EVALUATING UNDERGRADUATE NURSING STUDENTS' SATISFACTION WITH CLINICAL EXPOSURE AND ACADEMIC LEARNING

Original Research

Maryam Mehboob[1]*, Arshia Nadeem[2], Sheharyar Ahmed[3]

[1]Nursing Officer, Allied Hospital Faisalabad, Faisalabad, Pakistan.
[2]Nursing Officer, Punjab Institute of Cardiology, Lahore, Pakistan.
[3]BSN Nursing Trainee, Pakistan Airforce Hospital, Islamabad, Pakistan.
Corresponding Author: Maryam Mehboob, Nursing Officer, Allied Hospital Faisalabad, Faisalabad, Pakistan, Maryammehboob8305@gmail.com

Conflict of Interest: None	Grant Support & Financial Support: None

ABSTRACT

Background: This study aimed to assess the satisfaction levels of undergraduate nursing students regarding their clinical and academic experiences at the University of Lahore. Satisfaction is a key indicator of education quality, influencing academic performance, motivation, and professional preparedness.

Methods: A cross-sectional descriptive design was employed, involving 73 fourth-year nursing students selected through convenience sampling. Data were collected using a semi-structured questionnaire consisting of 22 items on a Likert scale to measure satisfaction levels.

Results: The findings showed that 54.4% of students reported average academic satisfaction, while 32.9% expressed high satisfaction and 12.3% reported low satisfaction. In clinical experiences, 47.9% reported average satisfaction, 28.8% had high satisfaction, and 23.3% expressed low satisfaction. Key factors contributing to satisfaction included accessible faculty, clear guidance, and opportunities for hands-on learning. Dissatisfaction was linked to limited feedback, and insufficient opportunities for independent practice. Demographically, the majority of participants were aged 20–25 years, with 57.5% male and 74% having prior healthcare experience.

Conclusion: The study underscores the need for improved feedback systems, structured mentorship programs, and enhanced resource allocation to elevate satisfaction levels. These findings provide actionable insights to enhance nursing education quality and better prepare students for professional roles.

Keywords: Student Satisfaction, Nursing Education, Clinical Experiences, Academic Experiences, Mentorship, Feedback.

INSIGHTS-JOURNAL OF HEALTH AND REHABILITATION

INTRODUCTION

1.1 Background

Undergraduate nursing students' happiness with their program is a key metric for assessing the school's performance and efficacy. These days, program performance is gauged by student satisfaction, and student opinions are regarded as a crucial element in evaluating the quality of universities. Satisfaction is the psychological state that results from the confirmation or denial of expectations and reality. The lack of a standard definition for what makes a student happy is though perceived as a complex issue, it has been regarded as one of the best methods for growing high superior education(k, 2019)

Student satisfaction is a response to an organization's accomplishment. Student satisfaction actually gauges how pleased a customer is with the distinctive goods and services that the business provides. As a result, customer satisfaction is a crucial component in evaluating the caliber of services or goods provided during the process; it also provides a competitive edge. Raising the caliber of education and its practices requires increasing student satisfaction. It also encourages universities to compete internationally. Additionally, it is one of the finest outcomes needed for educational institutions to be accredited. Because of this, it is currently a major concern for school administrators.

As a result, evaluating students' happiness with their field of study is one of the main focuses of any college and a significant part of its operations in the area of organizational process and behavior. However, as students' interest in and satisfaction with their subject of study are among the most important aspects of their education and accomplishment, this topic should receive a lot of attention in educational planning.(Hakim, 2020.)

Through adequate practical experience, nursing education equips students with the skills necessary to provide the best care possible to patients with complex medical problems (Fisher & King, 2013). According to Dobrowolska et al. (2015), clinical practice is regarded as a crucial component of undergraduate nursing education. It equips nursing students with the knowledge and abilities necessary to deliver safe, effective care (Masters, 2015). Additionally, it helps nursing students acquire professional qualities like professionalism, psychomotor competency, and critical thinking.

The total educational knowledge of nursing students is greatly impacted by their level of satisfaction with their clinical and academic training, which affects not only their academic performance and motivation but also their preparedness for entering the workforce. High levels of discontent can result in poorer academic performance, higher attrition rates, and insufficient readiness for clinical practice, especially in programs that are so rigorous. Few studies have examined nursing students' happiness with the clinical and academic aspects of their education, despite the crucial role that satisfaction plays in nursing education. By evaluating nursing students' satisfaction levels in these areas and identifying potential areas for change to raise the standard of nursing education, this study seeks to close this gap.

2.1 LITERATURE REVIEW

A recent study evaluated nursing students' happiness at a specific university using a cross-sectional descriptive methodology. 328 nursing students were chosen by convenience sampling, and the researchers used the Undergraduates Nursing Students Academic Satisfaction Scale (UNSASS) to measure their levels of satisfaction. The findings showed that program design and delivery had the highest level of satisfaction (means=53.91±18.51), with an overall satisfaction mean score of 51.72 out of 100 (SD=14.63). On the other hand, support and resources had the lowest satisfaction scores (mean±SD=49.62±18.13). That study emphasizes how important it is to conduct regular, thorough assessments of student satisfaction in order to inform decision-making and raise the standard of educational facilities and resources. Additionally, it suggests that further research could explore the application of UNSASS among graduate students and examine non-accredited programs, widening its relevance and potential impact(Et Al., 2021).

The experiences and satisfaction of nursing students with the clinical learning environment were examined in a study carried out at the University of Nursing in Port Said, Egypt. This descriptive correlation study included 176 nursing students and used the Clinical Learning Environment and Supervision plus Nursing Teachers (CLES+T) scale as an assessment tool. As per the results, more than half

Volume 3 Issue 4: Nursing Student Satisfaction
Mehboob M et al.

INSIGHTS-JHR
INSIGHTS-JOURNAL OF HEALTH
AND REHABILITATION ■ ■ ■

(52.3%) of the students expressed satisfaction with their clinical placement, while the majority (49.35%) expressed satisfaction with the ward atmosphere. Female students indicated significantly higher levels of satisfaction than male pupils (p=0.000). This research highlights how important it is to examine and improve the clinical training environment since, in addition to strengthening theoretical knowledge, real-world experience affects curriculum appraisal. Furthermore, the research discovered robust associations between many facets of the clinical learning setting and general student contentment. These findings imply the need for more investigation into the ways in which the clinical setting influences nursing practice and the creation of plans to enhance the clinical experiences and professional readiness of nursing students(Mohamed and colleagues, 2022)

A recent study conducted at the University of Kuala Lumpur (RCMP), Ipoh, Perak, investigated factors influencing nursing students' clinical experience. Nurse students who completed at least two clinical placement experiences in public hospitals were the focus of this six-month cross-sectional descriptive study. Sociodemographic information and factors influencing clinical practice, such as opinions on the role of clinical preceptors, the hospital environment, and clinical experience, were included in a self-administered questionnaire used to collect data. Despite the educational opportunities offered by clinical internships, the results of the Kreskas-Wallis test and descriptive analysis showed that a lack of teachers, equipment, and nursing personnel negatively impacted students' experiences. The clinical setting, the assistance of clinical preceptors, and the students' semester and clinical experience all showed significant relationships (p < 0.05). Our findings highlight the importance of academic-clinical relationships, interdisciplinary engagement, and expanding students' clinical experiences in order to enhance nursing education (Baba et al., 2024).

The degree of satisfaction among undergraduate nursing students at a Namibian institution was recently ascertained by a cross-sectional descriptive survey employing a non-proportional quota sampling technique. 147 nursing students took part in the study, and the data was analyzed using SPSSv27. Mean scores and logistic regression were employed to investigate the relationships between the variables. According to the results, the majority of respondents (70.6%) expressed general satisfaction with the nursing program, while 29.4% expressed dissatisfaction. The average satisfaction score was 3.27 ± 0.91. In areas like in-class instruction (90.5%), simulation-based learning (76.9%), and staff conduct (62.6%), students expressed the highest levels of satisfaction. Dissatisfaction with access to school services, however, was noteworthy (52.4%), particularly among male students (54.1%) and students with parents who were retired (70.5%, p < 0.05). Furthermore, there was a greater incidence of pleasure among second- and third-year students (55.8%, 60.9%, p = 0.00). Limited access to emergency evacuation plans (62.5%) and subpar teaching facilities, particularly in the computer and clinical labs (55.8%), were among the areas that contributed to discontent. These results emphasize how critical it is that nursing schools fix the shortcomings that have been found, as doing so could increase student happiness and raise the standard of nursing education in Namibia (Tomas & Muronga, 2022).

3.MATERIALS AND METHODS

3.1 Study design

The cross-sectional survey was carried out between January 2025 to June 2025. A adapted semi-structured questionnaire was used in the investigation.

3.2 Study variable

3.2.1 Dependent variable

- Satisfaction level

3.2.2 Independent variable

- Clinical and academic performance

3.3 Study setting

The University of Lahore was the study setting for this research. The University of Lahore is a private university established in October 1999 and located in Lahore, Punjab, Pakistan.

3.4 Study population

Volume 3 Issue 4: Nursing Student Satisfaction
Mehboob M et al.

INSIGHTS-JHR
INSIGHTS-JOURNAL OF HEALTH
AND REHABILITATION ■ ■ ■

The undergraduates nursing student of university of Lahore, the students was selected from nursing department. I took about 90 students from 4th year BS Nursing student.

3.5 OPERATIONAL DEFINITION

3.5.1 Academic Performance

Perceived satisfaction with faculty and administrative support, fairness, availability, and teaching quality. Scoring:

Total Score: 10 items × 4 = 40.

Categories:

   i.   **High Satisfaction**: 31–40 (76%–100%)

   ii. **Moderate Satisfaction**: 21–30 (51%–75%)

   iii. **Low Satisfaction**: 10–20 (25%–50%)

3.5.2 Clinical Performance

Perceived satisfaction with the clinical learning environment, including instructor guidance, feedback, independent practice, and theory-practice integration.
Scoring:

Total Score: 12 items × 4 = 48.

Categories:

   i.   **High Satisfaction:** 37–48 (76%–100%)

   ii. **Moderate Satisfaction:** 25–36 (51%–75%)

   iii. **Low Satisfaction:** 12–24 (25%–50%)

3.6 Sampling technique

The Convenient sampling is used.

3.7 Sample Size:

$n = N/1 + N(e)^2$

N = population size

n = sample size?

e = Margin of error (5%)

$n = 90/1 + 90(0.05)^2$

n = 73

So, the sample size of this study will be 73 participants.

3.8 Inclusion criteria

   1. Fourth year nursing students are included**.**

   2. Free from any other acute or chronic illnesses, handicapping conditions, and cognitive problems.

   3. Students whose age between 20 to 30.

3.9 Exclusion criteria

Volume 3 Issue 4: Nursing Student Satisfaction
Mehboob M et al.

INSIGHTS-JHR
INSIGHTS-JOURNAL OF HEALTH
AND REHABILITATION ■ ■ ■

1. The students which are absent.

2. The study did not include undergraduates who did not give their consent.

3. The undergraduates' student other than nursing department.

3.10 Study duration

This study took 4 month (January 2025 to June 2025)

3.11 DATA COLLECTION PROCEDURE

The study's well-designed and accepted questionnaire was utilized to get information from the participant. Data was gathered from Lahore School of Nursing students after informed consent was obtained.

3.12 Ethical consideration

The rules and regulations set by the Departmental Research committee of Lahore School of Nursing, university of Lahore was followed while conducting the research and the rights of the research participants were respected.

1. Written informed consent attached was taken from all the participants.

2. All information and data collection was kept confidential.

3. Participants was remained anonymous throughout the study.

4. The subjects was informed that there are no disadvantages or risk on the procedure of the study.

5. They was also be informed that they was free to withdraw at any time during the Process of the study.

4.RESULTS

The questionnaire was divided into two parts: the demographic data and twenty-two questions of academic and clinical performance with strongly agree, agree, disagree, and strongly disagree regarding satisfaction about academic and clinical performance among undergraduate nursing Students in The University of Lahore, Pakistan.

The participants in this study were both males and females. Of the questionnaires were given to participants, consented to participate in this study the close ended questionnaire was used.

4.1 Table 1: Demographic data of the participants.

Variables	Frequency (f)	Percentage %
Age		
20-25	73	100%
Total	73	100%
Gender		
Male	42	57.5%
Female	31	42.5%
Total	73	100%
Previous Experience		
Yes	54	74%
No	19	26%
Total	73	100%

Volume 3 Issue 4: Nursing Student Satisfaction
Mehboob M et al.

INSIGHTS-JHR
INSIGHTS-JOURNAL OF HEALTH
AND REHABILITATION ■ ■ ■

4.2 Demographic data:

Information about the participants' demographics was gathered using the first section of the survey. It asked about the nursing students' age, gender, and prior experience working in the healthcare industry. There were 73 responders in all, with 100% participation, and the participants ranged in age from 20 to 25. The sample consisted of 73 nursing students, with 42(57.5%) of the participants being male and 31(42.5%) being female. The students who have previous experience in the healthcare field were 54(74 %) and those who have no experience were 19(26%). The sample characteristics are presented in the table 4.1.

Table 2: Participant's response regarding academic satisfaction

SR.	Questions	Category	Frequency	Percentage
1	I may openly communicate with faculty members about my academic and other concerns.	Strongly disagree	2	2.7%
		Disagree	8	11.0%
		Agree	50	68.5%
		Strongly Agree	13	17.8%
2	When students seek for help, faculty members try their hardest to help.	Strongly disagree	10	13.7%
		Disagree	8	11.0%
		Agree	41	56.2%
		Strongly Agree	14	19.2%
3	Teachers try to figure out what problems I might be having with my coursework.	Strongly disagree	5	6.8%
		Disagree	8	11.0%
		Agree	45	61.6%
		Strongly Agree	15	20.5%
4	Typically, faculty members are accessible during office hours and after classes.	Strongly disagree	5	6.8%
		Disagree	19	26.0%
		Agree	36	49.3%
		Strongly Agree	13	17.8%
5	I am able to freely communicate to the administration my academic and other problems.	Strongly disagree	10	13.7%
		Disagree	12	16.4%
		Agree	46	63.0%
		Strongly Agree	5	6.8%
6	Teachers handle each individual student fairly and impartially.	Strongly disagree	10	13.7%
		Disagree	36	49.3%
		Agree	20	27.4%
		Strongly Agree	7	9.6%

SR.	Questions	Category	Frequency	Percentage
7	There are many avenues for students to voice their grievances.	Strongly disagree	16	21.9%
		Disagree	12	16.4%
		Agree	32	43.8%
		Strongly Agree	13	17.8%
8	Teachers inspire me to strive for excellence and serve as excellent role models.	Strongly disagree	9	12.3%
		Disagree	5	6.8%
		Agree	35	47.9%
		Strongly Agree	24	32.9%
9	The administration demonstrates consideration for each student on an individual basis.	Strongly disagree	10	13.7%
		Disagree	18	24.7%
		Agree	36	49.3%
		Strongly Agree	9	12.3%
10	Instructors exhibit a great degree of expertise in their fields.	Strongly disagree	8	11.0%
		Disagree	3	4.1%
		Agree	36	49.3%
		Strongly Agree	26	35.6%

Table 3: Participant's Academic Satisfaction

Satisfaction	Frequency(n)	Percent (%)
<50% indicates low satisfaction	9	12.3%
>50% to 75% indicates average satisfaction	40	54.4%
>75% indicates higher satisfaction	24	32.9%
Total	73	100.0

Table 3 summarizes nursing students' satisfaction with their academic experiences. Of the 73 participants, 12.3% reported low satisfaction (less than 50%), indicating large gaps in meeting expectations due to insufficient feedback, guidance, and resources. The majority, 54.4%, reported moderate satisfaction (50-75%), indicating that while many aspects of their education were satisfactory, there are still areas for improvement, such as: Teaching and administrative support. Only 32.9% reported high satisfaction (above 75%), indicating effective practices such as accessible teachers, hands-on learning opportunities, and a supportive environment. These findings highlight the need for improved instructional strategies to raise the satisfaction levels of more students from average to high while addressing the concerns of dissatisfied groups.

Table 4: Participant's response regarding clinical satisfaction

1	**Because they are personable, clinical professors encourage students to ask questions.**	**I strongly disagree**	**9**	**12.3%**
		I disagree	**6**	**8.2%**
		I concur.	**47**	**64.4%**
		I wholeheartedly concur	**11**	**15.1%**
2	Clinical instructors don't make me feel uncomfortable in front of other people (classmates, staff, patients, and family members) and give comments when it's appropriate.	I strongly disagree	18	24.7%
		I disagree	22	30.1%
		I concur.	24	32.9%
		I wholeheartedly concur	8	11.0%
3	Clinical educators welcome debates and differing viewpoints.	I strongly disagree	5	6.8%
		I disagree	15	20.5%
		I concur.	39	53.4%
		I wholeheartedly concur	14	19.2%
4	Before I execute technical skills, I receive enough advice from clinical instructors.	I strongly disagree	11	15.1%
		I disagree	4	5.5%
		I concur.	43	58.9%
		I wholeheartedly concur	15	20.5%
5	Clinical educators see my errors as a necessary component of my education.	I strongly disagree	8	11.0%
		I disagree	20	27.4%
		I concur.	32	43.8%
		I wholeheartedly concur	13	17.8%
6	I get clear expectations from clinical professors on what to expect during a clinical rotation.	I strongly disagree	14	19.2%
		I disagree	3	4.1%
		I concur.	41	56.2%
		I wholeheartedly concur	15	20.5%
7	I receive written and verbal feedback about my clinical experience from clinical teachers.	I strongly disagree	9	12.3%
		I disagree	23	31.5%
		I concur.	28	38.4%
		I wholeheartedly concur	13	17.8%
8	There are ample opportunities for autonomous practice in the lab and at clinical locations thanks to clinical instructors.	I strongly disagree	7	9.6%
		I disagree	21	28.8%
		I concur.	27	37.0%
		I wholeheartedly concur	18	24.7%

1	**Because they are personable, clinical professors encourage students to ask questions.**	**I strongly disagree**	**9**	**12.3%**
		I disagree	**6**	**8.2%**
		I concur.	**47**	**64.4%**
		I wholeheartedly concur	**11**	**15.1%**
9	I'm encouraged by clinical professors to connect theory to practice.	I strongly disagree	9	12.3%
		I disagree	15	20.5%
		I concur.	31	42.5%
		I wholeheartedly concur	18	24.7%
10	When performing healthcare procedures, I feel secure.	I strongly disagree	8	11.0%
		I disagree	15	20.5%
		I concur.	33	45.2%
		I wholeheartedly concur	17	23.3%
11	The clinical experience of nursing students will be impacted by the nursing staff shortage.	I strongly disagree	12	16.4%
		I disagree	11	15.1%
		I concur.	26	35.6%
		I wholeheartedly concur	24	32.9%
12	I was happy with the clinical placement overall.	I strongly disagree	13	17.8%
		I disagree	6	8.2%
		I concur.	32	43.8%
		I wholeheartedly concur	22	30.1%

Table 5: Participant's Clinical Satisfaction

Satisfaction	Frequency(n)	Percent (%)
<50% indicates low satisfaction	17	23.3%
>50% to 75% indicates average satisfaction	35	47.9%
>75% indicates higher satisfaction	21	28.8%
Total	73	100.0

Participants' clinical satisfaction levels are summed up in the table 5. The majority (47.9%, n=35) expressed a moderate level of satisfaction with the clinical setting, including learning opportunities and teacher support, with values ranging from >50% to 75%. 28.8% (n=21) of the students had high satisfaction (scores >75%), indicating that a sizable percentage of them were particularly happy with their clinical experiences. That being said, 23.3% (n=17) reported low satisfaction (scores <50%), indicating difficulties in fulfilling

their expectations in the therapeutic context. The majority of participants expressed moderate to high levels of satisfaction overall, however in order to meet the requirements of those who expressed lower levels of satisfaction, modifications are required.

LIMITATIONS AND RECOMMENDATIONS

6.1 LIMITATIONS

1. **Single-institution scope:** Because this study was limited to the University of Lahore, its conclusions cannot be applied to other settings and areas with distinct nursing education resources and practices.

2. **Limited sample size:** With only 73 participants, the sample size might not be representative of all nursing students, which would lower the results' statistical power.

3. **Convenience sampling:** This technique only selects students who are available and willing to participate, which may lead to selection bias and distort the findings.

4. **Cross-sectional design:** Because the study is cross-sectional, it is difficult to connect satisfaction levels to the components that were found.

5. **Self-reported data**: Students may give socially acceptable answers rather than ones that accurately reflect their experiences when using self-administered questionnaires, which could lead to response bias.

6.2 RECOMMENDATIONS

1. **Enhance feedback mechanisms**: Put in place a systematic approach where students getting clinical placements receive prompt, helpful, and tailored feedback from clinical mentors.

2. **Enhance mentorship programs**: Put in place a systematic mentoring program that ensures regular direction and assistance from clinical trainers and faculty members and closes the knowledge gap between theory and practice.

3. **Improve resource allocation:** To address resource limitations, modernize clinical laboratories and make sure clinical sites have enough staff to give students a thorough educational experience.

4. **Encourage independent practice opportunities**: Give students more chances to practice on their own in lab and clinical settings to boost their self-assurance and skill application.

5. **Establish frequent assessments**: Survey students frequently to keep an eye on their needs and expectations, meet them, and make sure the curriculum changes in response to their input.

AUTHOR CONTRIBUTION

Author	Contribution
Maryam Mehboob*	Substantial Contribution to study design, analysis, acquisition of Data Manuscript Writing Has given Final Approval of the version to be published
Arshia Nadeem	Substantial Contribution to study design, acquisition and interpretation of Data Critical Review and Manuscript Writing Has given Final Approval of the version to be published
Sheharyar Ahmed	Substantial Contribution to acquisition and interpretation of Data Has given Final Approval of the version to be published

Volume 3 Issue 4: Nursing Student Satisfaction
Mehboob M et al.

INSIGHTS-JHR
INSIGHTS-JOURNAL OF HEALTH
AND REHABILITATION ▪ ▪ ▪

REFERENCES

1. Baba, N. N. H., Govindan, S. N., Ghani, B. A., & Shet, D. (2024). *Factors affecting clinical experience of nursing students in Malaysia: A cross-sectional study*.

2. Et Al., E. S. (2021). Nursing students' satisfaction with the academic program: A cross sectional study. *International Journal of ADVANCED AND APPLIED SCIENCES*, *8*(11), 50–57. https://doi.org/10.21833/ijaas.2021.11.007

3. Hakim, A. (n.d.). *Nursing students' satisfaction about their field of study*.

4. Higazee, M. Z. A., Rayan, A., Ades, M. A., & Alrawashdeh, F. (n.d.). *Nursing Students' Satisfaction with Their Clinical Experiences*.

5. k, A. (2019). Student Satisfaction with Nursing Program at the Sulaimani College of Nursing. *Journal of Nursing & Healthcare*, *4*(4). https://doi.org/10.33140/JNH.04.04.02

6. Mohamed, T., Elghabbour, G., Abd El Reheem, H., & Abdelhalim, E. (2022). Nursing Students' Experience and Satisfaction with the Clinical Learning Environment. *International Egyptian Journal of Nursing Sciences and Research*, *0*(0), 0–0. https://doi.org/10.21608/ejnsr.2022.140942.1186

7. Papastavrou, E., Dimitriadou, M., Tsangari, H., & Andreou, C. (2016a). Nursing students' satisfaction of the clinical learning environment: A research study. *BMC Nursing*, *15*(1), 44. https://doi.org/10.1186/s12912-016-0164-4

8. Papastavrou, E., Dimitriadou, M., Tsangari, H., & Andreou, C. (2016b). Nursing students' satisfaction of the clinical learning environment: A research study. *BMC Nursing*, *15*(1), 44. https://doi.org/10.1186/s12912-016-0164-4

9. Tomas, N., & Muronga, H. (2022). Undergraduate nursing student satisfaction with the nursing program at a university campus in Namibia. *International Journal of Africa Nursing Sciences*, *17*, 100443. https://doi.org/10.1016/j.ijans.2022.100443

10. Vanaki, Z., & Hakim, A. (2023). Students' Satisfaction of Nursing Education: A Qualitative Study. *Sage Open*, *13*(2), 21582440231169471. https://doi.org/10.1177/21582440231169471

11. Alenezi, A. R. (2022). Modeling the social factors affecting students' satisfaction with online learning: A structural equation modeling approach. *Education Research International, 2022*, 1–13. https://doi.org/10.1155/2022/XXXXXX

12. Azam, A. (2018). Service quality dimensions and students' satisfaction: A study of Saudi Arabian private higher education institutions. *European Online Journal of Natural and Social Sciences, 7*(2), 275–284

13. Banahene, S., Kraa, J. J., & Kasu, P. A. (2018). Impact of HEdPERF on students' satisfaction and academic performance in Ghanaian universities: Mediating role of attitude towards learning. *Open Journal of Social Sciences, 6*(5), 96–119. https://doi.org/10.4236/jss.2018.65008

14.

15. Birhanu, A. L. (2018). Service quality and customer satisfaction in Ethiopian higher education institutions: The case of Oromia State University, Ethiopia. *The International Journal of Business and Management, 6*(9), 273–289.

16. Essaoudi, M., & Lotfi, R. (2021). Effect of service quality on student-inspector satisfaction at the training center for educational inspectors in Rabat, Morocco. *International Journal of Information Technology and Applied Sciences (IJITAS, 3*(2), 53–62.

17. Muhammad, N., Kakakhel, S. J., Baloch, Q. B., & Ali, F. (2018). Service quality: The road ahead for student's satisfaction. *Review of Public Administration and Management, 6*(2), 1–6.

18. Muthamia, S. M. (2016). *An assessment of university service quality and its effects on student satisfaction: A case of United States International University* [Master's thesis, United States International University, Kenya].