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A Comparative Study to Assess the Perception and Acceptance Level Regarding Traditional Lecture Method and Simulation Based Learning Among Nursing Students at SGT University Gurugram, Haryana

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ABSTRACT

Introduction: Teaching in nursing is based on learning theories and aims to enhance knowledge and skills. Traditional lectures are teacher-centered and focus on theoretical delivery with limited student participation, whereas simulation-based learning is student-centered and allows practice of clinical skills in realistic and safe environments. With technological advances, simulation has become an effective tool to bridge the gap between theory and practice. A self-structured questionnaire was used to assess nursing students' perceptions and acceptance of traditional lectures versus simulation-based learning.

Results: Most participants (77.4%) were aged 18–20 years, and 76.3% were B.Sc. Nursing 1st-year students. The majority were female (67%) and Hindu (93.2%). While 258 students initially chose traditional lectures, 92.5% ultimately preferred simulation-based learning.

Conclusion: Simulation-based learning was more accepted than traditional lectures among nursing students. A significant association was found between perception, acceptance, and demographic variables.

Introduction

The science and art of teaching, is grounded in learning theories and strategies aimed at enhancing knowledge, skills, and personal growth in educational settings[1,2]. In nursing education, the traditional lecture method refers to a teacher-centered approach in which theoretical information is delivered through classroom lectures, with students primarily listening and taking notes. Although this method is widely used and familiar, it may provide limited opportunities for active participation and practical skill development. In contrast, simulation-based learning involves student-centered, experiential activities in which learners practice clinical skills in realistic patient care scenarios using mannequins, task trainers, or virtual simulators. This approach helps bridge the gap between theory and

practice by allowing students to apply knowledge in a safe environment.[3]. Simulation allows students to practice procedures in a controlled, safe environment before working with real patients[4]. With advances in internet technology, online and simulation-based learning are gaining prominence as effective tools in nursing education[5,6]. This study explores nursing students' perceptions and acceptance of traditional lectures versus simulation-based learning at SGT University.

Need for Study

Separation between clinical and classroom learning hinders the integration of knowledge, skills, and attitudes needed in modern nursing practice[7]. Simulation can help bridge this gap by offering realistic, hands-on learning in environments where clinical exposure may be limited[8,9]. The study aims to understand nursing students' views on different teaching methods, guiding future curriculum development that emphasizes effective pedagogy[10,11]. The study is conducted for assessing the acceptance and the perception level of the nursing students who are going to be future nurses and working in the hospital.

Objectives of the Study

- To assess the perception and acceptance levels of nursing students regarding traditional lecture and simulation-based learning.
- To compare the preferences between traditional lecture and simulation-based learning.
- To identify associations between demographic variables and preferences for the two teaching methods.

METHODS AND MATERIALS

Research Approach: A quantitative research approach

Research Design: A descriptive study design

Research Settings: SGT University, Gurugram Haryana

Population : Students of SGT University

Sampling Technique : Convenient sampling technique.

Sample And Sample Size : 279 students

Tools development and selection: A verified self-developed questionnaire

Month & Duration of Data Collection: January 2025

Data Analysis: Descriptive and Inferential statistics (Chi-Square)

INCLUSION CRITERIA

- Nursing students who are willing and able to participate while the data is being collected.

EXCLUSION CRITERIA

- Nursing students who are not willing to participate.

VALIDITY

Validated from the 5 subject experts.

RELIABILITY

On the students a questionnaire tested the tools dependability. The split half approach is used to determine the tools' reliability. Reliability was measured at 0.88. As a result, the result was deemed to be trustworthy.

CONSENT OF PARTICIPANTS

Before collecting any data, the individual was given a detailed explanation of the study's objective and consent was taken. They were not under any compulsion. Following an in-depth explanation of the study, all the samples were willingly accepted.

DATA ANALYSIS AND INTERPRETATION

This section describes the demographic characteristics of the sample under study. The data obtained describes the characteristics pertaining.

SECTION I : DEMOGRAPHIC VARIABLES

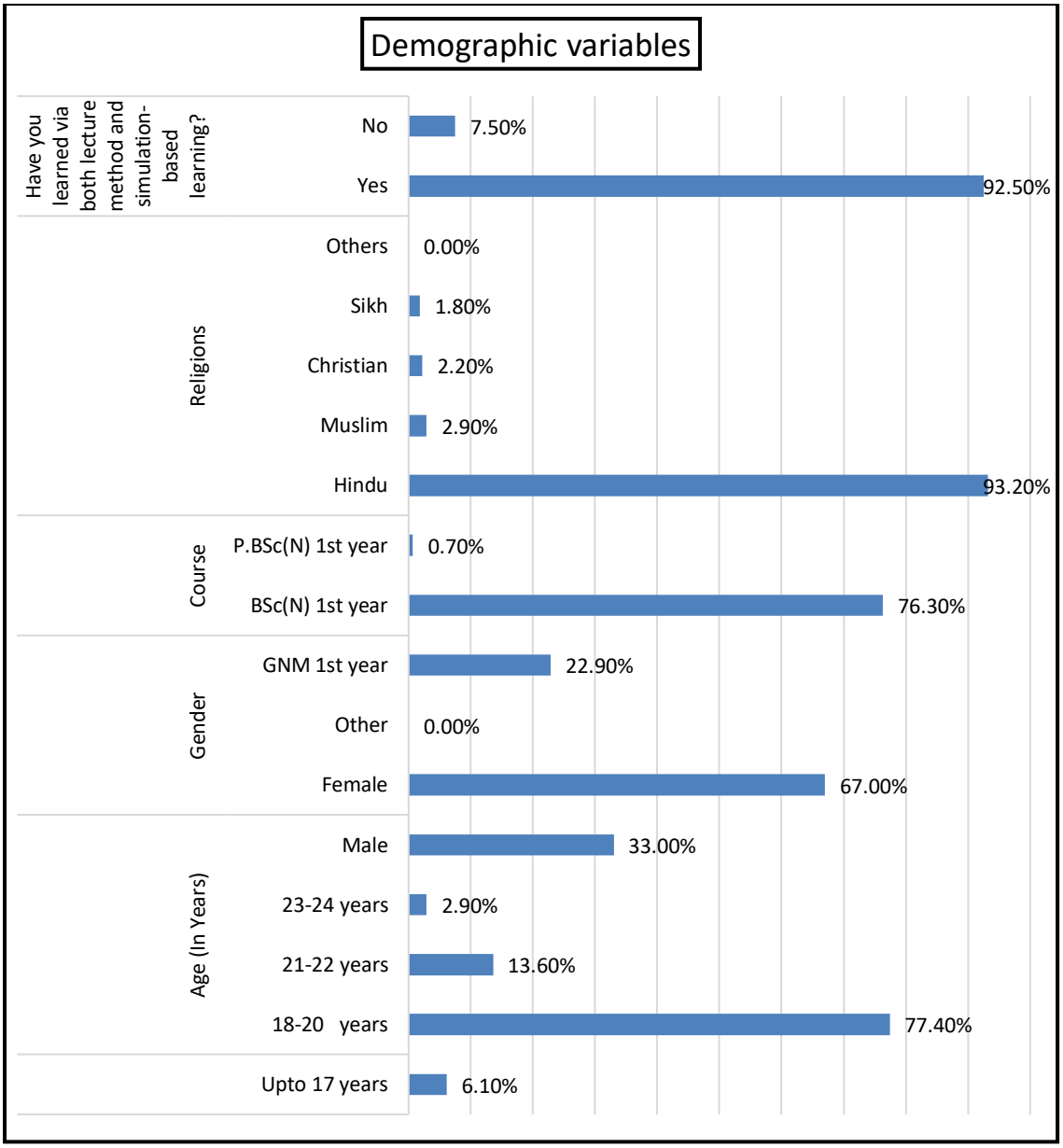

Figure 1: Diagram showing demographic variables.

The majority of students are between 18-20 years (77.4%, 216 students), with a smaller percentage in the 21-22 years (13.6%, 38 students) and 23-24 years (2.9%, 8 students) categories. Only 6.1% are under 17 years (17 students). 67% of the students are female (187 students), and 33% are male (92 students). No students identified as other genders. Most students are enrolled in the BSc.(N) 1st year course (76.3%, 213 students), followed by GNM 1st year (22.9%, 64 students). Only 0.7% are in the P.BSc (N) 1st year course (2 students). The vast majority of students are Hindu (93.2%, 260 students), followed by a small percentage of Muslims (2.9%, 8 students), Christians (2.2%, 6 students), and Sikhs (1.8%, 5 students). A significant 92.5% of students have learned through both lecture and simulation-based learning (258 students), while only 7.5% have not used both methods (21 students).

SECTION II: COMPARATIVE PREFERENCES PROFILE OF THE SUBJECTS

Variables	Item	Percentage	Frequency
Which method do you prefer for understandingtheoretical concepts?	Traditional Method Lecture	31.2	87
	Simulation-Based Learning	68.8	192
Which method do you find more effective for practical training?	Traditional Method Lecture	23.7	66
	Simulation-Based Learning	76.3	213
Which teaching method engages you better as a student?	Traditional Method Lecture	26.2	73
	Simulation-Based Learning	73.8	206
Which method wouldyou recommend more frequently in thecurriculum?	Traditional Method Lecture	23.7	66
	Simulation-Based Learning	76.3	213
Which method has a better impact on your academic performance?	Traditional Lecture Method	28.3	79
	Simulation-Based Learning	71.7	200

Table 1: Table showing Comparative Preferences Profile Of The Subjects

Majority of the students 68.8% prefer simulation-based learning (192 students) over traditional lecture methods (31.2%, 87 students) for understanding theoretical concepts. 76.3% of students find simulation-based learning more effective for practical training (213 students), while 23.7% prefer traditional lecture methods (66 students). 73.8% of students feel more engaged with simulation-based learning (206 students), compared to 26.2% who prefer the traditional lecture method (73 students). 76.3% of students would

recommend simulation-based learning more frequently in the curriculum (213 students), with 23.7% recommending traditional lecture methods (66 students). 71.7% of students believe simulation-based learning has a better impact on their academic performance (200 students), while 28.3% feel the traditional lecture method has a stronger impact (79 students).

Table –2: Frequency & Percentage distribution of Traditional level of Acceptance

CRITERIA MEASURE OF TRADITIONAL ACCEPTANCE SCORE	
SCORE LEVEL(N= 279)	**TRADITIONAL f(%)**
LOW ACCEPTANCE.(5-12)	**25(9%)**
AVERAGE ACCEPTANCE.(13-19)	**161(57.7%)**
HIGH ACCEPTANCE.(20-25)	**93(33.3%)**

Maximum Score=25
Minimum Score=5

- **Low Acceptance (5-12):** 25 participants (9%) have low acceptance of traditional methods**.**
- **Average Acceptance (13-19):** 161 participants (57.7%) have average acceptance of traditional methods**.**
- **High Acceptance (20-25):** 93 participants (33.3%) have high acceptance of traditional methods**.**

Table –3: Frequency & Percentage distribution of Simulation level of Acceptance

CRITERIA MEASURE OF SIMULATION ACCEPTANCE SCORE	
SCORE LEVEL(N= 279)	**SIMULATION f(%)**
LOW ACCEPTANCE.(5-12)	**13(4.7%)**
AVERAGE ACCEPTANCE.(13-19)	**129(46.2%)**
HIGH ACCEPTANCE.(20-25)	**137(49.1%)**

Maximum Score=25 Minimum Score=5

- **Low Acceptance (5-12):** 13 participants (4.7%) have low acceptance of simulation methods.
- **Average Acceptance (13-19):** 129 participants (46.2%) have average acceptance of simulation methods.
- **High Acceptance (20-25):** 137 participants (49.1%) have high acceptance of simulation methods.

Table –4 : Frequency & Percentage distribution of Traditional level of Perception

CRITERIA MEASURE OF TRADITIONAL PERCEPTION SCORE	
SCORE LEVEL(N= 279)	TRADITIONAL f(%)
POOR PERCEPTION.(9-21)	12(4.3%)
AVERAGE PERCEPTION.(22-33)	150(53.8%)
GOOD PERCEPTION.(34-45)	117(41.9%)
Maximum Score=45 Minimum Score=9	

- **Poor Perception (9-21)**: 12 participants (4.3%) fall into the poor perception category for traditional methods.
- **Average Perception (22-33)**: 150 participants (53.8%) have an average perception of traditional methods.
- **Good Perception (34-45)**: 117 participants (41.9%) have a good perception of traditional methods.

Table –5: Frequency & Percentage distribution of Simulation level of Perception

CRITERIA MEASURE OF SIMULATION PERCEPTION SCORE	
SCORE LEVEL(N= 279)	SIMULATION f(%)
POOR PERCEPTION.(9-21)	11(3.9%)
AVERAGE PERCEPTION.(22-33)	114(40.9%)
GOOD PERCEPTION.(34-45)	154(55.2%)
Maximum Score=45 Minimum Score=9	

- **Poor Perception (9-21)**: 11 participants (3.9%) have a poor perception of simulation methods.
- **Average Perception (22-33)**: 114 participants (40.9%) have an average perception of simulation methods.
- **Good Perception (34-45)**: 154 participants (55.2%) have a good perception of simulation methods.

Table –6`: Comparison of frequency & percentage distribution of Traditional and Simulation level of Acceptance

CRITERIA MEASURE OF ACCEPTANCE SCORE		
SCORE LEVEL(N= 279)	**TRADITIONAL f(%)**	**SIMULATION f(%)**
LOW ACCEPTANCE.(5-12)	**25(9%)**	**13(4.7%)**
AVERAGE ACCEPTANCE.(13-19)	**161(57.7%)**	**129(46.2%)**

HIGH ACCEPTANCE.(20-25)	**93(33.3%)**	**137(49.1%)**

Maximum Score=25 Minimum Score=5

· **Low Acceptance (5-12**): 25 participants (9%) have low acceptance of traditional methods, while 13 participants (4.7%) have low acceptance of simulation methods.
· **Average Acceptance (13-19**): 161 participants (57.7%) have average acceptance of traditional methods, while 129 participants (46.2%) have average acceptance of simulation methods.
· **High Acceptance (20-25):** 93 participants (33.3%) have high acceptance of traditional methods, while 137 participants (49.1%) have high acceptance of simulation methods.

SECTION III: ASSOCIATION OF TRADITIONAL ACCEPTANCE SCORES & SIMULATION ACCEPTANCE SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.

Table 7 shows that The association between age and traditional acceptance scores is not significant (P=0.228). The acceptance levels (high, average, and low) are fairly distributed across different age groups, with no clear trend or impact on traditional acceptance. The association between gender and traditional acceptance scores is not significant (P=0.191). Both males and females show similar distribution across high, average, and low acceptance categories, with no significant differences. The association between course and traditional acceptance scores is not significant (P=0.951). The distribution of acceptance scores across GNM 1st year, BSc.(N) 1st year, and P.BSc (N) 1st year students is similar, with no significant impact of the course on acceptance levels. The association between religion and traditional acceptance scores is not significant (P=0.431). Hindu, Muslim, Christian, and Sikh groups show varying levels of acceptance, but the differences are not statistically significant. The association between learning method and traditional acceptance scores is significant (P=0.017). Students who have learned via both lecture and simulation-based learning show higher acceptance levels, with a significantly greater number of students in the high acceptance category compared to those who have not used both methods.

Table No.7 : Table Showing Association of Scores and Demographic Variables.

ASSOCIATION OF TRADITIONAL ACCEPTANCE SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.								
Variables	**Item**	**HIGH ACCEPTANCE**	**AVERAGE ACCEPTANCE**	**LOW ACCEPTANCE**	**Chi Test**	**P Value**	**df**	**Result**
Age (In Years)	**Upto 17 years**	**6**	**11**	**0**	**8.133**	**0.228**	**6**	**Not Significant**
	18-20 years	**66**	**126**	**24**				
	21-22 years	**17**	**20**	**1**				
	23-24 years	**4**	**4**	**0**				
Gender	**Male**	**26**	**60**	**6**	**3.313**	**0.191**	**2**	**Not Significant**
	Female	**67**	**101**	**19**				
	Other	**0**	**0**	**0**				
Course	**GNM 1st year**	**23**	**35**	**6**	**0.702**	**0.951**	**4**	**Not Significant**
	BSc.(N) 1st year	**69**	**125**	**19**				
	P.BSc (N) 1st year	**1**	**1**	**0**				
	Hindu	**84**	**152**	**24**				

Religions	**Muslim**	**3**	**4**	**1**	**5.932**	**0.431**	**6**	**Not Significant**
	Christian	**2**	**4**	**0**				
	Sikh	**4**	**1**	**0**				
	Others	**0**	**0**	**0**				
Have you learned via both lecture method and simulation based learning?	**Yes**	**90**	**148**	**20**	**8.129**	**0.017**	**2**	**Significant**
	No	**3**	**13**	**5**				

Table 8 shows that The association between age and simulation acceptance scores is not significant (P=0.770). The distribution of high, average, and low acceptance levels is similar across different age groups, with no notable trend or effect. The association between gender and simulation acceptance scores is not significant (P=0.562). Male and female students have similar distributions across the acceptance categories, showing no significant difference in acceptance based on gender. The association between course and simulation acceptance scores is not significant (P=0.465). GNM 1st year, BSc.(N) 1st year, and P.BSc (N) 1st year students have similar distributions in terms of high, average, and low acceptance levels, with no significant impact of course on simulation acceptance. The association between religion and simulation acceptance scores is not significant (P=0.762). Students from Hindu, Muslim, Christian, and Sikh backgrounds show varying levels of acceptance, but these differences are not statistically significant. The association between learning method and simulation acceptance scores is significant (P=0.029). Students who learned via both lecture and simulation-based learning have a higher level of acceptance, with a significantly greater number of students in the high acceptance category compared to those who did not use both methods.

Table No.8 : Table Showing Association of Scores and Demographic Variables.

ASSOCIATION OF SIMULATION ACCEPTANCE SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.								
Variables	**Item**	**HIGH ACCEPTANCE**	**AVERAGE ACCEPTANCE**	**LOW ACCEPTANCE**	**Chi Test**	**P Value**	**df**	**Result**
Age (In Years)	**Upto 17 years**	**9**	**7**	**1**	**3.303**	**0.77**	**6**	**Not Significant**
	18-20 years	**104**	**100**	**12**				
	21-22 years	**19**	**19**	**0**				
	23-24 years	**5**	**3**	**0**				
Gender	**Male**	**43**	**46**	**3**	**1.153**	**0.562**	**2**	**Not Significant**
	Female	**94**	**83**	**10**				
	Other	**0**	**0**	**0**				
Course	**GNM 1st year**	**27**	**34**	**3**	**3.588**	**0.465**	**4**	**Not Significant**
	BSc.(N) 1st year	**108**	**95**	**10**				
	P.BSc (N) 1st year	**2**	**0**	**0**				
	Hindu	**127**	**120**	**13**				**Not Significant**
	Muslim	**3**	**5**	**0**				
	Christian	**3**	**3**	**0**				

Religions	**Sikh**	**4**	**1**	**0**	**3.367**	**0.762**	**6**	
	Others	**0**	**0**	**0**				
Have you learned via both lecture method and simulation based learning?	**Yes**	**131**	**117**	**10**	**7.05**	**0.029**	**2**	**Significant**
	No	**6**	**12**	**3**				

Table No .9 : Table Showing Association of Scores and Demographic Variables.

ASSOCIATION OF TRADITIONAL PERCEPTION SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.								
Variables	**Item**	**GOOD PERCEPTION**	**AVERAGE PERCEPTION**	**POOR PERCEPTION**	**Chi Test**	**P Value**	**df**	**Result**
Age (In Years)	Upto 17 years	8	9	0	15.637	0.016	6	Significant
	18-20 years	81	124	11				
	21-22 years	20	17	1				
	23-24 years	8	0	0				
Gender	Male	39	47	6	1.763	0.414	2	Not Significant
	Female	78	103	6				
	Other	0	0	0				

Course	GNM 1st year	30	33	1	2.18	0.703	4	Not Significant
	BSc.(N) 1st year	86	116	11				
	P.BSc (N) 1st year	1	1	0				
Religions	Hindu	108	142	10	7.015	0.319	6	Not Significant
	Muslim	5	3	0				
	Christian	2	3	1				
	Sikh	2	2	1				
	Others	0	0	0				
Have you learned via both lecture method and simulation based learning?	Yes	114	134	10	7.705	0.021	2	Significant
	No	3	16	2				

Table 9 shows that The association between age and traditional perception scores is significant (P = 0.016). Younger students (upto 17 years) show a different pattern of perception scores compared to other age groups, with more students having good or average perception, while older age groups (18-20 years, 21-22 years) have varying levels of perception. This indicates age-related differences in traditional perception. The association between gender and traditional perception scores is not significant (P = 0.414). Both male and female students have similar distributions of good, average, and poor perception scores, with no significant difference between the genders. The association between course and traditional perception scores is not significant (P = 0.703). Students in different courses (GNM 1st year, BSc.(N) 1st year, P.BSc (N) 1st year) have similar distributions across the perception levels, showing no significant difference in perception scores based on the courses. The association between religion and traditional perception scores is not significant (P = 0.319). Hindu, Muslim, Christian, and Sikh students have similar perceptions, with no significant differences observed in their perception scores. The association between learning method (lecture method and simulation-based learning) and traditional perception scores is significant (P = 0.021). Students who learned via both lecture and simulation-based learning

have a higher percentage of good and average perceptions, indicating that the combination of both methods positively impacts traditional perception.

Table No.10: Table Showing Association of Scores and Demographic Variables.

ASSOCIATION OF SIMULATION PERCEPTION SCORES WITH SELECTED SOCIO-DEMOGRAPHIC VARIABLES.								
Variables	**Opts**	**GOOD PERCEPTION**	**AVERAGE PERCEPTION**	**POOR PERCEPTION**	**Chi Test**	**P Value**	**df**	**Result**
Age (In Years)	Upto 17 years	11	6	0	3.111	0.795	6	Not Significant
	18-20 years	117	89	10				
	21-22 years	20	17	1				
	23-24 years	6	2	0				
Gender	Male	53	35	4	0.468	0.791	2	Not Significant
	Female	101	79	7				
	Other	0	0	0				
Course	GNM 1st year	32	31	1	4.298	0.367	4	Not Significant
	BSc.(N) 1st year	120	83	10				
	P.BSc (N) 1st year	2	0	0				
	Hindu	144	106	10				
	Muslim	4	3	1				

Religions	Christian	2	4	0	4.576	0.599	6	Not Significant
	Sikh	4	1	0				
	Others	0	0	0				
Have you learned via both lecture method and simulation based learning?	Yes	148	101	9	7.172	0.028	2	Significant
	No	6	13	2				

Table 10 shows that The association between age and simulation perception scores is not significant (P = 0.795). The distribution of good, average, and poor perception scores is similar across all age groups, indicating that age does not have a significant impact on simulation perception. The association between gender and simulation perception scores is not significant (P = 0.791). Both male and female students show similar patterns in their perception scores, with no significant differences between the genders. The association between course and simulation perception scores is not significant (P = 0.367). Students across different courses (GNM 1st year, BSc.(N) 1st year, P.BSc (N) 1st year) have similar distributions of good, average, and poor perception, showing no significant difference based on the course. The association between religion and simulation perception scores is not significant (P = 0.599). Students from different religious backgrounds (Hindu, Muslim, Christian, Sikh) have similar levels of simulation perception, with no significant difference observed. The association between learning method (lecture method and simulation-based learning) and simulation perception scores is significant (P = 0.028). Students who learned via both lecture and simulation-based learning tend to have a higher percentage of good perception, indicating that this combined method positively influences simulation perception.

DISCUSSION AND CONCLUSION

The demographic findings of this study provide valuable insights into the context of nursing education at SGT University. The majority of participants (77.4%) were aged 18–20, consistent with previous studies in India and similar regions that identify this age group as typical for entry-level nursing programs [12]. Smaller age groups (13.6% aged 21–22, 2.9% aged 23–24) suggest variation due to academic gaps, early entry, or lateral admission routes—a trend also observed in earlier studies by Singh et al. [13], which reported age diversity linked to academic pathways.

In terms of gender, female students dominated the sample (67%), aligning with the historical trend of female predominance in nursing education [14]. This gender distribution reflects broader national patterns in nursing enrollment and professional practice in India and other countries [15].

A key finding in the present study is the overwhelmingly high exposure (92.5%) to both traditional lecture and simulation-based learning. This reflects a shift in nursing pedagogy toward blended approaches, combining didactic instruction with hands-on simulation to foster clinical reasoning and skill development. Comparable studies, such as that by Sharma et al.[16], have also noted the increasing use of simulation in Indian nursing institutions, reporting that over 85% of students felt simulation improved their clinical preparedness.

Furthermore, international studies by Jeffries[17] and Cant & Cooper[18] support the effectiveness of simulation in enhancing students' confidence, critical thinking, and decision-making abilities. These studies emphasized that students exposed to simulation were more engaged and retained clinical concepts more effectively than those taught through lectures alone. The findings of the current study corroborate this, with a strong student preference for simulation-based methods despite initial exposure to traditional lectures.

However, the 7.5% of students who had not yet experienced both methods may point to resource limitations or recent curriculum reforms not yet uniformly implemented. This disparity mirrors concerns raised by Basak et al.[19], who noted uneven simulation adoption in Indian nursing colleges due to faculty shortages, infrastructure gaps, and limited funding.
Overall, the integration of simulation into traditional pedagogy appears to be well-received and increasingly essential in modern nursing education. The present study reinforces existing literature by demonstrating a high acceptance of simulation-based learning and suggests that blended learning approaches may enhance student engagement, skill acquisition, and preparedness for clinical practice.

Conclusion:

The findings of this study emphasize that nursing students at SGT University show a strong acceptance and positive perception of simulation-based learning, particularly when combined with traditional lecture methods. While demographic factors such as age, gender, course, and religion did not have a significant influence on acceptance and perception levels, the exposure to both lecture and simulation significantly improved students' acceptance of both teaching methods. The majority of students perceive simulation as more engaging, effective for practical training, and beneficial to their academic performance.

Recommendations:

- Similar study can be carried out with a bigger sample size to generalize the results.
- A similar study might be conducted on the teacher's profession for teaching skills.
- Future research could explore long-term outcomes of blended learning on clinical performance and patient care to further justify the expansion of simulation in nursing education.

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