Journal of Frontiers in Multidisciplinary Research

Academic Procrastination and Role Conflict among Nursing Students: A Cross-sectional Study

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Article Info

E-ISSN: 3050-9726
P-ISSN: 3050-9718
Volume: 07
Issue: 02
Received: 12-05-2026
Accepted: 11-06-2026
Published: 10-07-2026
Page No: 55-63

Abstract

Nursing education combines rigorous academic requirements with intensive clinical training, exposing students to competing role demands that may trigger academic procrastination. This descriptive-correlational, cross-sectional study examined the relationship between academic procrastination and role conflict among 279 nursing students (Levels 4 to 8) at Riyadh Elm University. Data were gathered using a modified Academic Procrastination Scale and a 16-item self-developed Role Conflict Scale, both validated by a panel of experts and pilot-tested (Cronbach's alpha = 0.817). The sample was predominantly female (72.76%), with most respondents aged 21-23 years old (61.29%). Nursing students exhibited a task-dependent pattern of academic procrastination, with writing a term paper (M=3.26) rated very high and keeping up with reading assignments (M=2.52) rated high, while the remaining dimensions were moderate. More than half of the students (53.33%) reported a moderate level of role conflict and 26.88% reported a high level, driven largely by competing time demands and inconsistent expectations between clinical instructors and coursework. Pearson correlation analysis showed that role conflict was significantly and moderately associated with procrastination on academic tasks ($r = .46$, $p < .001$) and studying for exams ($r = .45$, $p < .001$), while associations with the remaining dimensions were weak and non-significant. These findings suggest that role conflict selectively undermines nursing students' capacity to manage tasks requiring sustained cognitive effort. Nursing curricula should integrate time-management and self-regulation training, alongside consistent academic-clinical expectations, to reduce role conflict and its effects on procrastination among nursing students.

DOI: https://doi.org/10.54660/.JFMR.2026.7.2.55-63

Keywords: Academic Procrastination, Role Conflict, Clinical Training, Clinical Rotation, Nursing Students

Introduction

Nursing education provides intensive clinical training for the nursing students aside from its rigorous academic requirements. These two dimensions demand considerable time, energy, and psychological wellbeing for the students. As the students attempt to manage their academic, clinical, personal and social tasks, they frequently experience role conflict that delays their ability to become productive. Howson (2019) [4] delineated role conflict as something that arises that is contradictory demands from various roles the individual occupies that result to psychological tension and stress. Kahn *et al*., (1964) [16] added that it is a psychological tension from competing role expectations that affect with each other. In response to these conflicting demands that produce stress, the students tend to do academic procrastination as a consequence of the clashing factors. For González-Brignardello *et al*., (2023),[12] the academic procrastination refers to persistent behavior in the academic development of the students which lead to postponing or delaying the implementation of completing the necessary task or completing deadline. This reflects how the procrastination detriment student in the classroom, presence of dropouts and loss of student wellbeing. Brewer (2026) [5] cited that academic procrastination is almost universal. Studies have shown that 80-95% of the students procrastinate which becoming consistent and problematic due to long time spent in the mobile phone. He cited that it is a self-regulation

pattern of delaying or completing what intends to perform. This made it as an emotional regulation.

Researches have shown the high prevalence of academic procrastination with nursing students. Zhou (2025) [26] reported that more than 82% of the nursing students possess a moderate to high levels of academic procrastination, with negative emotional states and perceived stress acting as a mediating role. Also, previous study has shown that lower mindfulness and a reduced future time was predictor of procrastination (Li *et al*. (2023).[21] These results indicates that academic procrastination is not an issue of time management but multiple factors shaped by psychological, emotional, and contextual factors. Moreover, the academic procrastination can lead to significant serious problem which decline the student's well-being. It has been related to poor academic performance (Kim & Seo, 2015)[19] and with emotional distress (Amani *et al*., 2021).[3] With the demanding structure of the nursing curriculum, the academic procrastination add aggravation by role conflict particularly in between conflicting obligations such as attending lectures, preparing for clinicals, or fulfilling family duties. Li *et al*. (2024)[22] revealed distinct procrastination profiles among nursing students and found that stress, exam failure, and low professional identity were strong predictors of high procrastination behavior.

The rationale of this study represents that despite the growing body of literature on both procrastination and role conflict, limited studies have explored the direct relationship between the two, especially within the context of nursing education. Understanding how role conflict contributes to procrastination may help educators, counselors, and administrators design more effective interventions to improve student outcomes. Therefore, this study aims to examine the relationship between academic procrastination and role conflict among nursing students. Specifically, it assesses the levels of both variables, explore their correlation, and identify demographic or situational factors that may influence this relationship. The findings of this research are expected to inform strategies that enhance nursing students' academic performance, time management, and overall well-being.

Aims

This study aims to examine the relationship between academic procrastination and role conflict among nursing students.

Materials and Methods

Study Design

This study employed descriptive-correlational research to examine the relationship between academic procrastination and role conflict among nursing students. As a cross-sectional study, it aims to identify the levels of academic procrastination and perceived role conflict, while the correlational aspect determines the statistical relationship between academic procrastination and role conflict.

Data Collection Methods

This research focused on the academic procrastination and role conflict of the nursing students. A self-developed research questionnaire was developed by the researchers to be able to achieve the purpose of this study. This research instrument consists of three parts. The first part is the demographic profile that includes age, gender, nursing level, and hours of clinical duty per day. The second part is the academic procrastination measured by Academic Procrastination Scale (APS), and modified to fit the nursing academic context. Items were rated on a 4-point Likert scale (1 = Never to 4 = Always). Third, the role conflict was measured by a self-developed questionnaire composed of 16 items where items 6, 7, 8, 9, 10, 14, 15, 16 were reversely coded. It also used a four-point Likert scale (1 = Strongly Disagree to 4 = Strongly Agree). The scoring classification for Academic Procrastination Scale were 3.26-4.0 (Very High), 2.51-3.25 (High), 1.76-2.50 (Moderate), 1.0-1.75 (Low) while the Role Conflict Scale was 10 as the lowest and 50 having the High perceived role conflict.

The questionnaire of this study underwent content validation by a panel of nursing educators and psychologists. A pilot test was conducted with 27 nursing students which are not part of the actual study, and reliability was established using Cronbach's alpha with result of 0.817.

Sample Characteristics

The study was conducted at Riyadh Elm University, specifically within the College of Nursing. The institution offers a Bachelor of Science in Nursing program and includes both academic and clinical training environment, making this an appropriate setting for this study. The target population for this research consist of all enrolled nursing students from second year to fourth year in the academic year 2025-26. Level 1 to 3 students were excluded due to limited clinical exposure. A stratified random sampling technique was employed to ensure equal representation across nursing levels.

Survey Administration

After securing ethical approval from the Institutional Review Board, formal permission was obtained from the College of Nursing. Participants were recruited in person and through institutional email, and informed consent was secured. The questionnaires were distributed via an online platform (e.g., Google Forms), depending on participants' availability. To avoid multiple participation of the study participants, only one email can participate in the study. Only completed questionnaires after rechecking were included in the total responses of this study.

Study Preparation

Prior to the implementation of the research, several preparatory steps were undertaken to ensure the accuracy, validity, and ethical integrity of this study. First, the researchers follow the proposal writing of Riyadh Elm University with the research supervisor. The researchers obtained ethical approval in order to comply with the ethical standards. During the conduct of the study, the researchers sought permission from the dean of the college to request permission to allow the distribution of questionnaire to the nursing students.

Ethical Considerations

This study adhered to ethical standards concerning informed consent, voluntary participation, anonymity, and confidentiality. All data were kept confidential and were used solely for academic purposes. A password proof drive was utilized to secure and maintained the integrity of the data being gathered. Ethical clearance was approved by the REU IRB with number FUGRP/ 2025/456/ 1316/ 1185.

Statistical Analysis

The gathered data was analyzed using the Statistical Package for Social Sciences (SPSS) version.29. The statistical methods that were used are: Descriptive statistics (mean, standard deviation, frequency, and percentage) for demographic data, academic procrastination, and role conflict levels. Pearson's (r) to determine the relationship between academic procrastination and role conflict.

Results and Findings

To accomplish the study's purpose, the researchers conducted a quantitative investigation and presented in tables and graphs for easy interpretation.

Table 1: Frequency Distribution of the Demographic Characteristics (N=279)

Variables	Categories	Frequency (n)	Percentage (%)
Age	18-20 years old	83	29.75%
	21-23 years old	171	61.29%
	24-26 years old	25	8.96%
Gender	Male	76	27.24%
	Female	203	72.76%
Nursing Level	4	31	11.11%
	5	56	20.07%
	6	53	19.00%
	7	63	22.58%
	8	76	27.24%
Hours of Clinical Training/day	4	10	3.58%
	5	166	59.50%
	6	103	36.92%

Notes: Total study participants are 279 student nurses

The table 1 shows the demographic background of the study participants. With a total of 279 nursing students, majority of young adults fall under 21-23 years old which accounted for 69.21% and the 18-20 years garnered 29.75%. This group represents a young undergraduate student with few respondents older. The concentration of most age was mid to senior nursing students. These were students widely exposed to clinical training which actively engaged in clinical duties according to their clinical rotations. These findings suggest the relevance of clinical demands and their role conflict.

In terms of gender, the female dominates this study with 72.76% of the total sample compared to male with 27.24% or 76 of the total study sample. This reflects the long-standing dominancy of the female in the healthcare sector.

As to the nursing level distribution, the nursing level from 4 to 8 is relatively balanced. The older level which is the nursing level 8 represents the largest group representing 27.24%. The balanced between the nursing level is reasonable as it represents the generalizability among each level. This strengthens the generalizability of the results of the nursing levels in the nursing programs.

For the clinical hours spent by the students, most of the students reported 5 hours clinical spent obtaining 59.50% accounted for 166 of the total study sample. This is followed by 6 hours or 36.92% or 103 of the study sample.

Table 2: Level of Academic Procrastination of the Nursing Students (N=279)

Dimension	Mean	SD	Interpretation
Writing a Term Paper	3.26	0.25	Very High
Studying for Exams	2.26	0.42	Moderate
Keeping Up with Reading Assignments	2.52	0.76	High
Academic Administrative Tasks	2.47	0.51	Moderate
Attendance Tasks	1.80	0.55	Moderate
School Activities in General	1.88	0.62	Moderate

Notes: 3.26-4.0 (Very High), 2.51-3.25 (High), 1.76-2.50 (Moderate), 1.0-1.75 (Low)

The table above presents the academic procrastination level of the nursing students. Based on the results, this indicate that academic procrastination in writing term paper garnered the highest level with M=3.26, SD=0.25. This was followed by keeping up with reading assignment which obtained M=2.52, SD=0.76. These findings aligned with existing literature that students tend to have academic procrastination more on the tasks that are self-paced and long deadlines such as research papers and reading assignment which needs time in between to submit as compared with other non-enforced activity.

Reading assignment and doing term papers such as research paper helps in building student's theoretical foundations which apply into nursing clinical practice.

Cabalsa (2018) [6] explained that applying this in the clinical practice is a competency that should be reflected on each nurse. They should possess the knowledge, skills and attitude to successfully perform the role of the professional nurse regardless of the setting. However, less preparation at this level causes less competence during clinical rotations which potentially affect the provision of patient safety and better health outcomes. This impact their clinical judgment, error rates and readiness of the nursing students e.g., licensure examinations for nurses. Overall, this finding implies that academic procrastination was not a uniform trait but a task dependent trait with implications to nursing curricula and encourage academic student support to strengthen their time

management skills and self-efficacy in order to increase preparedness of the nursing students in the clinical setting. This shows the presence of clinical readiness risk which resulted to delayed task completion which needs to be addressed and mitigated.

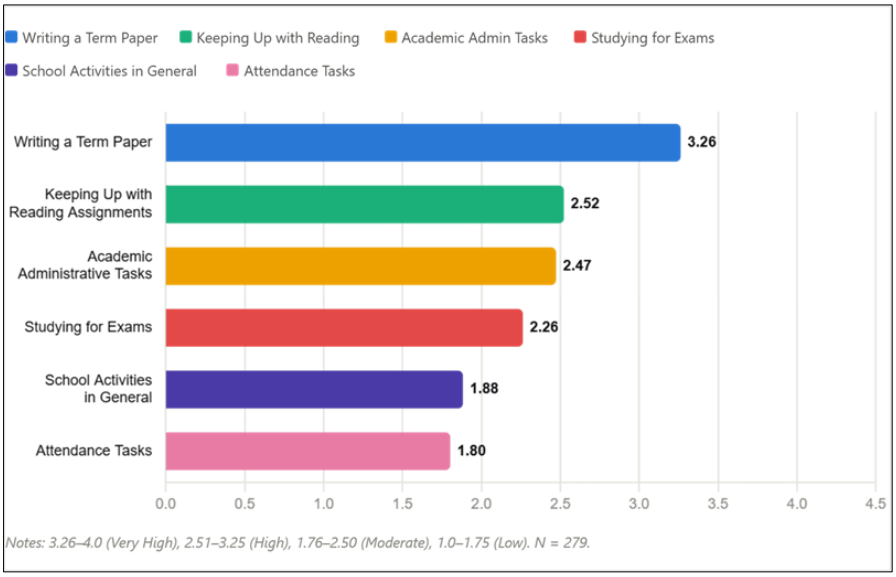

Fig 1: Distribution of Academic Procrastination Levels among Nursing Students (N=279)

The figure above shows the graphical presentation of distribution of academic procrastination among the nursing students. Since self-paced task were mostly procrastinated by the nursing students according to the results, nursing education and curriculum design can be revisited as it will affect their procrastination levels. For the nursing faculty, integrating procrastination and self-efficacy should be part of the academic advising as it may affect the future habits of nurses in the clinical practice.

Table 3: The Level of Role Conflict among Nursing Students (N=279)

Level of Role Conflict	Scoring Range	Frequency (n)	Percentage (%)
Low	10-23	54	19.35%
Moderate	24-36	146	53.33%
High	37-50	75	26.88%
		279	100.00%

Notes: Low perceived role conflict, Moderate perceived role conflict, High perceived role conflict

The table 3 reveals the level of role conflict as perceived by the nursing students. It can be seen in the results that more than half of the nursing students experienced moderate level of role conflict (n=146), whereas high level of role conflict was reported by 75 of the total study sample and only few of them obtained low level of role conflict n=54. The results indicate that most of the study participants have varying levels of role conflict while enabling the students to balance clinical and academic requirements including the personal obligations. The nursing students expected to have a bigger role to fulfill its duties such as competencies to gain experiences for future nursing practice.

The current findings shows that most of the students were facing a varying level of conflict while trying to balance academic, clinical, personal and social responsibilities. The nursing students are expected to fulfill classroom obligations and clinical competence. For Karimi Mirzanezam *et al.*, (2024),[17] acquiring clinical skills is affected by several factors such as motivation, physical health and the quality of the course learning outcomes. Zhang et.al., (2022)[25] elucidated that nursing students deal with challenges during clinical exposure which includes inadequate mentorship, difficulty of patient interaction and the incongruity of the internship duration and course learning objectives. In sum, this highlights the need for nursing schools to implement effective supervision and stress management programs to help students balance and manage both the academic and clinical responsibilities.

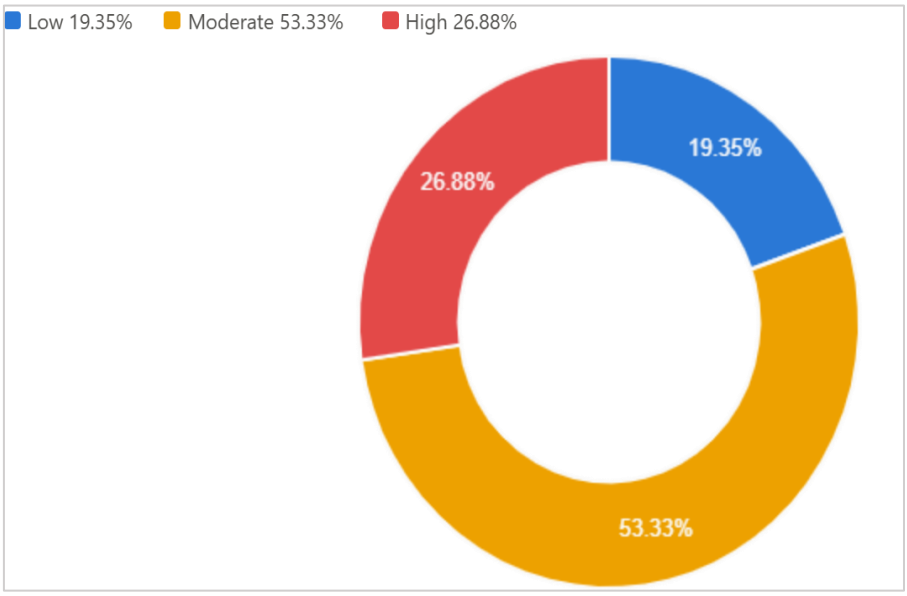

Fig 2: Distribution of Role Conflict Levels Among Nursing Students (N=279)

The figure 2 illustrates the graphical presentation of the levels of role conflict. More than half of the study participants experienced a moderate level of role conflict obtaining a 53.33% of the total sample which implies a competing demand between the course requirements, personal and social responsibilities. Further, a high level of role conflict was reported by 26.88% of the nursing students which implies the difficulties among respondents in balancing multiple roles. Yet, the low level of role conflict was demonstrated only by 19.35% which indicates few numbers of students have minimal interference between their different responsibilities. This aligned with Goode (1960) [13] about the scarcity of the role theory which argued that individuals with limited resources may encounter conflict in fulfilling their multiple roles. He explained that roles create competing demands which have a tendency of role strain. This led to burden, exhaustion, and tension due to the requirements of the role. Frone *et al*., (1992);[10] Frone & Yardley, (1996) [11] reiterated that role conflict occurs when the demands, source of stress or time commitments affect the caregiving role or vice versa. The study findings implies that role conflict is an issue that should be taken into consideration taking into account the 80% of the nursing students who were either moderate to high level of role conflict. This suggests the need to implement interventions in order to assist nursing students in dealing with both academic and clinical responsibilities. For Anand & Vohra (2020),[4] this role conflict is an unpleasant experience which an individual deal with because of competing demands of social roles and statuses. Thus, addressing the nursing student's role conflict may help to improve the academic achievement of the nursing students, their clinical competence which may result to low risk of burnout and attrition.

Table 4: Item Analysis of the Role Conflict Scale for Nurses (N=279)

No	Items	Mean	SD	Interpretation
1	You often receive conflicting expectations from your clinical instructors.	3.23	0.7218	Agree
2	Your course requirements interfere your clinical duties.	3.25	0.7421	Agree
3	You expect to complete activities that compete between your time and focus	3.27	0.6100	Strongly Agree
4	Your clinical instructors provide inconsistent instructions.	3.20	0.6674	Agree
5	You feel pressured with the multiple tasks between academic and clinical responsibilities to accomplish.	3.29	0.5782	Strongly Agree
6	Your academic and clinical duties rarely conflict with each other. *	2.68	0.7102	Disagree
7	Your classroom expectations are consistent with those in clinical area. *	3.00	0.6500	Disagree
8	You understand clearly which responsibilities should be prioritized when needs arise. *	2.48	0.7542	Agree
9	You seldom experience conflicts between your personal, academic and clinical responsibilities. *	1.74	0.6027	Strongly Agree
10	Your academic and clinical instructor's instructions are generally consistent. *	2.51	0.7581	Disagree
11	You often feel the people around you pulling you in different directions.	2.62	0.7421	Agree
12	You have to deal with various demands at university.	2.70	0.7953	Agree
13	The clinical instructors often ask you to do different which cannot be both done.	2.78	0.7411	Agree
14	The academic task that you are assigned rarely come into conflict with each other. *	2.51	0.6128	Disagree
15	The academic things told you to do not conflict with each other. *	2.34	0.8420	Agree
16	You seldom placed in a situation where one task conflict with other tasks. *	1.65	0.6001	Disagree
	Overall Total	2.64		Agree

Note: 1.00–1.75 = Strongly Disagree; 1.76–2.50 = Disagree; 2.51–3.25 = Agree; 3.26–4.00 = Strongly Agree. *Reverse Coded

The table above outlines the item analysis of the level of role conflict among nursing students. Findings have shown that nursing students perceived a moderate level of role conflict with a total average mean of 2.64 (Agree). According to the results, it can be seen that there were two items which are perceived to be the source of conflict which were: competing time demands (Item 5: pressured with the multiple tasks between academic and clinical responsibilities to accomplish (3.29) including the Item 1 and 4 showing inconsistent expectation from the instructor which garnered a mean of 3.23 and 3.20 respectively. This result is parallel to previous literature that role conflict between academic and clinical responsibilities are negatively associated with each other. This suggest that competing demands between academic and clinical can be an emerging factor that contribute to role conflict.

Another is the inconsistency between the classroom and clinical expectations. Cabalsa (2018)[6] cited that the presence of the disconnect or gap between theory and clinical needs reform to achieve a future proof nurse. Yet, it reflects the nurse clinical role conflict which role conflict can be observed in both academic and clinical positions. This shows an adverse effects not just for the students but to the faculty satisfaction as well. Taken collectively, the faculty should provide a consistent report as instruction to the nursing students. As for the curriculum alignment, the nursing students should be informed on the expectations between classroom and clinical setting such as shared rubrics, evaluative tool to prevent inconsistencies among students.

Table 5: Correlation between Academic Procrastination and the perceived role conflict among students

Variables	1	2	3	4	5	6	7
(1) Writing a Term Paper	--	0.21	-0.16	0.09	0.02	0.11	0.25
(2) Keeping up with Reading Assignment		--	-0.12	0.28	-0.18	-0.16	-0.27
(3) Academic Administrative Task			--	-0.08	-0.09	-0.17	0.46**
(4) Studying for Exams				--	-0.29	-0.31	0.45**
(5) School Activities in General					--	0.18**	-0.21
(6) Attendance Task						--	-0.23
(7) Role Conflict							1.00

Note: ***p<0.001*

The table 5 shows the correlation between the academic procrastination and role conflict. Based on the Cohen's conventional benchmarks, there were two procrastination domains that dependable link to role conflict. The academic task and studying for exams show a positive, meaning it has a greater conflict for the students who have confronting and clashing demands between academic, clinical and personal which delay certain responsibilities. Interesting, these two tasks need the most sustained cognitive effort and self-regulations. This implies role conflict may wear down the student's ability to focus more on all academic behaviors. Although some of the domains were not significant for reading assignments, school activities, and attendance, these does not directly predict procrastination though this cannot be confirmed statistically.

Table 6: Interpretation for Each Dimensions of Academic Procrastination and Perceived Role Conflict

Dimensions	Pearson *r*-value	Interpretation
Writing a Term paper	0.25	Weak positive, not significant
Keeping up with Reading Assignment	-0.27	Weak Negative, not significant
Academic Administrative Task	0.46**	Moderate positive, highly significant
Studying for Exams	0.45**	Moderate positive, highly significant
School Activities in General	-0.21	Weak negative, not significant
Attendance Task	-0.23	Weak negative, not significant

Note: **p<0.001

The table 6 presents the breakdown of the Pearson r results for each dimension of academic procrastination and role conflict. According to the table, Academic Administrative Tasks (r =.46) and Studying for Exams (r =.45) show a moderate positive correlation with role conflict. This indicates that nursing students who experience greater conflict between competing roles (academic, clinical, personal/family/social) are meaningfully more likely to delay these two specific tasks, and this relationship is unlikely to be due to chance. Meanwhile, the remaining four dimensions — Writing a Term Paper (r =.25), Keeping up with Reading Assignments (r = -.27), School Activities in General (r = -.21), and Attendance Task (r = -.23) are all weak and statistically non-significant. This study argued that role conflict is selectively correlated with procrastination in academic administrative task and exam-related tasks.

Discussion

This study focused on examining the relationship between the academic procrastination and role conflict as perceived by the undergraduate nursing students at varying levels from level 4 to level 8. This captures the different stages of clinical exposure from a cohort of students which strengthens the generalizability of the subsequent findings on procrastination. This study was predominantly female respondents as compared with male respondents. This aligns with the study of Kumaria *et al*., (2025)[20] which explained that academic procrastination remains extensive issues at all levels of study that occurs in both male and female. This is commonly due to academic achievement increased stress and low productivity. They explained that nursing students procrastinate was due to several factors of academic task and daily tasks.

The National workforce data shows that female outnumbered male in the enrolment of the nursing programs. This becomes a trend in the nursing profession in Saudi Arabia where female dominate the nursing workforce (Aljohani, 2020). [2] Because the role conflict is shaped by the nursing students competing demands, the respondents of this study is relevant to the contextual factor of the findings.

A moderate level of academic procrastination was reported among nursing students wherein writing a term paper and keeping up with reading assignments emerged as the heavily procrastinated task. This shows a task dependent which is consistent with previous research that is self-paced, long deadlines and academic tasks. Fentaw *et al* (2022) [9] found that almost 80% of the students which procrastinate due to poor time management skills, inadequate planning skills, presence of stress and laziness. The procrastination happened irrespective of the gender affecting attitude and behavior of the students. For Ahmed *et al*., (2024), [1] a reasonable explanation was due to structural differences of the tasks. The term papers and assignment have different deadlines that structure attendance and obligation. The response of deferring it has no immediate consequences which suggest the delaying behavior on research and some academic activities. In academic works of nursing students, writing and reading serves as the main vehicle where students build theoretical foundation before exposing to clinical settings. Having the delay in both of these, means a potential upstream risk to nursing clinical preparedness. If they defer those foundations, it has an implication to clinical errors, judgment and readiness in the future role of a professional nurse. This aligns with Dogham *et al*., (2024); [8] Mohamed *et al*., (2024) [23] which reveals that coursework and assignment workload were the frequently cited sources of stress among nursing students aside from the clinical exposure in the health facility. In sum, the results of this study reinforces that procrastination is not a fixed trait but rather a task-contingent behavior.

In the level of role conflict, this study found a moderate level of role conflict by the nursing students as more than half of them perceived it. The moderate to high results implies the competing demands of academic coursework and clinical responsibilities which become the source of their tension or stress. This is not an isolated experience among the nursing students where irrespective of their level, ages and gender can experience the role conflict. Similarly, Khawaldeh (2023) [18] explained that role conflict arises when leaders should skillfully balance conflicting demands and expectations as it will affect the professional performance and general well-being. Career Trends (2021) [7] elucidated that role conflict harms on every aspect which have come to expect certain behaviors. But this role conflict disrupts people and they feel disappointed and resented.

Finally, this study found a significant association between two dimensions of academic procrastination and perceived role conflict. This relationship shows students who have higher levels of role conflict probably shows their procrastination behavior. This is a critical point on the part of the nursing educators and motivation can play a vital part in order to eliminate it. For Huang *et al* (2025) [15] who study the relationship between teacher support and academic procrastination, they concluded that perceived teacher support can reduce the academic procrastination of the students by enhancing their academic self-efficacy. For instance, this study is consistent with Senecal, Julien, & Guay (2003) [24] which concluded that students who are motivated primarily through external regulation or do lack motivation tend to experience higher levels of role conflict and academic procrastination.

Conclusion

The present research examined the relationship between academic procrastination and perceived conflict role among 279 nursing students. Based on the study findings, it was reported a moderate level of academic procrastination wherein the most heavily procrastinated dimension and self-paced tasks were writing terms papers and reading assignments. It was also found that nurses demonstrated a moderate to high levels of role conflict intensifies by the competing demands between academic requirements and clinical responsibilities as well as the inconsistencies on expectation between the instructor and classroom requirements.

There is a correlation between role conflict and academic procrastination which showed a statistically significant, moderate positive correlation with procrastination on academic tasks and studying for exams. Yet, the academic procrastination is a task-contingent behavior which means the nursing students action and personality response in order to adjust to the specific demands between clinical, classroom, social and personal. They change their behavior in order to comply with the environment rather than relying in fixed trait. It is also found that role conflict weakens the nursing student's self-regulation and sustained cognitive effort needed for academic task and exam-related task.

Collectively, this study underscores the need for targeted interventions for the nursing students to address the role conflict which influence procrastination in high academic tasks which affects the nursing student's readiness in the clinical area and nurse professional competence.

Recommendations

Based on the findings of this study, the following recommendations were drawn:

1. For the nursing education, the time management, and self-regulation skills training should be integrated to nursing curriculum with emphasis in the exam related task and academic task as these were closely linked with role conflict.
2. For the academic advisory, the faculty should be regularly screen for the procrastination tendencies in order to early diagnosed and got early support.
3. For clinical supervision, the mentor should work together to achieve consistencies by implementing the desired expectations between academic and clinical setting for the nursing students. This can be done by shared rubrics, standard evaluative tool, suitable clinical schedule in meeting clinical rotations.
4. For the educational institution, they should strengthen supervision in the clinical area and stress management strategies. This will help the nursing students to balance the academic course works and clinical responsibilities.
5. For the future researches, a longitudinal and or experimental research should be conducted to identify the causal direction between academic procrastination and perceived role conflict. Additional variables should be examined such as workload, perceived stress, self-efficacy and coping straits to explain task dimensions.

Limitations of the Study

There are several study limitations when interpreting the findings of this study.

First, the research design utilized in this study does not permit causal inference as the present study observed association and not the causal conclusion.

Second, the used of sampling technique such as convenience sampling may limit the generalizability of the study findings.

Third, this study used a self-report Likert-scale questionnaire which become prone to social desirability bias but not fully assess the real behavior.

Fourth, this study measured the six subscales academic procrastinate with focus on influential variables as self-efficacy, workload, stress, motivation, or personal and family circumstances.

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How to Cite This Article
Cabalsa MO, Hazazi MK, Khalaf FD, Almutairi AF, Alsamdani AH, Alanazi AM. Academic procrastination and role conflict among nursing students: A cross-sectional study. J Front Multidiscip Res. 2026;7(2):55-63. doi:10.54660/JFMR.2026.7.2.55-63.