the key elements of a positive learning environment? Perspectives from students and faculty. *Learning Environments Research, 26*(1), 161–175. https://doi.org/10.1007/s10984-022-09410-4

Saiyad, S., & Mahajan, R. (2023). Revisiting academic advising: Potential role and implications in undergraduate medical training in India. *International Journal of Applied & Basic Medical Research, 13*(4), 193–197. https://doi.org/10.4103/ijabmr.ijabmr_476_23

Sistermans, I. J. (2020). Integrating competency-based education with a case-based or problem-based learning approach in online health sciences. *Asia Pacific Education Review, 21*(4), 683–696. https://doi.org/10.1007/s12564-020-09658-6

Theobald, E. J., Eddy, S. L., Grunspan, D. Z., Wiggins, B. L., & Crowe, A. J. (2017). Student perception of group dynamics predicts individual performance: Comfort and equity matter. *PloS One, 12*(7), e0181336. https://doi.org/10.1371/journal.pone.0181336

Tweedie, J., Pelly, F., Wright, H., & Palermo, C. (2025). Exploring the adoption of concept-based curricula: Insights from educators and implications for change. *Advances in Health Sciences Education: Theory and Practice, 30*(1), 223–237. https://doi.org/10.1007/s10459-024-10346-y

Twining, P., Butler, D., Fisser, P., Leahy, M., Shelton, C., Forget-Dubois, N., & Lacasse, M. (2021). Developing a quality curriculum in a technological era. *Educational Technology Research and Development: ETR & D, 69*(4), 2285–2308. https://doi.org/10.1007/s11423-020-09857-3

Ullah, H., Huma, S., Yasin, G., Ashraf, M., Tahir-Ud-Din, Q., Shabana, H., & Sarfraz, J. (2024). Curriculum and program evaluation in medical education: A short systematic literature review. *Annals of Medicine and Surgery (2012), 86*(10), 5988–5994. https://doi.org/10.1097/MS9.0000000000002518

Valtonen, T., Leppänen, U., Hyypiä, M., Kokko, A., Manninen, J., Vartiainen, H., ... & Hirsto, L. (2021). Learning environments preferred by university students: A shift toward informal and flexible learning environments. *Learning Environments Research, 24*(3), 371-388. https://doi.org/10.1007/s10984-020-09339-6

Yasin, Y. M., Al-Hamad, A., Safi, I., & Salman, A. (2025). Nurse educators' experience in implementing concept-based curriculum: A phenomenology study. *International Journal of Nursing Education Scholarship, 22*(1), 10.1515/ijnes-2024-0074. https://doi.org/10.1515/ijnes-2024-0074

Authors' insight

Key points

- CBC encourage the use of active and student-focused teaching strategies during learning process in the course of nursing education.
- The transition to CBC creates a paradox where students face less memorization but higher stress due to the increased need for complex information synthesis.
- The study explores how CBC aligns or conflicts with the expectations of Canadian clinical preceptors and the specific requirements of the NCLEX-RN.

Emerging nursing avenues

- How do Canadian nursing students reconcile the abstract nature of conceptual learning with the high-stakes and hands-on reality of the Canadian acute care environment?
- Does the shift to self-directed learning leave students feeling both empowered by their independence and abandoned by the loss of traditional support?
- Is the CBC successful in improving the level of critical thinking required for students to outperform in clinical nursing settings?

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