

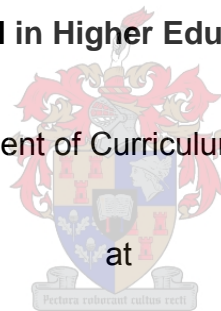
**Possible contributors to students' non-completion of the postgraduate nursing
diploma at Stellenbosch University**

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Research report submitted in partial fulfilment for the Degree of

MPhil in Higher Education

(Department of Curriculum Studies)



at

Stellenbosch University

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December 2010

Declaration

I, the undersigned, hereby declare that the work contained in this research report is my own original work and that I have not previously in its entirety or in part submitted it at any university for a degree.

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ABSTRACT

In this research report I have argued that postgraduate student retention and completion rates in nursing education can be enhanced by attending to the following actions: increased institutional support, initiating students into an ethics of care, and engaging students and lecturers in some form of dialogical communication. In order to ensure that students do not prematurely depart from their programme of study, I have shown that it is not sufficient to offer merely institutional (mostly administrative) support to students, but also cultivating caring and dialogical communication in teaching and learning activities. My argument in defence of caring and dialogical communication is corroborated by an empirical investigation which confirms students' non-completion and retention in the non-clinical postgraduate nursing education programmes offered by Stellenbosch University's Nursing Division in 2008.

OPSOMMING

In hierdie navorsingsverslag het ek geargumenteer dat die nagraadse studentebehoud- en voltooiingkoerse in verpleegonderwys versnel kan word deur aandag aan die volgende aksies te skenk: toenemende institusionele ondersteuning, inisiëring van 'n etiek van omgee ten opsigte van studente en die betrokkenheid van studente en dosente in 'n vorm van dialogiese kommunikasie. Om te verhoed dat studente nie voortydig die studieprogram verlaat nie, het ek aangedui dat dit nie voldoende is om slegs institusionele (meesal administratiewe) ondersteuning aan studente te verskaf nie, maar ook om 'n kultuur te skep van omgee en dialogiese kommunikasie in onderrig- en leeraktiwiteite. My argument ter staving van omgee en dialogiese kommunikasie word ondersteun deur 'n empiriese ondersoek van studente se nie-voltooiings- en retensiekoerse in die nie-kliniese nagraadse onderwysprogramme wat deur Universiteit Stellenbosch se Verpleegkunde-afdeling in 2008 aangebied is.

ACKNOWLEDGEMENTS

- I thank the Almighty Creator for the wisdom and perseverance that guided me throughout this study.
- I sincerely appreciate the unwavering support and guidance of my supervisor, Professor Eli Bitzer throughout this study.
- My sincere appreciation goes to my children, Tasneem-Nadia and Mugammad Zain; and late mother, Fatima for their endless patience and encouragement to complete this study.
- My departmental head, Professor Cheryl Nikodem and colleagues for their continuous support; and
- My critical reader, whose unselfish reading and support has made this study attain fruition.

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CHAPTER ONE

ORIENTATION TO THE STUDY

1.1 Introduction

As a nurse educator for the past decade I developed an immense concern for the profession, particularly instigated by local and global challenges about nursing and nursing education. I have been mostly perturbed about the lack of completion rates of postgraduate students registered at our tertiary institutions. I cannot be exonerated from this situation because there was a moment in my academic career that I wanted to postpone or discontinue my own studies because of sometimes unexpected challenges. Therefore, my research report potentially offers a narrational account of what challenges the profession is faced with, how postgraduate students perform, and why they sometimes discontinue their studies. Hopefully, my investigation can offer options as to how a lack of completion rates could potentially be quelled.

Nursing in South Africa is facing a number of challenges, which are highlighted either as 'the nursing profession in South Africa today is in need of care' (Breier, Wildschut & Mgqolozana 2009: 1) or as stated more aptly: 'nursing in South Africa is facing a serious crisis' (DoH 2008: 7). These challenges include the burden of disease, standards, image and status of nursing, deteriorating working conditions, a perceived shortage of nurses, an ageing workforce, nurse leadership and more specifically linked to my study, nursing education and a high nursing attrition rate (Breier *et al.* 2009; DoH 2008). In addition, the South African Nursing Council's (SANC) professional registers for the period 1997 to 2006 shows a workforce attrition rate of 65% (Breier *et al.* 2009).

Since the achievement of democracy in South Africa (SA) in 1994, several policy documents were published which include the following: the SA Qualifications Act, 1995; the Education White Paper 3: A Programme for

Higher Education Transformation, 1997; the Higher Education Act, 1997; the National Plan for Higher Education (NPHE), 2001; the National Health Act No.61 of 2003 and the Nursing Act No.33 of 2005. Many of these policies had a profound effect on nursing education (NE) in SA, which I shall refer to in Chapter Two.

In this chapter I provide a brief overview of the study, which includes the background and rationale for the study, a statement of the research problem and the research methodology in terms of which I shall attempt to respond to the research problem. I conclude with clarifying significant terminology vis-à-vis this research report and give an outline of the ensuing chapters.

1.2 Background and rationale for the study

The NPHE, which emanated out of the Education White Paper 3: A Programme for Higher Education Transformation, had a profound effect on NE in South Africa. One of the goals: the building of 'new institutional and organisational forms and new institutional identities and culture' (White Paper 1997: 2.42-2.45), resulted in the discontinuation of the undergraduate nursing programme at the Stellenbosch University Nursing Division (SUND). What ensued at Stellenbosch University was the promotion of the postgraduate nursing programme.

Another important event which had a major effect on nursing education in SA was the acceptance by the Ministry of Health of the health related Millennium Development Goals (MDGs) as espoused by the United Nations in 2000. This subsequently led to the concept 'Health for All' and, most importantly, that all communities should have universal access to quality health care. The commitment of the government to attaining the MDGs is reflected in the speech by the then Health Minister, Manto Tshabalala-Msimang at the 2008 National Consultative Health Forum where she reiterates that 'We are determined to ensure that as a country we train the numbers, the type and

quality of health care workers that are needed to meet the health needs of our people' (Minister of Health 2008).

The Stellenbosch University Nursing Division (SUND), in line with the transformation goals of the NPHE and in addressing the serious challenges nursing faces, aims to transform nursing leadership through innovative postgraduate education and research at SU (UNEDSA Proposal, SU 2009). The implementation of the Access Success model for transformation hopes to ensure successful completion of programmes through the provision of academic development support for postgraduate students. This will be benchmarked against a decrease in the drop-out rate and an increase in the retention, pass and throughput rates of students.

This study primarily focuses on the 2008 cohort of students participating in postgraduate nursing diploma programmes – the latter comprising of five clinical postgraduate diplomas (CPGDs) and two non-clinical postgraduate diplomas (NCPGDs). It can be institutionally verified (based on data made available by SU's Institutional Planning Directorate such as annual Facts books or 'Feite boeke') that many students register for postgraduate diploma programmes, but do not complete. The programmes where the throughput rates were significant are the NCPGD ones, which are also the programmes with the highest enrolment rates (twice as many students register for the NCPGDs than the CPGDs). Reflecting on some of the comments of my peers who work on these programmes, it was found that students who do not complete the respective programme they are registered for, attribute their lack of success to personal, professional and / or academic reasons. Many of the students at the SUND are predominantly female and their family commitments seem to be highly prioritised. As teaching and learning has become more student-centred and to 'promote the development of a flexible learning system, including distance education and resource-based learning' (White Paper 1997: 1.27-6), SUND has embarked on a more interactive telematic mode of teaching for postgraduate nursing programmes. Successful student completion rates is considered a priority for SUND (UNEDSA proposal, SU 2009) and therefore the findings of this study might potentially contribute

towards more efficient planning of the academic programmes, particularly in relation to ensuing teaching and learning strategies.

Koen (2007: 59) asserts that international studies consider student retention and success as dependent on factors such as 'organisational values, culture, social structure, psychological factors, social capital, academic development and social interactions'. With regard to South African studies he claims that drop-out and failure rates at higher education institutions (HEIs) highlight mostly student factors and the societal impact of apartheid as contributing to some students' non-completion rates. Drawing on Rudd's (1985) study, Koen (2007) identified the following student factors with regard to non-completion: financial insecurities, writing difficulties, inadequate research training and knowledge, competing interests such as household obligations, work commitments and poor academic preparation. There is a distinct shortcoming in addressing the impact institutional culture and organisation might have on student failure. Based on my initial reading of seminal contributions to the debate in and about postgraduate completion and non-completion rates of students in higher education generally, specifically the works of Tinto (1975), Koen (2007) and Rudd (1985), I infer that if students do not integrate academically and socially within an institution, non-completion rates might even be more excessive.

Although there is a dearth of literature available internationally on nursing attrition, literature in the South African context is quite limited – particularly at the postgraduate level. In my preliminary literature review of nursing attrition rates in SA I could not find any studies related to non-completion rates of nursing programmes at the postgraduate level. All the studies I encountered were at an undergraduate level. Student-based and institutional-based reasons were offered for not completing their programme, which varied from inappropriate vocation choice (Wright & Maree 2007) to 80.65% students feeling that they receive no institutional support from the institution (Mashaba & Mhlongo 1995). Another aspect of attrition mentioned in the South African context is the loss of nurses from the nursing profession, which seems to be attributed to retirement, morbidity, emigration (although many retain their

registration), death, movement to other jobs and especially after graduating (the number of students who qualify irrespective of their category of nursing and then do not register on their respective professional registers at the SANC). Based on inadequate research in the area of postgraduate non-completion of students, there seems to be a definite need for a study that could potentially shed light on reasons as to why nursing students do not complete their postgraduate level studies. This brings me to the statement of the problem.

1.3 Statement of the research problem and research objectives

The postgraduate programmes at SUND have shown an annual growth rate of 20% – 25% from 47 students enrolled in 2000 to 537 students enrolled in 2008 (currently there are more than 700 students in the postgraduate diploma programmes). The Interactive Telematic Education (iTE) system was implemented to accommodate the increased number of postgraduate students and to make the programmes more accessible. The completion rates for the past three years (2005, 2006 and 2007) of the five CPGDs vary between 54% – 89%, which equals 30.09% of registered students for all diploma programmes. Whereas in the same three years the completion rates for the two NCPGDs are respectively 55% and 56%, which is the majority of registered students for all diploma programmes, that is, 69.9%. Therefore, it seems as if the completion rates for the NCPGD programmes are lower than those of the CPGDs. The average pass rates in the same three years for the NCPGDs were 55.7%, whereas the average pass rates for the CPGDs were 61.69%. This success rate does not reflect poorly against the benchmarks the NPHE set for graduation rates, which for 2004 were set at 54% for contact programmes and 27% for distance education programmes (HSRC 2008). But, one of the goals of the SUND is to improve the pass rates of all programmes to 80% (UNEDSA proposal, SU 2009). The focus of this study is on the two non-clinical nursing postgraduate programmes that utilise iTE as a medium and the non-completion rates of the students that participate in these programmes.

The main aim of this research report is to explore the underlying reasons for the non-completion rates and propose possible sustainable intervention strategies that may potentially improve the completion rates of the students pursuing the NCPGD programmes at Stellenbosch University.

The specific objectives of the study are the following:

- To explore possible reasons related to social and academic integration that might influence the non-completion rates of NCPGD students at SUND;
- To explore possible reasons related to the iTE delivery mode that might influence the non-completion rates of NCPGD students; and
- To explore possible intervention strategies to enhance completion rates in NCPGD programmes.

The research question for this study can be articulated as follows: What are the underlying reasons for the non-completion of students pursuing NCPGD programmes at Stellenbosch University? The subsidiary questions that were investigated are: (1) What are the factors that contribute to the non-completion rates of NCPGD students? (2) What are possible shortcomings in the iTE system and how do they possibly contribute to non-completion? (3) How could the influence of contributing factors be minimised or eliminated to improve completion rates in NCPGD programmes?

1.4 Research methodology

Drawing on Sandra Harding's (1987) distinction between methodology and method, I use these concepts respectively as theoretical framework and procedure of inquiry. Both methodology (theoretical framework) and method (research procedure) underpin my research design (a case study design).

I find Tinto's student retention theory (1975) as an adequate framework (with interpretive links) to investigate the non-completion rates of students. He holds the view that the more socially and academically integrated students become at institutions the better their chances are for completing. His model confirms that the quality of the education and academic factors are the most influential in an institution in order to ensure successful integration and retention of students – the latter referring to interpretive ways of inquiry. He suggests that academic integration and goal commitment of students are more important than social integration and institutional commitment of students. Hence, I shall use Tinto's framework as my theoretical point of departure. Put differently, like Tinto I am also attracted to an interpretive paradigm because the postgraduate students' subjective lived experiences of their studies will be explored and analysed (in Chapters Four and Five) to determine the reasons as to why they did not complete their studies.

In order to do this I employed the case study design, which Denscombe (2003: 36) posits is used firstly, to study one or more instances (cases) of an existing phenomenon in an in-depth way; secondly, to look at the processes and relationships that exist within that context; and thirdly, to explain why certain outcomes within that specific context were attained. Furthermore, Merriam (1991: 11-13) elucidates on four fundamental features of a qualitative case study design: particularistic (where the focus is on a particular situation, event, programme or phenomenon), heuristic (which extends or illuminates the readers' understanding of the particular phenomenon), inductive (which applies inductive reasoning where the data is grounded in the context itself) and descriptive (which entails a detailed 'rich' and 'thick' description of the phenomenon that was studied). This research design will enable me to understand the contributing factors to students not completing their postgraduate diplomas as subsequent information emanates during my exploration.

The unit of analysis for this study was eight individual students of the SUND who did not complete their non-clinical postgraduate diplomas during the 2008 academic year. The participants were included in this study because they had

the following characteristics: he / she has been a postgraduate diploma student of SUND that did not complete his / her studies; participated in one of the non-clinical nursing programmes; was a registered student for the year 2008; was representative of the gender, race and age group that the demographics displayed in the 2006, 2007 and 2008 cohort of students; and they were interested to participate (feeling that they could possibly add value). Purposive non-random sampling was used, involving information rich cases which comprised of critical (theoretically important) or typical (common or average) cases with an emphasis on the latter (Terre Blanche, Durrheim & Painter 2006). According to the demographics displayed in the 2006, 2007 and 2008 cohort of students, attention was also given to gender, race, age and the specific non-clinical programme the students were registered for. Accordingly, four coloured, two white, one black and one Indian student were selected for interviews. Most of the students (19) that did not complete their diploma programme were between the ages 33 and 48, five were younger than 33, and five older than 48. Four students were chosen from the first age group and two respectively from the second and third age groups. Lastly, five students were selected from the postgraduate diploma nursing management (PGDNM) and three students from the postgraduate diploma nursing education (PGDNE) programme as the first group made up 65% of the cohort and the latter 35%.

Eight one-to-one interviews were conducted using both semi-structured and unstructured questions. All interviews were recorded and transcribed verbatim. The transcriptions, researcher's field notes and observation of non-verbal clues of participants, in addition to my interpretive analyses constitute the data construction and production for this study.

Analysing data in qualitative research is a continuous process, which means during the literature review phase I had a hunch that academic and social integration of our students with regard to our institution might play a significant role. Hence, the interview guide developed took the afore-mentioned aspect into consideration. Data analysis continued throughout data production (literally, 'collection') and intensified after all the data was constructed. I

proceeded by constructing a narrative from each interviewee's response. I then described and analysed each participant's narrative in particular focusing on reasons or factors that have possibly contributed to the non-completion of their studies by means of thematic presentation.

1.5 Ethical considerations

1.5.1 Informed consent and confidentiality

The research study involved ex-students from SUND and some of the data was found in institutional records. After having consulted my current departmental chair, she granted permission that I could interview the ex-students. I did not require any other form of ethical clearance because the students under investigation were no longer enrolled at the university, and the fact that these students were willing to share their stories which I member checked with them at a later stage of the study – that is, I sent them the transcriptions and they agreed that my analyses were authentic. In addition, these students wanted to remain anonymous. Prior to the study the participants were verbally informed regarding the aims and objectives of the study. Voluntary informed consent was required and the signing of the voluntary informed consent forms took place immediately before the individual interviews. Individual confidentiality was upheld through the use of unmarked interview schedules and codes. The participants will also be referred to by pseudonyms in this research report and future possible publications.

1.5.2 Nonmaleficence and beneficence

Since participation was voluntary, participants could withdraw or decline to participate after the study has commenced. The study poses to be beneficial to the participants where strategies will be devised in minimising them from dropping out in future studies.

1.6 Definition of terms

For the purpose of this study I need to clarify terminology that was found in the review of the literature (see Chapter Two) and which I shall utilise as key concepts in this study. These include the following: pass rate, student retention, drop-out rate / non-completion rate, academic and social integration, contributors and postgraduate diploma in nursing education (PGDNE) and management (PGDNM).

According to the Human Sciences Research Council (HSRC), in their Education, Science and Skills Development (ESSD) section, pass rate 'refers to the number of learners who passes an examination expressed as a percentage of the total number of learners who register for the examination, and who actually write the examination' (HSRC 2006).

Student retention refers to 'strategies of institutions to promote student success', whereas drop-out applies to 'the actions of individuals and implies student failure' (Koen 2007: 99). Koen also differentiates between 'neutral drop-out' (a student leaves to secure funds to continue at a later stage), 'positive drop-out' (a student transfers between institutions or achieved his or her objectives) and 'negative drop-out' (a student leaves because of failure and low motivation to succeed).

Due to the various nuances in the definitions of drop-out, the term 'non-completion rate' refers to the number of students who did not complete the postgraduate nursing diploma successfully within the time allocated – that is, one year. These students also informed SU, thus formally withdrawing from the programme and cancelling their studies.

Academic integration and social integration are core concepts explored in Tinto's retention theory (1975), which I shall use as key concepts in constructing a theoretical framework. Social integration occurs as a result of personal affiliations and daily interactions with students and the social activities of the institution, whereas academic integration refers to the

affiliation the student experiences towards the academic systems and academic communities of the higher education institution.

Contributors refer to any factors or reasons that contributed to students not completing their postgraduate nursing diploma at SUND.

The postgraduate diplomas in nursing education and management are respectively year programmes at a postgraduate level that aims to equip nursing students with specialised competencies in the areas of nursing education and management.

1.7 Study outline

This research report consists of five chapters and offers an exploration of possible factors contributing to postgraduate students not completing the postgraduate nursing diploma at Stellenbosch University's Nursing Division.

Chapter One introduced the background and rationale for the study together with a statement of the research problem. I also briefly outlined the research methodology that were employed, clarified terminology and gave an outline of each chapter.

In Chapter Two I give an overview of the literature on student completion and retention. Firstly, the impact new higher education and health legislation had on nursing education after 1994; secondly, a general overview of retention theories; thirdly, the impact of attrition and drop-out on higher education and specifically nursing; and fourthly, intervention strategies documented in the literature that may improve the completion rate of postgraduate students.

Chapter Three offers a discussion of the research methodology (theoretical framework of the study), research design (strategy of investigation, that is, a case study), and methods or data construction techniques (such as semi-

structured interviews) that were followed to investigate the factors contributing to students not completing their postgraduate diploma at SUND.

In Chapter Four I present the data that emerged from the individual interviews that were conducted and discuss how the data was analysed and interpreted through the students' own voices.

In Chapter Five the main findings are summarised, the possibilities that were explored during the interviews are discussed and possibilities for intervention outlined.

CHAPTER TWO

LITERATURE OVERVIEW OF STUDENT NON-COMPLETION RATES IN POSTGRADUATE NURSING EDUCATION

2.1 Introduction

Student completion and retention have become a major concern for higher education institutions in most parts of the world. Through higher education, nations contend their workforce has the best chance of being educated (Yorke & Longden 2004: 4). In South Africa the success of higher education institutions is also measured against the completion (or better known as throughput) rates of students. In fact any institution which fails to produce an adequate number of students is classified as underperforming and does not contribute sufficiently to the production of an educated workforce. For this reason the National Plan for Higher Education (2001) set benchmarks for higher education institutions, particularly indicating that the completion rates of students which entered the undergraduate and postgraduate academic programmes should be at least 75 percent (Bunting 2004: 31). In this chapter, I shall firstly give an overview of retention theories encountered during my literature review. Secondly, I shall highlight important developments regarding non-completion rates of postgraduate students, particularly focusing on some of the challenges Western countries face in responding to students who do not complete their qualifications they are registered for at postgraduate levels. Thirdly, I shall explore some of the challenges South African higher education institutions face in enhancing the completion rates of students, before moving on to a discussion; fourthly, of why postgraduate nursing education students (internationally and nationally) fail to complete their studies. The latter discussion would also be used in Chapters Four and Five as a background to my empirical investigation and analysis of findings respectively.

2.2 Overview of retention theories

Student retention theories abound. Earlier theories on student retention were based on a monolithic view of students devoid of issues of race / ethnicity, culture, gender, politics and identity (Tierney 1992). Later student retention theories link students' departure from higher education institutions to their inability to connect with the academic and social subsystems of such institutions (Braxton 2000). Likewise, it is widely acknowledged that higher education institutions need to grapple more earnestly with theories of student retention in order to ensure student success, particularly focusing on what practitioners (like I) need to do in order to enhance student retention (Seidman 2005). What follows from the work of Tierney (1992), Braxton (2000) and Seidman (2005), is that student retention theories in higher education have become the work of practitioners serious about finding ways to ensure student success irrespective of race, gender, culture and identity. It is here that I intend to locate my contribution through this study. In the main, student retention theories consist mostly of organisational, sociological and psychological components (Koen 2007). The common view is that student interactions and experiences during postgraduate studies will engender involvement or integration and lead to academic success, whereas on the opposite end, student interactions will spawn isolation and lead to academic stagnation.

Extensive work on retention studies was done in the United States of America (USA) and three approaches seem to influence the study of retention. The first is a psychological approach, which contends that student behaviour is influenced by psychological force fields (environment) (Seidman 2005). This view posits that the university is a social institution (environment), which impacts on the behaviour of students and depending on how well the student's commitment is to interacting with the institution will ensure the success of the student (Seidman 2005). Put differently: If the student adapts adequately to the interactions of the social environment, the student will succeed and not drop out. Another aspect of this model is that it involves stage theory conceptions, in other words, students go through different stages

in their studies and each stage has its own challenges and, depending on the mastering of each stage's challenges (competencies), the student can succeed.

The second approach involves union of the sociological and psychological development theory approach. This approach is concerned with how higher education institutions (HEIs) through organisational theories, support students to develop and grow (Braxton 2000). This theory posits that the student faces psychological and sociological challenges in terms of person-environment fit analogy, meaning that there should be an alignment in the values, norms, abilities and expectations of the student with those of the HEI in order to ensure student success and retention (Braxton 2000). Another aspect of this model is that student outcomes, like retention, depend on factors within and outside the environment (university); an 'input-environment-output' (Koen 2007: 23) function is thus performed by student support structures in the HEI to promote student success.

A third approach that has influenced the study of retention is of a sociological nature where interactions and interconnectedness within an environment is emphasised (Tierney 1992). Probably the most cited interactionalist theory on student departure from college is that of Tinto (Janes 1997, Koen 2007, Louw 2005, Mundy & Eyler 2002). Tinto's model posits that a student's family background, individual attributes and schooling impacts directly or indirectly on the student's goal commitment and institutional commitment (Tinto 1975: 94). Goal commitment is explained as the commitment a student has to complete his / her degree, whereas institutional commitment reflects a student's commitment to the specific higher education institution he / she attends. These commitments influence the academic and social integration of the student, which then either has a positive or negative effect on a student completing or the student not completing his / her studies. Academic integration entails both the grade performance (student's meeting of specific standards) and intellectual development (student's identification with the norms of the academic system) of a student, where grade performance is seen as the most important factor that will ensure the success of a student

(Tinto 1975: 104). Social integration refers to the personal affiliations and daily interactions with students, staff and the social activities of the institution. Furthermore, Tinto (1987, 1993) holds that although academic support and socialisation facilitate student success, the interconnectedness of the different functions within an institution also has a major role to play. Consequently, I find Tinto's student retention theory (1975) as an adequate theoretical framework to investigate and interpret the non-completion rates of students.

In essence, the thread that seemingly runs through all three approaches is the notion of institutional culture and socialisation. Institutional culture influences the student's performance by either promoting or impeding it and, therefore, leading to student success or student failure or drop-out. Regarding institutional culture, Hoffman (1999) argues that the multiplicity of ways in which an institution organises itself, the actions of its members and leadership, and its living (how it responds to challenges outside and inside of the institution) determine its culture. It is this institutional culture which invariably guides the ways students perform (that is, their successes, failures and retention). Barnett (1990) links institutional culture to the experiences of students in relation to both the meanings, understandings and beliefs which constitute an institution, and its academic community – the latter view is of particular importance to this study as it directly addresses the question of how students connect with the academics and programmes of study. In a different way, the institutional culture influences the manner in which students are socialised into the knowledge produced by an institution – that is, the way they respond to the curricular activities of a particular programme (Wright 1998).

2.3 International indicators of student non-completion rates and challenges faced by higher education institutions

Following the analysis of Yorke and Longden (2004: 65) on non-completion rates of students at undergraduate and postgraduate levels in the United Kingdom in 2002 one finds that 43% of students at old universities did not

complete, 35% at new universities did not complete, and 13% at colleges failed to complete. They attribute the afore-mentioned non-completion rates to issues such as the old universities being more engaged in research than the other institutions (probably because these students might have found the thesis component of the postgraduate studies more demanding than the course work component, I would argue); the new universities and the general colleges having a greater diversity of entrants and therefore a lower incidence of completion – that is, these institutions have higher non-completion rates which could possibly be attributed to them not attending sufficiently to diverse students' requirements (Yorke & Longden 2004: 65). Moreover, in the UK it was found that the more students from disadvantaged backgrounds were enrolled at institutions, the greater the chances would be that they would not complete (Yorke & Longden 2004: 69). This vindicates the fact that students from disadvantaged communities are often challenged by a lack of finances and debt (that is, a weaker economic position), as well as impoverished cultural and social capital which adversely affect their performance at higher education institutions thus causing some of them (students) not to complete.

In the main, non-completion rates can be attributed to institutionally-related causes such as a lack of pedagogical support for slow learners and little financial support to students in debt, to those causes as a corollary of the students' own lifestyles – the latter involves students being employed while simultaneously studying, while sometimes they need to 'catch-up' with modules 'failed and trailed' (Yorke & Longden 2004: 73). Hence, non-completion rates in the UK are on the high side considering the established institutional cultures of performance and success. More recently the debates about non-completion rates have taken a back seat with the focus being more on providing access to students to institutions of higher learning. Understandably, it is being considered that if pedagogically stronger students are allowed access and those whose epistemological 'inferiorities' might curtail their access, the non-completion rates of students would be significantly reduced – a situation in turn which does not necessarily prove to be the case.

2.4 South African non-completion rates at postgraduate level and some of the challenges faced by higher education institutions

In addressing non-completion rates at higher education institutions in South Africa, I rely on the Centre for Research on Science and Technology's (CREST) report (spearheaded by Mouton) published by the Council on Higher Education in 2009. Public higher education enrolment figures for 2001 showed that 9% of students were enrolled for lower postgraduate (Diploma and Honours) and 6% were enrolled for upper postgraduate (Masters and Doctoral) studies (Bunting 2004: 17). Enrolment figures have shown a steady increase from 1991 to 2005 with a plateau being reached between 2000 and 2004, and another decline during 2005 (CHE 2009: 2). The graduate figures for the same period also showed a steady increase, but were more consistent with just a slight dip during 1997 and 1999. However, in 1990 postgraduate students made up 31.3% of all graduates, but in 2005 they only comprised of 26.9% of all graduates. The decline in lower postgraduate students, from 24.8% to less than 20% of all graduates contributed to this sharp decline, although the upper postgraduate students increased from 6.3% to 7.7% in the same period (CHE 2009: 3). South Africa was thus producing fewer postgraduate students in 2005 than during 1990 (CHE 2009: 3).

Challenges highlighted in the CREST report (CHE 2009) were firstly, pile-up effects (historical enrolments from 2000 to 2005 were 37% for Masters students and 59% for doctoral students, graduation rates for Masters remained constant but doctoral graduation rates have declined from 14% to 12% and are more common amongst female students, whereas figures are higher for African and Coloured students at the Master's level, but no race differences found at the doctoral level); secondly, the burden of supervision (although the number of postgraduate students have doubled there has only been an increase of 40% in permanent academics, which put the ratio of academics to students at 1:5.2 at Masters level and 1:2.2 at doctoral level, which respectively were 1:3.8 and 1:1.3 previously); thirdly, participation rates (only 0.05 doctoral degrees per 1000 of the age group (25-34) are found in the Science and Engineering fields, which does not compare favourably with

other developed countries); and lastly, the age of students at graduation (the CREST report shows an ageing academic and scientific population, which will compound the pile-up effect, since the same study showed that the older the postgraduate students are, the longer they take to complete their postgraduate studies).

Koen (2007: 14-15) links the dominant themes for failure and drop-out of university students across the higher education system in South Africa to six 'structural sociology' perspectives: rational economic (inadequate finances), resources scarcity (inadequate support), ineffective admission policies (open door admission policy and no competency-based assessments), schooling deficits (inadequate preparation), inadequate adaptation and inappropriate vocation choice (limited guidance at school and career guidance at university). Koen (2007), like Tierney (1992), Braxton (2000) and Seidman (2005), further argues that the institutional culture and academic practices of a university create the framework where students and academics interact and provide the foundation for integrating students into the university. Like Barnett (1990), he contends that students' success is dependent on the quality of institutional organisation, organisational resources and the quality of academic and institutional provision. Koen's model emphasises 'constructing intimate and collegial learning experiences and exposing students to the responsibilities and identities associated with academic life' (2007: 104).

Causes of student retention according to Bunting (2004) are a mixture of student and institutional related factors of which many of the student societal factors can be attributed to the impact of apartheid. This is echoed by Koen (2007) who asserts that South African studies offer no conceptual explanation or theoretical framework for student retention, but considers student retention at higher education institutions (HEIs) dependent on student factors and the societal impact of apartheid.

A functional framework was recently developed by Louw and Bitzer (2008) to improve understanding of student drop-out and to prevent students' dropping out in their first year at tertiary agricultural institutions. Although this

framework was developed for first-year students, many of the factors mentioned can be applied to postgraduate studies as was confirmed by Koen (2007). At least five of the six structural sociological perspectives identified by Koen, which he posits are the main themes for student failure and drop-out in the HEIs in South Africa, were found in the study by Louw and Bitzer (2008). Those are: resources scarcity (inadequate support), ineffective admission policies, schooling deficits (inadequate preparation), inadequate adaptation (inadequate preparation) and inappropriate vocation choice (limited guidance at school and career guidance at university). Louw and Bitzer's (2008) findings also correlate with international studies (Tinto 1975, Peelo 2002), which found that numerous social and academic factors cause students to drop-out. These factors prevent learning, social and academic integration and thus lead to students not completing their studies. The framework focuses on the shortcomings and obstacles regarding the background of the student, the student-related social and academic factors as well as the institution-related social and academic factors. The question arises: Are the same factors present which result in students in postgraduate nursing education programmes not to complete their studies?

2.5 Non-completion rates of postgraduate nursing education students (internationally and nationally) and challenges they have encountered

My literature search revealed a few examples on postgraduate non-completion rates in nursing education, in the international as well as South African context. Internationally most of the studies found involved web-based learning or the use of technology in nursing education (Atack & Rankin 2002; Horiuchi, Yaju, Koyo, Sakyo & Nakayama 2009). I have thus made use of some studies that focus on undergraduate completion and which have shown similar trends in non-completion rates of nursing students.

Nationally and internationally nursing is facing tremendous challenges. Two of the major challenges are: firstly, a shortage of nurses, and secondly, the fact

that nurses is an ageing population. In the US the nursing deficit in 2010, 2015 and 2020 will be 12%, 20% and 29% respectively (Brown & Marshall 2008: 21; Ramsburg 2007: 12). The average age of a nurse is 43 and only 11.8% of registered nurses were under the age of 30 (Ramsburg 2007: 12-13). While nurses' training at higher education institutions in the United Kingdom (UK) has experienced a growth of 40% over seven years, they also at the same time experience non-completion rates ranging from 6% to 56% with their undergraduate programmes (Moseley & Mead 2008: 470; Waters 2008: 12-13). The estimated monetary cost of non-completion per annum has been calculated at £99 million (Waters 2008: 12). This excludes the impact it has on the students and their families, the higher education institutions, the funding bodies, the future employers and the patients who are deprived of the competencies the qualified students would have provided (Moseley & Mead 2008: 470). Higher Education institutions in the UK are also required to maintain non-completion rates of below 13% otherwise they can incur financial penalties. Together with the US and the UK, Australia is also experiencing nursing shortages where the average age of nurses was 45 in 2005 (Sweet 2008: 25). Australia's challenge is further compounded by years of underfunding of their nursing education. Many of these challenges are experienced in nursing education in South Africa as well, but will be explored later on in this chapter. In order to address the above challenges the study of students not completing their studies becomes paramount.

Factors encountered in the US (Porter 2008: 3-5) that had a direct effect on student retention include: pre-admission testing (different tests can be applied, for example, tests to find out how students learn, students' academic ability and social skills, but the most important aspect is how the institution applies these tests); English as a second language (nursing requires a high degree of verbal and written skills and students find it difficult to express themselves and thus become discouraged when they get low marks or fail their coursework); and cultural diversity (communication becomes problematic especially where language barriers are experienced) and grade point average (the higher the scores of the students the better the retention rate, but the drawback encountered is that it tests knowledge of high school content and

the non-traditional student is then disadvantageded). The non-academic factors highlighted are that of family responsibilities, internal stressors, work schedules, financial and health concerns (Ramsburg 2007; Stewart 2005: 8). Cooley's study (2008: 593) on the motivation as to why nurses study further and the impact of studying on their personal and work lives, recommends careful consideration of these two factors before nurses embark on further studies and also implores lecturers to offer support and facilitate solutions on how the students can overcome these barriers. Although an Irish study it is also highlighted in UK (Deary, Watson & Hogston 2003: 73) and US studies (Ramsburg 2007; Stewart 2005: 8). Deary *et al.* (2003: 79) found personality factors such as conscientiousness and agreeableness to influence completion. Students who demonstrate these two traits (conscientiousness and agreeableness) are expected to be successful in completing their programmes.

Although not explored in my research report, I need to include findings on non-completion concerning courses presented through the Web. Health care systems nationally and internationally are developing at a rapid pace and continuous education for all nurses is imperative. This poses a challenge as most of these students have work and family commitments and some stay a considerable distance from higher education institutions (Atack & Rankin 2002: 458; Horiuchi *et al.* 2009: 141). The two programmes under study also exclusively make use of interactive telematic education (iTE). Atack and Rankin's study (2002: 463) revealed a non-completion rate of 41% (25% that enrolled did not start the course and 16% dropped out during the course) although the reasons for non-completion included personal reasons, time constraints and work demands and not only because technical difficulties were experienced concerning the Web – a situation which is similar to traditional on-campus students. Horiuchi *et al.*'s study (2009: 146) compared a post-basic nursing face-to-face group with a web-based group and the non-completion rates were 31.2% and 17.8% respectively. Of value to SUND is that there were no significant differences in the learning outcomes of the face-to-face group and those of the web-based group, which means the blended approach to learning embraced by SUND is a step in the right direction in

ensuring student success. This brings me to the discussion of non-completion rates in the South African context.

Since 1994 major transformations took place in the higher education (HE) sector in South Africa. I shall give a brief overview of how the transformations impacted on Nursing Education (NE). Prior to 1994 there existed a dichotomy in NE where degrees were offered at universities, which formed part of the HE system and where quality is assured by both the South African Nursing Council (SANC) and the higher education sector. The nursing colleges (NC) again offered diplomas, which formed part of the Department of Health (DoH) and quality was assured only by the SANC. In 1997 the HE Act No. 101 made provision for the NCs to be relocated to the HE sector. The National Plan for Higher Education (2000), which emanated out of the Education White Paper 3: A Programme for Higher Education Transformation (1997) through one of the goals: the building of 'new institutional and organisational forms and new institutional identities and culture' (White Paper, 1997: 2.42-2.45), resulted in the rationalisation of the college sector and saw many nursing colleges closed, merged or being incorporated into universities or technikons (now known as universities of technology). Another goal: 'to provide a full spectrum of advanced education opportunities for an expanding range of the population ...' ensured that HE institutions increased participation and graduate outputs. The new Nursing Act No. 33 of 2005 provides the legislative framework to review the existing scope of practices and curricula to align itself to the needs of the newly transformed HE and health care system as there also has been a shift in the traditional hospital-based health care system to a primary health care focus, which aims to enhance the delivery of healthcare to the rural and sometimes most needed sector of the population.

Nursing in South Africa is also facing a number of challenges, which include the burden of disease, a decline in the standards, image and status of nursing, deteriorating working conditions, a perceived shortage of nurses, an ageing workforce (60% of professional nurses are aged 50 and older), nurse leadership and more specifically linked to my study, nursing education and a high nursing attrition rate (Breier *et al.* 2009: 1; DoH 2008: 2). The

professional registers of the South African Nursing Council (SANC) between 1997 and 2006, show a workforce attrition rate of 65% (Breier *et al.* 2009). The Nursing Strategy for South Africa (2008: 8) was developed to address these challenges and it is based on the principles of the Human Resources for Health Planning Framework, mandated by the National Health Act No. 61 of 2003. This strategy consists of six strategic focus areas of which nursing education and training is one. Several strategic objectives have been identified for nursing education and training to be successful, but this study will be important for at least three of these objectives. These include, firstly, to improve the quality of nurse educators; secondly, to recruit and retain nurse educators; and thirdly, to promote continuing professional development of nurses and nurse educators.

Through my literature search I did not encounter any studies on postgraduate nursing attrition, but only attrition at an undergraduate level. Wright and Maree's (2007: 596) study of undergraduate nursing drop-out at a university of technology concur with Koen's findings of inappropriate vocation choice (students perceived a nurse to function at an affective level - 'myth' - and that the cognitive domain - 'reality' - is not as important). Students' misconceptions regarding nursing and nurses resulted in them dropping out because they could not cope with the rigorous academic work loads. The authors in this study focused on choosing the best candidates for a nursing degree, thus implying that there are no institutional factors that may play a role in students not succeeding. Manzini (1998: 283) posits that drop-out will occur when there is not cohesion in any one of the following: the relationship between the student, the nurse educator, the learning material and the learning environment. An earlier study (Mashaba & Mhlongo 1995: 372) of university students is more in line with international nursing literature and other South African higher education studies, that is, the factors causing non-completion are student-based (such as poor academic performance, wrong vocation choice and personal or emotional challenges) and institution-based (such as the nature of the course, communication issues, perceived non-support from academic and non-academic staff and workplace concerns). International and

national nursing and higher education studies on attrition thus support Tinto's interactionalist theory.

This brings me to the next section which involves the intervention strategies documented in literature to improve the completion rate of postgraduate studies.

2.6 Intervention strategies documented in literature to improve completion rates of postgraduate students

What can lecturers do to ensure that students complete their programmes of study? In any given programme there will be two groups of students who express the desire to leave the programme. Firstly, we would have a group of students that came to the realisation that the programme does not meet their expectations, in other words the reality of the speciality is different to what they thought it would be. In this scenario we can play an advisory role. Secondly, we will have a group of students that for various reasons as was discussed in the previous section will leave the programme unless we intervene positively and put measures in place to retain those students. Retention programmes vary, but commonalities occur which will be espoused upon in the next few paragraphs.

Tinto (1993) identified six principles an institution needs adhere to in order to contribute towards attaining a successful retention programme. Firstly, the institution's retention policy should start immediately (for example orientation programmes); secondly, the students should be the institution's primary concern; thirdly, institutions should promote and facilitate the required academic skills; fourthly, institutions should interact with students formally but also on a personal level; fifthly, retention of students should take place systematically; and lastly, education should be the ultimate goal of retention programmes. These views are corroborated by the major contributions of Braxton (2000) and Seidman (2005) in particular foregrounding students' experiences in relation to the institutional culture.

Many of the above principles seem to be incorporated in nursing education programmes. For example, Ramsburg (2007: 12) describes a retention programme for first year nursing students where the academic failure rate has decreased by 50%. This programme includes: creating a sense of community (orientation), faculty advisement, academic support services, pre and post review, strive for success (a one-credit-hour, ten week course such as offering study tips, critical thinking strategies, time and stress management, and so on) and opportunities for social integration (Ramsburg 2007: 15). McLaughlin (2008: 84) added another component that of using existing student data to make decisions to enhance functional and psychological support to students. At risk students are identified early in a programme and interventions started immediately instead of waiting for the summative assessment results of students. Utilising innovative teaching strategies, for example, could remedy student under-achievement. Atack and Rankin's study (2002: 463) strongly recommend assessing computer literacy and internet skills prior to commencement of a web-based course, an orientation session where web-based learning is introduced and having an on-site facilitator to facilitate learning. Studies conducted on students not completing their programmes proposed preventative as well as curative strategies to prevent students from dropping out (Manzini 1998: 50).

2.7 Summary

In this chapter I have identified three major aspects which impact student completion and retention rates. Firstly, I have shown how institutional academic support structures could enhance student completion and retention rates. Here I have specifically shown that students have a better chance to complete their qualifications if the institution's academic support structures are favourably utilised such as the implementation of admission policies to encourage students to make more informed vocational choices, provision of tutorial support, financial aid schemes, and effective time management strategies for coping with their studies. Here I am reminded of both Koen's (2007) and Louw and Bitzer's (2008) study in relation to student completion

and retention rates. Koen's (2007) emphasis on the lack of financial support, inadequate admission policies, lack of resources, student unpreparedness for programmes, and poor vocational choices, as well as Louw and Bitzer's (2008) emphasis on inadequate student support mechanism, student unpreparedness, and inappropriate vocational choices of students are all aspects which relate to the lack of infrastructural support. These contributions do not necessarily and secondly, invoke the application of values (I have alluded to) such as conscientiousness, motivation, commitment and agreeableness which would reinforce students' desire to complete their studies. This is an aspect I wish to explore in more detail in relation to an analysis of my findings in Chapter Five. Thirdly, and to my mind by far the most important aspect which determines student completion and retention involves how they are taught and how they learn – an aspect which does not receive adequate attention in the studies of Koen, Louw and Bitzer and others. To a lesser extent the works of Tierney (1992), Braxton (2000) and Seidman (2005) refer to students' learning as an issue which requires attention, but not specific to nursing education. In this regard I have alluded to the lack of appropriate assessment strategies to consistently judge students' performance during the duration of a nursing education programme. This is an aspect which shall be addressed in Chapter Five as I shall endeavour to contribute towards the debate and practices about student completion and retention.

To sum up, this literature overview foregrounds at least three major aspects which impact student completion and retention rates: institutional or infrastructural support, values initiation, and teaching and learning practices. The literature suggests that the first aspect is always emphasised as significant to ensure student completion and retention. I do not deny that addressing institutional culture ought to be a priority if institutions were to enhance their student completion and retention rates. Yet, in my view, such an initiative is not sufficient. I contend that the aspects of values initiation and teaching and learning pedagogy are underplayed. I think that the potential contribution of this research report lies in exploring these latter two aspects – an activity which I shall embark on in Chapter Five. Suffice to say, with these

major aspects in mind which influence students' performance in relation to completion and retention, I now move on to the next chapter where I shall discuss the research approach, design and methods for generating data I have used for this study.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

In this chapter I explore the research objectives, methodology, method and research design which were followed to investigate possible reasons pertaining to academic and social integration, as well as the interactive telematic education (iTE) delivery mode that impacted on students not completing non-clinical postgraduate diploma (NCPGD) programmes.

3.2 Aim and objectives of the study

The main aim of this study was to explore the underlying reasons for the non-completion rates and investigate possible sustainable intervention strategies that may potentially improve the completion rates of students pursuing the NCPGD programmes at Stellenbosch University.

The specific objectives of the study were:

- To explore possible reasons related to social and academic integration that might influence the non-completion rates of NCPGD students at Stellenbosch University Nursing Division (SUND);
- To explore possible reasons related to the iTE delivery mode that might influence the non-completion rates of NCPGD students; and
- To explore possible intervention strategies that might enhance completion rates in NCPGD programmes.

3.3 Theoretical framework

Drawing on Sandra Harding's (1987) distinction between methodology and method, I use these concepts respectively as theoretical framework and procedure of inquiry. Both methodology (theoretical framework) and method (procedure) constitute my research design (case study).

3.3.1 An Interpretive Paradigm

My methodological approach in this study is interpretive. Terre Blanche, Kelly and Durrheim (in Terre Blanche, Durrheim & Painter 2006: 273) posit that interpretive research explores people's subjective realities, that is, their feelings, value and belief systems, intentions and reasoning, by interacting with them within their own worlds, trying to understand and make sense or interpret their own words through qualitative research methods and designs. For them two principles are essential: firstly, that interpretive research involves 'understanding in context', which means that the actions human beings embark on will be influenced by their personal and social realities and thus need to be taken into account when inferences are made about them; secondly, the researcher is the 'primary instrument' in attaining and interpreting data, meaning the researcher needs to develop emphatic listening skills and self-reflection to make sense of the emerging data.

This approach thus allows me an in-depth exploration and description of selected students, comprising at least eight non-completed students. I shall not only explore their self-understandings through individual face-to-face interviews, but try to understand and interpret their subjective, lived experiences that led them into not completing their particular NCPGD.

3.3.2 Tinto's student retention theory: An instance of interpretivism

I found Tinto's student retention theory (1975) as an adequate framework (with interpretive links) to investigate the non-completion rates of students. He holds the view that the more socially and academically integrated students

become at institutions the better their chances are for completing. His model confirms that the quality of the education and academic factors are the most influential in an institution in order to ensure successful integration and retention of students – the latter referring to interpretive ways of inquiry. So, I used Tinto's framework as my theoretical point of departure. Put differently, like Tinto I was also attracted to an interpretive paradigm because the post-graduate students' personal experiences of their studies were explored and analysed to determine the reasons as to why they did not complete their studies.

3.4 Research design

Durrheim (in Terre Blanche *et al.* 2006: 36) identifies a research design as a strategic framework that guides research activity, ensuring that sound conclusions are reached. To maximise the validity of research findings, four dimensions guide one's decision during the application of the research design. Firstly, the purpose of one's study; secondly, the theoretical paradigm utilised; thirdly, the context in which the study situates itself; and fourthly, the appropriate research techniques to gather and analyse data (Terre Blanche *et al.* 2006: 37).

3.4.1 A case study design

Taking the above into consideration I utilised the qualitative case study design as proposed by Merriam (1991: 9) who elucidates it as follows: it is a specific phenomenon / instance or case such as a program, an event, an institution, a person, a process or a social unit that is studied intensively and holistically, which answers to the question 'why'.

Since the aim of my study was to explore the underlying reasons why students do not complete their NCPGD programmes, the specific case I explored was a group of eight individuals who participated in this program during 2008 and failed to complete. A qualitative framework was preferred as

the aims were to gain understanding through information as it emerged from the individual interviews, exploring the processes and relationships, within a specific context (non-completion of NCPGD programmes) and explain and describe why and how this outcome was attained, rather than to test a hypothesis.

This theoretical framework relates to four fundamental features of a case study design as identified by Merriam (1991: 11-13) that is, firstly, particularistic, which focus on a particular situation, event, program or instance; secondly, descriptive, meaning that the final product of the case study will entail a detailed (rich thick) description of the instance that was studied; thirdly, heuristic, where the readers' understanding of the instance studied is clarified; and fourthly, inductive such as when inductive reasoning is applied, that is, data is grounded in the context itself.

3.5 Target population

3.5.1 Unit of analysis

The unit of analysis in this study was eight individual students of SUND who did not complete their postgraduate diploma during the 2008 academic year. Five of the students were registered for the postgraduate diploma in nursing management (PGDNM) and three students were registered for the postgraduate diploma in nursing education (PGDNE). All eight students discontinued their studies voluntarily. Two of the eight students continued with studies in 2009; one changed her programme from PGDNE to PGDNM at SUND, but the other student is pursuing a psychiatric diploma through another institution. None of the others is studying at the moment. Currently the eight individuals are working in different health care facilities in the Western Cape Province (WCP).

3.5.2 Selection of cases

The focus of this study was the 2008 cohort of students that did not complete their non-clinical postgraduate diplomas (NCPGDs). 29 students did not complete and a purposive non-random sample involving potentially information rich cases which comprised of critical (theoretically important) or typical (common or average) cases with an emphasis on the latter (Terre Blanche *et al.* 2006) was done. Kelly (in Terre Blanche *et al.* 2006: 289) posit that for a homogenous group, experience has shown that six to eight participants will suffice, thus eight participants were selected. I also chose the 2008 cohort of students because I felt the students' experiences were recent and that it would be easier for them to reflect and share the contributing factors of why they did not complete their diplomas.

The participants were included in this study because they had the following characteristics: he / she has been a postgraduate diploma student of SUND that did not complete his / her studies, participated in one of the non-clinical nursing programmes, was a registered student for the year 2008, and was interested to participate (feeling that they could add value) in the research.

According to the demographics displayed in the 2006, 2007 and 2008 cohort of students, attention was also given to gender, race, age and the specific non-clinical programme the students were registered for. Nursing as a profession is dominated by women, but more and more males are entering the profession. For this reason I wanted to include males, but the 2008 cohort allowed for only one male to be selected as he was the only one who did not complete. The Western Cape Province differs from the other eight provinces in South Africa since it is the only province where the coloured community is in the majority, presenting more than 55% of the cohort of students. Accordingly, four coloured, two white, one black and one Indian student were selected for interviews. Most of the students (19) that did not complete their diploma were between the ages 33 and 48, five were younger than 33, and five older than 48. Four students were chosen from the first age group and two respectively from the second and third age groups. Lastly, five students

were selected from the PGDNM and three students from the PGDNE programme as the first group made up 65% of the cohort and the latter 35%.

3.6 Research procedures: empirical inquiry and narrative

A request was made by SUND academics to look into possible factors that influenced the throughput rate of the programmes (PGDNM and PGDNE) involved in the ITE system. But, after consultation with my supervisor I decided to narrow the study to include only the non-completion rates of the afore-mentioned programmes. I corresponded via email with the relevant individuals to gain permission and access to institutional records that reflected the following student information: registered students for the PGDNM and PGDNE programmes during 2005, 2006, 2007 and 2008, demographics, contact details and their status in the programme, that is, whether they are still busy, have passed or discontinued without receiving their qualification.

After establishing the units of analysis through purposive non-random sampling, I contacted the eight students telephonically, introduced myself and explained the aim and objectives of the study and requested them to participate in the study. Some responded positively from the outset and venues, dates and times were confirmed with some requiring more time to make a decision. The information and consent form (Appendix A) regarding the study was emailed to the participants who had email addresses and the ones without addresses agreed to go through the information and sign the consent forms prior to starting the interviews. The participants were also informed that the interviews would be recorded and later transcribed.

The interviews were conducted at a venue most convenient for the participants although most agreed that it could take place at SUND. Seven of the interviews were conducted in the proposed time frame of May 2009, but one participant decided to withdraw with the result that the last interview was held during the month of June.

Transcriptions of the interviews were started during May and completed in July of 2009. I started analysing the data as soon as I completed an interview, and continued with it throughout the transcription period. The final analysis was formulated during August involving a detailed description of each individual case in the form of narratives followed by thematic presentation of the data.

3.7 Method of data collection

Interviews were used in this study to construct data. In conducting interviews I could explore the participants' experiences, their feelings and opinions, which allowed for in-depth and detailed descriptions of their perspectives on why they did not complete their postgraduate diploma. A semi-structured interview guide (Appendix B) was used and one-to-one interviews were conducted.

3.7.1 Interview guide

During the completion of my literature review, I drew on both information inferred during discussions with SUND academics and my personal experiences. It seemed as if Tinto's retention theory of academic and social integration might play a significant role into understanding the non-completion of students. Since the study of Louw and Bitzer (2008) already formulated questions, which contains the core aspects of academic and social integration, his questions formed the foundation of my interview guide with two minor adjustments. Firstly, question one was asked to put the participant at ease, but also to establish important information and secondly, question five addressed the ITE medium utilised in the two programmes. This question replaced the group integration question of Louw and Bitzer (2008), yet aspects of group interaction came to the fore with this question during the interviews (Appendix C). Altogether seven open-ended questions were used as a guide to explore why the students did not complete and at the end of the interview the participants were invited to add anything they thought could add value to the study.

3.7.2 One-to-one interviews

Eight one-to-one interviews were conducted using a semi-structured interview guide. The semi-structured one-to-one interview allowed me flexibility in addressing the issues of concern for this specific study, but also allowed the interviewees' to respond to thoughts being elicited by the issues raised. Denscombe (2003) raises the following advantages of this particular type of interview:

- It is easy to arrange as only two people are involved;
- A specific participant's experiences, feelings and opinions are captured;
- It is easier to guide one participant through an interview than a group; and
- Transcribing is easier when it involves only two people's voices.

Denscombe (2003) mentions one disadvantage of this interview method which involves the limited number of views and opinions that it may generate. The purpose of this study focuses on individuals' lived experiences and I contend that every individual's experience may be similar in some instances, but very few will have exactly the same views and opinions.

Prior to every interview I introduced myself, and went through the information and consent form to clarify any uncertainties. This form explains the aim and objectives of the study and also ensures the confidentiality of the participant. The consent form was then signed and a copy was given to the participants if they requested one. I also went through the main issues on the interview guide to put the participants' more at ease. Since one participant withdrew I had to do one interview telephonically because the participant was from the Northern Cape and did not have access to the internet in which case I would have done and recorded the interview via Skype. My part of the interview was thus recorded, but her comments I had to write down after each question. She also gave her consent telephonically.

All the interviews were recorded on an audio tape and digital voice recorder. I also wrote a reflection after every interview. The interviews were then transcribed verbatim. The telephonic interview was transcribed immediately to attain an accurate version of the interview. The transcribed interviews, my reflection notes and observation of non-verbal clues of participants made up the data for this study.

3.8 Data analysis

Unlike quantitative research, analysing data is a continuous process in qualitative research and starts with the initial observation and reviewing of the literature (Merriam 1991: 119). Following the ideas of Creswell (2007) 'data analysis involves making sense out of text and image data'. It involves preparing the data for analysis, conducting different analyses, gaining understanding, representing the data, and interpreting the data (Creswell 2007). Using this approach to data analysis I constructed the data from interviews, analysed it for themes or perspectives, and reported on these themes (Creswell 2007: 184). During my discussions with students and SUND academics and the literature review phase, I had a hunch that academic and social integration of our students with regard to our institution may play a significant role and hence developed an interview guide taking this into consideration. Data analysis continued throughout data collection and then intensified after all the data was constructed. For the duration of the interviews being conducted, I would in subsequent interviews also focus on aspects that came up in the previous interviews. In my reflections on the interviews I also noted aspects, for example, body language that added to more detailed interpretation of the data. I started transcribing the interviews as soon as it was conducted and also wrote down ideas, themes or perceptions being evoked whilst busy transcribing. My data was thus arranged into the transcriptions, reflections and a memo sheet which reflected my ideas.

In the final analysis of the data I proceeded by constructing a narrative from each interviewee's response. Why narratives? A narrative account allows for

issues to surface in a holistic, contextual in-depth manner, but with transparency or openness. I described and analysed each participant's narrative in particular, focusing on reasons or factors that have possibly contributed to the non-completion of their studies. Data was also presented thematically.

3.9 Ethical considerations

The research proposal for this study was submitted to the Committee for Master's and Doctoral Proposals at the Faculty of Education, Stellenbosch University. It was approved in March 2008 with minor corrections. This research study involved ex-students from SUND and some of the students' information were obtained from institutional records for which permission was requested and granted.

3.9.1 Informed consent and confidentiality

Prior to the study the participants were verbally informed regarding the aims and objectives of the study and voluntary informed consent was requested. An information and consent form was also emailed to participants who had email addresses and who agreed to engage in the study. Before each interview commenced the information and consent form was discussed in detail to ensure that all participants understood and were well-informed about the study. The participants were assured that participation is voluntary and that they could withdraw at any stage, even during the interview. The signing of the voluntary informed consent forms took place immediately before the individual interviews.

Participants were assured of confidentiality as the data was available only to me and the audiotapes were stored in a safe place. The data was transferred from the voice recorder and saved according to codes. The interview schedules were unmarked and coded. The participants will also be referred to by pseudonyms in published reports.

3.9.2 Nonmaleficence and beneficence

Since many students put personal as a reason when leaving without completing their programme, sensitive issues may have surfaced during an interview. Therefore participants were assured that participation was voluntary and they could withdraw or declined to participate before, during or after the study commenced.

The study posed to be beneficial to the participants where strategies were devised in minimising them from not completing in any ensuing studies.

3.10 Validity and reliability

The task of validation in educational research is to ascertain a degree of trust in data construction (Lather 1986: 67). In other words, if one wants to ensure that the data constructed is credible, a process has to be followed to validate or falsify the data (Lather 1986). Such a process of establishing the trustworthiness of data is referred to as triangulation (Lather 1986). The process which I followed after the data were constructed from the interviews was to confer with participants about the validity of the transcripts. Moreover, Merriam (1991: 120) posits that the thoroughness of a qualitative case study depends on 'the researcher's presence, the nature of the interaction between researcher and participants, the triangulation of the data, the interpretation of perceptions and rich thick description'. She further elaborates that the more grounded your findings are in the detail the more credible and trustworthy your analysis would be.

3.10.1 Validity / Credibility

Validity speaks to the accuracy and appropriateness of the data constructed. In qualitative research this seems to be a strength, as the lived realities of the participants are being represented by me (the researcher) who aims to

construct how the participants view themselves in relation to their experiences.

Merriam (1991: 169) discusses six strategies that can ensure internal validity (credibility) in qualitative research:

- Triangulation, which involves multiple researchers, multiple data collection techniques or multiple data analysis methods to corroborate the emerging findings;
- Member checks meaning taking the interpreted data back to the sources and validating its accurateness;
- Peer examination where colleagues opinions are asked on emerging interpretations;
- Long-term observation of a particular instance under study to increase the validity of the findings;
- Researcher's biases where the researchers clarify their assumptions, theoretical orientation or worldviews at the outset of the study; and
- Participatory modes of research, which involves the participants in all stages of the research study.

In this study I clarified my assumptions and theoretical orientations about the study in Chapter One, as well as completing member checks and soliciting colleagues' opinions on emerging interpretations.

3.10.2 Reliability / Dependability

Reliability focuses on the degree to which the findings can be repeated using the same data collection and data analysis methods. Two areas make this difficult in qualitative research, that is, firstly, the researcher's 'self' is inexplicably link to the data collection method, and secondly, no two peoples' lived realities will exactly be the same. Lincoln and Guba (in Denscombe 2003: 298) thus recommend dependability, which proposes transparency in the research procedures and decisions reached so that other researchers can evaluate the research study in terms of 'reputable procedures and reasonable

decisions' attained, triangulation and the researcher's position. Guba and Lincoln (in Merriam & Caffarella 1999: 171) also posit that it is 'impossible to have internal validity without reliability'; if you can thus demonstrate internal validity you will simultaneously achieve reliability.

3.10.3 Generalisability / Transferability

Generalisability refers to the extent a specific research study's findings can be applied to other instances, which poses to be problematic for especially the case study design as it aims to understand a particular instance in-depth and not 'what is generally true of the many' (Merriam & Caffarella 1999: 173). Lincoln and Guba (in Denscombe 2003: 299) thus propose the process of *transferability*, where a reader should look at what information in a particular study can be used in *comparable* instances and not in *all* instances. To improve generalisability and transferability of your research findings, Merriam and Cafferella (1999: 177) suggest providing a rich thick description, establishing the typicality of the case and conducting cross-site or cross-case analysis. Hopefully the research findings of this case study will be transferable but not necessarily generalisable because students' non-completion rates at one institution will be affected differently at another institution. Such a situation can be ascribed to differences in curricula, course presenters and or socio-economic conditions which impact students' learning. Moreover, this study is interpretive so to assume that findings ought to be positivistically generalisable would in any case be incommensurate with the practice of interpretive inquiry.

3.11 Summary

Since I have chosen the case study design to explore my research study, this chapter served to discuss the purpose of my research, the theoretical paradigm I used to inform my research, the context in which the research was carried out, and the data collection and data analysis methods that were utilised. My arguments and elucidations of my research design and case study have been mostly interpretive – that is, I have attempted to articulate my research methods and methodology consistent with my own understanding and bias towards interpretivism.

In the following chapter, I shall present the thematic analysis and discuss the constructed narratives of the eight interviewees.

CHAPTER FOUR

ANALYSIS OF DATA

4.1 Introduction

In this chapter I shall attempt to construct and reconstruct the narratives of postgraduate students who left the NE programme. I understand that many responses have been subjective (from the vantage points of individuals). Yet, if SUND wishes to reconceptualise, restructure and reproduce a NE programme for postgraduate students who can complete their programme of study then it has to attend to some (if not all) of the limitations of the programme which emanated from the narratives of the past students whom I interviewed. Although I have some idea of what these variables might be (why students are not retained and why they do not complete the programme) it would be quite apposite to look at their actual voices – that is, listening to their narratives in order to give sufficient and due attention to a reconstruction of postgraduate NE at SUND. But first, a word on my methodology employed.

4.2 Methodology

Data were collected through semi-structured interviews held with eight ex-postgraduate students at different venues. The rationale for conducting interviews ‘away from’ the university environment was to establish an atmosphere whereby interviewees felt comfortable and the surroundings were assumedly less intimidating. As became evident, interviewees responded with ease and by and large remain unperturbed about the authoritarian position often associated with that of a lecturer (in this instance, I, the interviewer). After the interviews which have all been recorded I transcribed the interviewees’ responses which have been fairly lucid and succinct in relation to the questions asked. Subsequently I analysed the data which eventually culminated in the construction of my findings.

Following Creswell's (2007: 184) procedure of decoding the following findings were generated by an analysis of the themes or issues as it emanated during the interviews. Decoding involves the following steps: getting a sense of all transcriptions; writing down thoughts of the most interesting transcription; clustering topics together; organising the topics; finding an appropriate wording for the topics; and performing a preliminary analysis (Creswell 2007: 86). I have followed the afore-mentioned procedure as discussed below.

4.3 Background information about the participants

Eight individual students of Stellenbosch University Nursing Division (SUND) who did not complete their non-clinical postgraduate diploma during the 2008 academic year participated in this study. Five of the students were registered for the postgraduate diploma in nursing management (PGDNM) and three students were registered for the postgraduate diploma in nursing education (PGDNE). All eight students discontinued their studies voluntarily. Two of the eight students continued with studies in 2009; one changed her programme from PGDNE to PGDNM at SUND, and the remaining student is pursuing a psychiatric diploma through another institution. None of the others is studying at the moment. Specific details of the eight participants will be presented in the next section. In line with Creswell's strategy of coding, I have commenced with participant six's transcription for reasons of interest and scope, that is, being the shortest transcription, followed by participants two, seven, five, one, three and eight.

4.3.1 Participant six (P6)

P6 is a thirty-seven year old female student who resides in the Western Cape Province. She registered for the postgraduate diploma in nursing management because she felt stagnant at this stage in her career and wanted to develop professionally. She qualified as a professional nurse in 1998. For purposes of this study and the fact that previous student retention studies

have been blind to issues of race (Tierney 1992) I used the racial categories of the apartheid past and the participant I interviewed is classified as coloured. P6 is married with four children aged five, six, eight and 14 years. She is currently working as a clinical facilitator at the Cape Peninsula University of Technology and work from Mondays to Thursdays. The participant is Afrikaans speaking, and consequently the interview was conducted in her home language.

4.3.2 Participant two (P2)

While P2 was registered as a postgraduate diploma student in nursing management he worked full-time as a researcher in tuberculosis at Karl Bremer hospital (Full-time meant the participant worked forty hours a week from Monday to Friday). Currently he works part-time and just completed a night duty shift before he came for the interview. P2 is a fifty-one year old and the only male student that was interviewed. He also resides in the Western Cape Province and is classified as coloured. The participant qualified in 1999 as a professional nurse.

Although the first and overall impression the student portrayed was a laissez-faire attitude towards his studies, during the interview an underlying sense of being overwhelmed by certain aspects of his studies seemed to have emerged. The participant felt that his studies impacted adversely on his social life. P2's motivation for continuing with postgraduate studies was more externally influenced by other colleagues registered for the same diploma.

4.3.3 Participant seven (P7)

P7 is one of the youngest participants in the study; she is a twenty-four year old female student who registered for the postgraduate diploma in nursing education. She is currently working in the emergency unit at the provincial hospital in Paarl where she also worked during the time that she was registered as a student. She is a full-time shift worker in other words she works the one week three twelve-hour shifts and the next week four twelve-

hour shifts, including alternate weekends. The participant stays on the premises of Victor Verster prison with her father being employed there. She also resorts under the coloured racial group.

P7 qualified as a professional nurse in 2006 at the Western Cape College of Nursing and had a year's experience before she embarked on postgraduate studies. She seemed very motivated to do her studies; her main reason being to develop herself professionally. The participant used to peruse her friend's study guides who was also busy with postgraduate studies at Stellenbosch University and received encouragement from a previous tutor who also worked at Paarl hospital. I seemed to have gotten the impression that in subtle ways she is being influenced by her friend and previous tutor that still works there and that they played a major role in her decision to do the postgraduate diploma in nursing education.

According to P7 she stopped the programme because of the teaching and learning strategy of SUND, the fact that she could not get study leave, transport problems and language issues.

4.3.4 Participant four (P4)

The interview with P4 was the only interview that was conducted telephonically, with me recording my side of the interview and taking down notes while conducting the interview with the participant. In order to maintain authenticity of the participant's narrative I tried to repeat the participant's answer as a summary when formulating the next question, thus her own words were recorded through my voice, which also helped with the transcription of the interview.

P4 was from the Northern Cape and worked at a primary health care facility. She was the person in-charge of the facility and very committed to learn and improve her skills as a manager. It is for this reason that she registered for the postgraduate diploma in nursing management. The participant worked full-time from Mondays to Fridays. P4 never attended any telematic sessions as

the closest venue for her was ±240 kilometres away from where she resides. She thus made use of the CD's that are available of the telematic sessions after each session.

The participant is a forty-two year old female student and is classified as black. She has a daughter who is at a boarding school, who comes home during school holidays and sometimes over weekends. Her mother also stays with her. P4's social activities were mainly church and work-related. The student qualified as a professional nurse in 2000.

According to P4 her main reasons for not completing the programme were difficulty in accessing a computer and the Internet, and the requirement to have typed assignments. The participant seemed to be very motivated and dedicated to develop herself professionally.

4.3.5 Participant five (P5)

P5 is a fifty-three year old female student who qualified as a professional nurse in 1978. She is also the oldest participant that took part in this study. She resorts under the white racial grouping and resides in the Western Cape Province. During her study period she worked full-time from Mondays to Fridays, but was also on call on a 24-hour basis. P5 is the manager of education and training in the Western Cape for a private medical equipment company, and does training as far as Bloemfontein and the Eastern Cape. She is responsible for arranging workshops where the utilisation of new equipment are demonstrated to health care professionals. Prior to her employment as a manager P5 worked in an intensive care unit and has only been in her current position for 18 months.

The participant mentioned the following challenges in this specific order during the interview that made her abort her studies: she was still busy developing in her position and also the position itself and at the same time she was sent to Germany for training regarding the equipment she needed to train health care professionals in. P5 is Afrikaans speaking but decided to do

the course that is completing assignments and the writing of tests and exams in English, which influenced the time she spent on each assignment – more than she initially made provision for. She also felt that the time lapse between her last formal studies and this one was 26 years and somehow influenced her decision to suspend her studies. She completed other short courses in her field (nursing) and in line with what she was doing. This programme (PGDNE) complemented her current professional career in the field of education. P5 also saw the programme as ‘a nice to have’, which would help her in her current position, but it is not essential as her work provides for her financially. The pressure of the studies and the effect it had on her health was also of concern. She felt her health was more important and should come before her studies. According to P5 the time allocation for specific modules is so much that if she has to follow it, it would leave no time to spend on the other modules. Some modules she would have preferred to spend more time on as it were more relevant to what she was doing and why she registered for the course in the first instance.

P5 seemed dedicated to her studies and although she loves walking in her free time, she used the 1-2 hours that she would usually expend on walking to engage in studies. She also had a strong support system through her employer and friends. The participant experienced no challenges with the teaching and learning strategy and even orientation to the programme is not essential. She also showed an inclination to manage her studies while working full-time. She would like to continue her studies again, but would investigate more options with regard to education, and not exclusively in the field of nursing education. Although the student felt embarrassed discontinuing her studies, she felt very relieved because it was too stressful.

4.3.6 Participant one (P1)

P1 worked full-time at a level one district hospital in the Western Cape Province. She is a forty-seven year old female student and is classified as Indian. The participant worked shifts in other words she worked the one week 3 twelve hour shifts and the following week 4 twelve hour shifts and also

worked alternate weekends. P1 qualified as a professional nurse in 2006. She has a hearing disability and wears a hearing aid, but could hear me clearly through most parts of the interview, when she could not, she asked me to repeat the question. She is married and has one sixteen-year old daughter.

The main challenges shared by this participant as to why she did not complete her postgraduate diploma in nursing management, were the following: she experienced an unsupportive work environment where firstly, she could not get study leave; secondly, she was not allowed to request her days off to coincide with a telematic broadcast due to staff shortages; thirdly, sudden changes in off duties from working day shift to working night shift; and lastly, the workload at work because of the staff shortages (she was the only professional nurse on duty during her shift) and acuity (type) of patients in the ward where she worked.

The second challenge mentioned by P1 was her family commitments. P1 originally resided in KwaZulu-Natal, hence the fact that she receives many visitors that stays with her and her family. It seems part of her culture where instead of visitors going to stay in holiday accommodation they stay with family members; and her being the only member of her and her husband's family in Cape Town they are expected to open their home to their family members.

A third challenge she encountered was that of the teaching and learning environment, for example the telematic broadcasting sessions were new, the venue where it took place was noisy at times (taking cognisance of her hearing disability) and the fact that even her peers could not hear, the study workload (many assignments), lack of resources and academic skills and the feelings of distance she experienced from the lecturers. Her main challenge was managing her time with regards to her work, family and studies and requested as the previous student that lecturers share their past experiences with new students on how to manage their studies. P1 seemed very dedicated and expressed the wish to develop her career professionally. She has received study leave for this year, but it was granted on the condition she

does the psychiatric programme. She was disappointed when she could not continue, but intends to still complete her postgraduate diploma in nursing management in the foreseeable future.

4.3.7 Participant three (P3)

P3 is the second participant that falls under the youngest age group (23-27 years) of this study. She is twenty-four years old and resorts and is classified as white. While she was doing the diploma in nursing education she worked full-time from Mondays to Fridays at an obstetrics and gynaecology practice. Currently she is employed at a nursing agency and also works full-time at a private hospital in the midwifery section from Mondays to Thursdays. This suits her life style as she prefers to work during the week and be off over weekends and public holidays. P3 qualified in 2006 as a professional nurse and would like to have her own practice where she would offer prenatal and postnatal classes. This was her main motivation for doing the postgraduate programme. She resides in the Western Cape Province.

The participant is married and felt her studies impacted on her family and social life. She tried to fit in her study programme during the week, but found there were too many assignments to complete. P3's expectations of the programme were also not met as she expected it to be more nursing orientated and instead according to her it focused on education in general. Yet she says that she still would like to complete the programme because then she can inform her clients when she opens her practice that she is adequately qualified in nursing education. Currently she is doing the diploma in nursing management.

Although the teaching and learning environment was new to the participant she had no problems adapting to it. The only challenges she experienced were that there seems to be too many assignments and she felt the lecturers could offer more guidance in terms of what is important for the exams.

4.3.8 Participant 8 (P8)

P8 was early for her appointment as her husband brought her to the venue before he went to work. She seemed very nervous at the beginning of the interview. P8 is a forty-four year old female student who works full-time at Groote Schuur hospital in the emergency unit. While she was busy with her studies she worked night shift. She has two children aged 12 and 16. The participant came across as being very goal-orientated especially concerning her career. She initially started as an auxiliary nurse, and then studied to become an enrolled nurse, which she did for 14 years. When the opportunity was granted to her she did the bridging course and became a professional nurse in 2003. Thereafter she completed midwifery in 2005 at SU, which she enjoyed tremendously. The participant's career path illustrates a person who is dedicated in developing herself professionally. Even though she did not complete this programme she intends furthering her studies in the near future. P8 is classified as coloured and resides in the Western Cape Province.

The challenges P8 seemed to experience were firstly, she was not computer literate; secondly, she did not have Internet access at home and she utilised the services of an Internet cafe, which had financial implications. Thirdly, she experienced communication problems to and with the lecturers and fourthly, the teaching and learning method via the telematic sessions, proved to be too distant and foreign. Lastly, she had family responsibilities towards her daughter aged 16 who was going through a difficult period and needed her support and guidance.

4.4 Student factors relating to academic and social integration

What follows, are the student-related themes that emerged from the face-to-face interviews with the eight participants as interpreted in line with Tinto's framework of analysis (see Appendix C for a completed transcription):

4.4.1 Theme 1: Family and workplace responsibilities

Since all the participants were working adults, they also had other responsibilities, for example family commitments (which included immediate and extended family members) and workplace commitments. These commitments came to the fore in the following ways; P6: *'It is about time, time was a factor, I had to arrange my time to be with my children, especially the one that struggles at school'*, P7: *'It is just the time, because I am in a permanent post, work full-time and did not get study leave, it was very difficult'* and *'... my work, the division where I work is extremely physical, it makes you tired, tired, tired and just the fact that you must go (study) after work ...'*, P1: *'... being called at any time back to work and also to make time management for the family'* and P8: *'... I actually worked for more than three months ...I worked night shift for about half the year and it was difficult to study and to work night shift'* and *'... I work in Trauma and the Emergency Unit ... and it is very busy there'*.

P5 felt that she was newly appointed and still had to develop in her position. She was also 24-hours on call except holidays, which meant she could not work according to a study programme, since she was expected to give training wherever and whenever it was needed. This she voiced in the following manner: *'... the fact that my work was new to me and I was still developing in this position'* and *'... what happens for example is that like today or last week they phoned me and said that they needed training in Vredendal. If they maybe need it because it is about ventilation, then I must leave everything and go because it could save a life ...'*. In essence she felt her work was more important because it brings financial security or as she states: *'the studies does not provide me with bread and butter. It is a nice to have at this stage ...'*. Although P1 was not on call 24-hours a day, in a similar fashion she could not plan a study programme because her off duties will change suddenly, for example she will be scheduled to work day duty the one day and then immediately the following day be requested to work night duty: *'The most difficult adjustment ... was switching of day and night duty, suddenly you work on day and then (management staff) said we need you for night duty, can you*

pull through? So the adjustment of my day and night shift really affected me. You know ... the body needs to adjust to one working plan'.

The impact these commitments had on the participant's studies, was influenced by the support the participants received from either their families or workplace. I think the reason P5 continued despite major challenges faced at work was the fact that she had a good support system through her friends and employer, reflected as follows: '*they gave me study leave before the exams*' and '*... they (employer) supported me fully*'. Whereas P1 seemed to have experienced a severe lack of support especially from her employers as is further expounded upon in the paragraph below. P3 again even though her studies were not directly related to her employment had the support from her employers in that beforehand she could arrange for leave to write tests and exams although she could not get study leave.

For some students (P1, P3 and P8) both work and family played a role whereas for others (P5, P6 and P7) just one of the two was a factor. For two students (P2 and P4) it played no role at all. P1 was one of the students where both aspects came to the fore very strongly, for example: '*We have a great shortage of staff so we have been to management ...*', '*If it is a shortage ... the CPN (chief professional nurse) changes our off duties to cover up the ward*' and '*... when I wrote a letter I didn't get the leave (study leave) or I wrote for a day off and I didn't get the day off*'. Then on the home front: '*Lots of chores at home to be done ...*', '*... there is much expectations at home ... when you come from KwaZulu you get a lot of visitors at home ...*' and '*... it was like a holiday resort in my place, ten to fifteen come one time ... then you cannot tell family members anything that will hurt them, you've got to accommodate them and you have to respect their culture ...*'. This student seemed to have a strong sense of responsibility and was torn between workplace and family commitments on the one hand and commitment to her studies on the other. With P3 both aspects too came into play, but to a lesser extent, for instance: '*I am married and have a life outside swotting and still work also*' and '*... there isn't time for so many assignments if you work full-time*'.

P4 is one of the students where family and workplace commitments were attended before she embarked on her studies: *'Had to have enough time to study ... sort out problems with family before starting'*. While P8 also informed her family about time she will have to spend on her studies instead of with them, her 16-year old daughter felt that she was spending too much time with her studies, which she voiced as follows: *'... but Mummy you are so busy with your books and it seems like you also (do) not care about us'*. P8 felt that her daughters deteriorating emotional state was more important than her studies and she would rather stop the course than to break up her family: *'... I decided I would rather stop the course because she was my eldest daughter, I had to find out what was bothering her and get her to see a psychologist ... I would rather leave the course and hold onto my family'*. This student again was torn between her studies and her commitment towards her daughter's well-being.

4.4.2 Theme 2: Inadequate knowledge of programme (uncertainty about correct speciality)

Students' knowledge about what the programme entails was limited, for example P5: *'I knew I was starting something of which I don't know everything'*, but she was confident that she wanted to do nursing education and felt the information that she had on the programme was sufficient. P1 too had limited information, but wanted to develop in the various fields of nursing: *'My main motivation was to upgrade myself in the various fields of my nursing being a new professional nurse ...'*. Her obtaining adequate information on the course might have made her plan her studies more effectively, for example she mentioned: *'I didn't realise I could do half (of the modules the first year) and then the next half (of the modules the second year) that would have made it much easier, especially with her workplace and family workload'*. P3 again would like to establish her own prenatal care and postnatal care practice and believed the diploma in nursing education would be beneficial when she presents the various classes: *'I really would like to start my own clinic, which will include prenatal classes and postnatal care ...'* and *'So I thought I could swot Education and then I can use the Education to present classes'*. She

obtained information regarding the programme when she completed her undergraduate studies, but knew it was not sufficient: *'... I don't think ... I was really prepared, but I think it is because I didn't know what I was getting myself into ...'*. As was mentioned with the previous student (P1); adequate information might have helped her plan her studies more effectively, for example she mentions: *'... I did wonder, I completed most of my assignments at that stage, wasn't there a way where I can finish some of the modules the previous year and some of it this year ...'*. P8 again received limited information on the programme and only after she applied for the programme. Her main concern after receiving information on the programme was the teaching and learning strategy of the course, to the extent that she wanted to discontinue and do the same programme somewhere else: *'... if I knew it was done this way then I really would not have done the course, then I would have done the course somewhere else'*. The information she received on the programme was also limited because she did not know the exam rules and guidelines: *'I thought if you failed subjects that you needed to rewrite all those subjects at the end of the year plus the new subjects, so I told myself it is going to be too much for me ...'*.

Some did not have any information on the programme, consequently, during the programme many realised that they should have registered for a different course. One student; P6: *'I was a bit uncertain, I was really uncertain of whether this was the correct speciality ... why didn't I do nursing education rather?' and another student; P2: 'I am not really sure ...', 'I did not have any information (on the programme)'*. P4 again received information from a colleague which was outdated: *'... the information I got was from a colleague who also did it', 'They could write their assignments, at the time when he did it they did not have telematic sessions' and 'I thought it was going to be the same'*. This incorrect information caused the student to be unprepared for the teaching strategy although she had no uncertainty at all with regards to it being the correct programme for her: *'A person in charge has to know the administrative and management processes tasks of a unit. I also wanted to develop myself and do the work better', 'Was correct speciality, still feel sorry that I did not complete, would have helped a lot' and '... the personnel asked*

many questions, which I could not answer, if I had finished I could have answered.

Other students again had sufficient information on the programme and felt that it was the correct field for them, but yet it seems as if they are not really convinced that they should be doing it, for instance when asked about it specifically, the response of P7 was as follows: *'Yes I am interested in it ...'*, but when asked whether she would continue with programme after previous obstacles were attended to, the response was: *'I do want to do the course again, but I am still thinking about it'* and *'I thought maybe I should first do the management programme ...'*. P5 again would like to have a more general foundation in education as her work entails training of not only nurses, but also doctors, medical technologists and ambulance men. In her words: *'I know this is the correct field yes, I definitely want to do it, but whether nursing education is the correct pathway I should follow at this stage, I am not sure because my specialisation field is much wider than just nursing. I am wondering shouldn't I do pure training, you know pure didactics ... education'*. In contrast P3 thought the exact opposite of the programme: *'... I expected nursing education and then I got education'* and *'... it (the programme) was really not nursing absolutely not nursing related ...'*. This could perhaps be ascribed to P3's limited knowledge about the programme.

Many of the students (P7, P6, P2, and P1) did the programme because they wanted to develop professionally, but it appears that they did not give much thought into which field of nursing they want to develop or specialise. I do believe that before you embark on any postgraduate studies you need to at least be interested in the field of specialisation you entering into and if you are unsure find out more about it and talk to specialists or experts in the various fields. P8 also wanted to develop professionally and unlike the previous four had her career path planned: *'... I really wanted to do the course, which was one of the goals I told myself I still want to achieve'*. Several students (P3, P4 and P5) registered for the programme because it will be beneficial to them in their future career paths.

4.4.3 Theme 3: Inadequate preparation / skills for postgraduate studies and resources

This theme appears to be closely linked to the above one. It seems that some students do not have the necessary competence to embark on postgraduate studies, which played a role in them not completing their studies. These skills range from computer literacy, Internet usage, typing, interpreting text, writing to values such as motivation, determination and persistence, which will be discussed in more detail under another theme. They also lack resources, which will decrease their stress levels as students such as transport and finances.

P2: *'I did an Internet search for the information and I got very little ... it was one of the things that put me off to continue', 'I stressed tremendously because I could not get the information' and 'I would say that if I found it easier to get information, it would have motivated me to continue and I might not have given up so easily'*. P4 as mentioned in the previous theme had outdated programme information and was thus unprepared in terms of computer literacy, Internet usage and basic typing skills, for instance: *'The problem came with the assignment, when I finish it and I have to go look for somewhere to get it typed', 'Main problem was that I was not computer literate, have to go on internet, was struggling', 'Learn that the Internet is so much better to know it, which is the reason why I registered for the basic course (Computer literacy). Nowadays everything is technology (it) is important' and 'In the library they give computers, but they don't help with it'*. P1 too had a lack of typing skills that impacted negatively on her time management as she stated: *'Secondly they wanted it to be typed ... I found I needed more time for that also ...'*

In addition P4 highlighted the fact that to have adequate resources is another challenge students face, which may contribute to their becoming despondent and not continuing with their programme, for example P4 did not have a computer or access to the Internet and had to either go to an internet café or library 30 kilometres from her home or wait until her daughter came home for

the weekend or school holidays as the following statements show: *'The most difficult part was not having a computer. If my daughter isn't here with the computer I don't know where to go', '... and my daughter will help me go onto the Internet as well' and '... when she comes home during the holidays I go through the CD ... It is not difficult, really! It is only that I don't have the computer and the network'*. P8 experienced similar challenges, she had a computer, but not Internet access and she was also not computer literate as she states: *'I have a computer, but I do not have Internet and it made it a bit difficult', '... if you are not computer literate it was number one a difficult story and if you don't know how to use the Internet it is more difficult. Then you go there and you feel so stupid ...'*. This student accessed the Internet via an Internet café and personal computers of friends, which for her had financial implications and increased her anxiety for instance, *'... if you walk in there (Internet cafe) then you are busy there for an hour, then you must pay ... now you sit there and feel you are busy doing research but the other side of your brain is thinking O how much is it going to be when I am finished because everything is money!'*.

Some students had unrealistic expectations of the higher education institution and expectations which I feel resort under inadequate preparation, for example P7: *'I did feel that other alternatives or someone could contact me to hear how they could accommodate me, seeing that I did not have a drivers licence ...'*, but for this specific student it was a major problem as she mentioned it about five times in the interview, for example P7: *'... and also the fact that I did not have transport to get there', '... the fact that I was worried about how I am going to get there ...'* and *'... If I maybe had my own licence I could have gotten there ...'*. P1's transport problem had more to do with the fact that the venue for the telematic session was changed at the last minute and she was not prepared for it: *'... I did not actually have proper transport at that time and I had to rush to get transport ...'*. P3 believed lecturers should offer more guidance with regards to which of the outcomes are important since the workload is so heavy as she states: *'... the lecturers don't go through the text book anymore, go to page eighty four, read there, underline this and ensure that you understand this and not that. They just discuss the*

topic generally in class ... you don't know what they really want. At a postgraduate level a certain level of critical thinking are expected and students should be able to differentiate between what content to apply to their specific situation and how.

A few Afrikaans-speaking students experienced language as a challenge. The SUND presents all their broadcasts in English, although all assessments are offered in both Afrikaans and English and the students' also have the choice in which language they want to submit their assessments (formative and summative). For many it is the first time that they experience teaching and learning through an English medium as one student claimed; P7: *'I did my course in Afrikaans, I was privileged to do it in Afrikaans because the next year it was presented in English ...'* and even though the text books were mainly in English and she had to translate many of her work, what helped her previously was that their classes were in their home language, mentioned here P7: *'... the class was presented in Afrikaans, so you could at least understand, it was more understandable'*. Some students choose to switch to English as most of their text books are in English and also the work that they are involved in, but were struck by the time it consumed. P5: *'Although I do most of my work in English and because most of our text books are written in English I thought it would not be too difficult to switch and write in English, but it was much more difficult than I thought', 'I did not allow for enough time for the switch from Afrikaans to English and it knocked me, totally!' and '... I think my biggest mistake at the end of the day was the fact that I switched from Afrikaans to English'*.

Another challenge for P5 was writing in the language of the discipline (education). P5 wondered whether it was really necessary to know and write in the discipline's language and whether it is not causing a rift between the educator and the person being educated as she stated: *'... it is a new language I had to learn ... I fear that my language will not be suitable and that I will be castigated because I use ordinary Afrikaans or English and not the discipline's language, but I want the ordinary person that read my work to understand it ... it's not going to help if I talk to people about stuff and*

ventilation and they don't understand what I am talking about'. Moreover, students seemed to be openly overwhelmed; P7: 'It overwhelmed me a bit ... I sit there with the stuff and think God (sic) where do I start...' and P1: *'How do I cope now and then you read all over again and then sometimes you just want to put your head down and cry. I tried my best, but I just can't get through to it'. Others were unwittingly overwhelmed P2: 'I went through the study guides and saw there were one to two assignments to be handed in every month! There I started to get cold feet'. Besides being overwhelmed students experienced feelings of inadequacy, for example P1: '... I just couldn't move forward and pick up that receiver and speak, maybe I could get more help, but I felt no ... maybe useless at times ...'.*

4.4.4 Theme 4: Unexpected circumstances (health, work, disabilities and time period between studies)

Two students faced unexpected challenges and although they experienced other challenges as well I am of the opinion that these played a major role in them not continuing with their studies. Their challenges can be framed as follows; P6: *'I became sick ... yes in April already I was diagnosed with breast cancer'* and *'It caught me unawares ... and I had to go for surgery, then chemotherapy and afterwards radiotherapy'*. Although participant was diagnosed in April, she only formally stopped her programme at the end of July, which demonstrates her strong motivation and will to persevere to complete her diploma.

P5 unexpectedly had to go for training to Germany to learn more about a new apparatus. This is how she experienced it: *'... while I was busy with my course, it just came about that I need to learn about a new apparatus and I needed to go to Germany for that. This just totally threw me, totally'*. Yet she persevered with her programme until mid August.

Adjustment challenges to formal studies after a substantial period also seemed to have come as unexpected for P5 as she mentions here: *'Do you know in totality I think just to start studying again was a big adjustment ... I*

completed (my formal studies) in 1982 ...', which means P5 participated in formal studies twenty six years ago.

4.4.5 Theme 5: Feelings of failure, disappointment, regret, stress and relief

Invariably if students do not complete their studies it will have an effect on them. Some students experienced it negatively and others positively. Some of the negative emotions experienced were that of failure, regret and disappointment. P6: *'I was dejected at the beginning because I started something, which I didn't complete ...'*, *'It made me feel like a failure irrespective of the fact that I became sick'* and *'It made me feel like a failure, the mere fact that I did not complete'*. P3 and P8 experienced similar emotions; P3: *'... I was motivated to do it (the programme), but I am now sorry that I did not complete'* and *'This is the first thing (programme) that I have not completed ...'*; and P8: *'... I felt very bad when I stopped it (the programme) ... it is the first time that I did not complete a course'*. Most of the students were disappointed that they could not continue with their studies such as P2: *'It had an effect because I felt on the one hand I could have continued and tried'*, P7: *'I was very disappointed, the first few days I felt maybe if I persevered a bit more or made a plan or something ...'*, P4: *'Was correct speciality, still feel sorry that I did not complete, would have helped a lot'* and P1: *'... well it is not a good experience to leave a course ... it would have been a very good experience if I have completed the course ... and it would have made me feel happy ...'*.

P5 was disappointed, but her feeling of relief was more than her feeling of disappointment as her words reflects: *'A tremendous relief, it was unbelievably wonderful to let my studies go. I felt disappointed because I would have liked to complete ... but the relief to get rid of that stress was much bigger than the despondency I experienced because I did not complete'*. The stress of her studies also impacted her health, for example: *'the pressure became too much and I felt my health was being affected and it wasn't worth continuing'* and *'... I started to get panic attacks because I*

couldn't get to everything and I had to make a choice'. The same feelings were experienced by P3: '... It made you feel ... a bit of a failure ... because you are used to completing what you started, ... but it was such a relief that you can make the decision and the consequence, everything was just gone you don't need to worry about it'.

4.4.6 Theme 6: Students attitude or value system regarding their studies

Students are aware that postgraduate studies involve hard work and dedication; P2: *'I took all the study guides and for the year compiled a roster and then realised every month there is going to be two (assignments)' and 'I used my leave to be a day off to attend the telematic broadcast'*, but they are not always willing to do that; P2: *'I was not really prepared to work hard. Otherwise I would not have stopped with the course'*. Some students work hard and still make sacrifices such as; P5: *'I was ready to work hard' and 'I love walking and belong to a walking group ... but sometimes I had to made the choice rather to sit and study because it takes 1-2 hours out of my day to go for a walk'*; P1: *'I used to really sacrifice my days off, at night ... I usually did my studies more towards the night, starting by 8h00 pm if the family is still around by 9h00 then I'll work from 10h00 until 1h00 in the morning'*; P3: *'... you know you were going to swot, you know there were going to be class and you also knew what it entailed, so you had to make that sacrifice ...'* and P8: *'... your off days were not your off days anymore ... the most, most of your time must be dedicated to your books (studies)' and '... you could not socialise anymore ... you always had to make excuses when you got invitations from people ...'*.

P5 felt that proper planning and time management are very important and should be addressed by both students and lecturers. She articulated it as follows: *'... how can I as a working person arranges my life so that there is time for studying and compile a study programme whereby I can keep and that actually works for me?'* This is the question she would like lecturers to address during orientation besides giving an overview of the programme and

modules. The same sentiment was shared by P1: *'I think I would like (them) to send me more guides how should I go about with myself, how can I manage the course ... and if I'm encountering difficulty what should I do'*. For P3 proper time management and a study programme too were important, but she did not require the lecturer's involvement, for instance: *'... I had to decide when I was going to swot. I mean if you work from eight to five and you are married and you have a life besides swotting ... it was a big issue to figure out when to swot'*.

For some students their social life was also more important; P2: *'I felt it (assignments) was too many, my social life will suffer because of it, 'I also felt that it (his studies) is going to have a huge impact because I dance regularly ... I am a ball room dancer' and 'The effect on my social life ... it would have been difficult for me'*; P3 to a certain extent felt the same, for example: *'I can't sit and do an assignment every weekend' and 'I really did not want to do it over weekends'*. Others were forewarned by colleagues or friends that they would have no social life for the duration of their studies, for example P5: *'... they warned me, the people that did the course before me, they told me you must realise for a year you are not going to have a social life'*.

Motivation for doing the programme it seems also played a major role in students not completing it. Some students were driven by external motivation; P2: *'It seems that every second person was doing the course and I felt that if they can do it I can do it also ...'* and another student; P7: *'... she (friend) motivated me to study further' and '... she (ex-tutor) always told me come do it, it is nice and motivated me a lot to do that specific course'*. And P3: *'... if you tell someone you studied at Stellenbosch University then everyone is ... not that you want to but people take note' and 'I will still do it (the programme), but so that I can say I do have nursing education'*. In discussing what P3 learned from her experience she seemed to have gained some understanding that external motivation alone is not enough: *'... you don't always have to do things because you think you must do it. You don't need to impress other people, you can do it just because you want to do it or you don't need to do something just because you don't want to do something. It is your decision'*.

P4 was driven by internal motivation, but lacked some resources and postgraduate skills; P4: *'I really wanted to complete, I even tried other places like Potch (North-West University at the Potchefstroom campus), UNISA and Tshwane University of Technology', '... I have registered for a basic introduction to computers, will see after basic course of computers, and will see which school to choose' and 'But I will still do it, after I do my basic course and complete my Primary Health Care (programme)'*. This student came across as very committed, goal-directed and determined to complete her postgraduate diploma eventually. P8 was another student that was very motivated and goal-directed as reflected in the following words: *'Yes, I started right at the bottom as an assistant nurse and I told myself one day I will be where I would like to be' and 'I told myself ... in nursing ... every year I will ask (to further my studies) till I cannot continue anymore'*. P8 was dedicated to being a life-long learner, she started with doing the auxiliary nurse course, and then completed the enrolled nurse course, and she continued with the bridging course, completed the midwifery course and then started her postgraduate diploma in nursing management, which is the one she did not complete. She persevered through times when posts were frozen and had to wait sometimes years before she could register for a course, she thus does not seem to lack internal motivation.

4.5 Institutional factors relating to academic and social integration

Following are the institutional-related themes that emerged from the face-to-face interviews with the eight participants as interpreted in line with Tito's framework of analysis (see Appendix C for a transcript):

4.5.1 Theme 1: Lecturers attitude or value system regarding students

One student felt that the lecturers were inaccessible, unapproachable and abrupt, but that the administrative personnel were more approachable. P6: *'We had very little contact with the people that presented the course' and 'It almost seemed that they were inaccessible although they say that you could*

contact them, but if you do they are abrupt, to put it that way'. Some just preferred personal contact, for example P1: 'I preferred I could have met them personally'.

Sometimes communication with lecturers posed problematic especially with students staying in another province and unfortunately this student was also not computer literate and neither did she have easy access to a computer to have made use of emails or Web studies as communication mediums. One example being P4: *'I would phone and ask lecturers, it was easy, but sometimes they were not there. Some I recall called back, some you have to phone and phone ...'*. Not only students from a different province felt that the lecturer seemed distant, but also students staying in the same province as the lecturer, for example P8: *'... you were very ... how can I say ... you felt very distant from the lecturer ...'* and *'... I did phone sometimes when I struggled and spoke to the lecturers ... but it was always a problem finding them'*.

Another communication barrier mentioned was that of students with a hearing disability, for instance P1: *'Being partly of a hearing problem maybe it would help me straight on talking to the person ... some parts here and there I was losing out'*. At the same time the student felt that the lecturer spoke too softly, whether it can be attributed to the students hearing disability or the sound equipment of the venue, it can affect communication between lecturer and the students as P1 states: *'I found one lecturer was quite soft ... we would start bumping each other's elbows and start asking what is she saying'* and *'... the whole entire class found it to be moaning amongst themselves because they couldn't pick up (what she was saying) ...'*. Others experienced no communication problems, for instance; P5: *'... the fact that we could phone or email and say listen I have a problem with this what must I do'* and P3: *'... I recall last year with the assignments I mailed it to some of the lecturers and they all responded within at least two days'*. The latter two students also had previous ties with the institution where P5 did facilitation for one of the clinical postgraduate programmes and P3 completed her undergraduate nursing degree there.

According to P6 lecturers should take into consideration that they have not been studying for some time and be more understanding and supportive of that, they do not want to be perceived as being stupid; P6: *'... they give you the impression that you are ... dumb. You are dumb because you don't understand, but as I have mentioned before, I studied ten years ago.'* and *'... you need that support ... not to do your studies for you, but just to support you'*. P3, a student who studied recently (2006) felt she required guidance and encouragement throughout the year and expresses it as follows: *'... you just need more guidance in what is more important and what is less important ...'* and *'... if you can just get some encouragement along the way, maybe it will sustain you just before you don't have the energy anymore then you get something again then it helps you'*. P8 too felt that the support offered by the lecturers was inadequate as she states: *'Yes, I felt maybe if the person can just help me, maybe say this is the way (you should do it), but then she refers me to a page to read and asks me what do I understand'*. According to the student the lecturer asked her to read what she did thus far, but she did not like to as she lacked the confidence in presenting her work and rather needed reassurance that she is on the right tract.

It seems from the above mentioned experiences that the principles of adult learning and teaching should be applied.

4.5.2 Theme 2: Presentation of programme

The teaching strategy utilised was quite new for many students and different opinions about it came to the fore, for example; P6: *'It felt so far, so unapproachable, yes that is how I interpret it'*, *'... a person feel uncomfortable with it because it is new'*; P2: *'It was for me very new ... I was not used to it'*, P7: *'... it really put me off, the fact that it was so strange'*; P1: *'... the thing is for the first time watching these telematic sessions got me a bit nervous and ... I need to get more used to it ... for me it was strange, very strange'*; P3: *'The strangest (experience) was to sit and watch television, but it wasn't a bad adjustment, it was just strange'* and *'I must say it was very strange at the beginning ...'* and P8: *'That (the telematic session) was new to me, maybe it*

was also one of the reasons that made the course difficult for me'. Another student who stayed too far to attend telematic sessions received CDs after each session about the presentation and did not experience any challenges regarding the teaching strategy, or as she states; P4: *'I have no problem with the teaching method, I understand when listening to the tapes'*. P5 also expressed her feelings towards the teaching strategy as follows: *'I really enjoyed it'*.

Some students seemed cautious, uncomfortable and intimidated with the telematic broadcasts sessions, like; P2: *'With the telematic broadcast it was not so easy ... a person is cautious when you want to ask a question'* and P8: *'Yes, I was at the telematic broadcasting sessions, but I must say I really didn't enjoy it'*. Whereas others were just happy that there was some kind of contact, for example P5: *'It was wonderful that there were contact sessions even though it is telematic'*. P3 did not even expect contact as she states: *'... I didn't expect anything because it is telematic I thought we're not going to have any contact with the lecturers. I really thought I was not going to have contact with anyone ...'*, but she also seems to be uncomfortable with the idea that the lecturers may ask questions and they have to respond, for instance: *'... nobody logs in because then they know they can be asked a direct question'*, *'... if you answer a question you hear yourself on the television ... the people sound dyslectic ... it is not a sufficient way to communicate ...'*, thus she feels to communicate via text messages instead of the telephone is a better option: *'... you are not specifically targeted and the people will not dread to ask questions...'*. According to P3 the time allocation for questions is not enough: *'They allow too little time for questions at the end'* and *'Ten minutes ... they must allow the ten minutes allocated for it'*.

Feelings of distance and inapproachability were experienced, for instance; P6: *'Probably because I am old fashioned where we see the person in front and you could talk to the person, there is contact and you could go to the person ... immediately'*; P2: *'People talk to you who you cannot stop immediately to ask a question'*; P7: *'I was used to someone standing in front and you could ask if you were unsure ... I felt it was going to be more difficult ...'* and P8: *'...'*

I just felt that with the telematic they should have rather left it out ... as students you would sit with questions but it was like a long distant way'.

During 2008 the telematic broadcasts took place on Friday afternoons and Saturday mornings. This poses a challenge to students who worked shifts as they could not get off at work unless they request leave and leave was not always granted as mentioned by P7: *'... many of the classes were over weekends and because I worked alternate weekends, it sometimes were scheduled on the weekends that I needed to work ...'* and P1: *'... at one stage I had to stay away from work to come to the programme (telematic session)'*. A related aspect pertaining to telematic broadcasts sessions were the venues. One student mentioned the noise level during sessions; P1: *'The students became noisy, while writing whatever he's (lecturer) been saying and then you miss one or two words'*. The noise level might have been exacerbated for this student because she wore a hearing aid. In addition the sudden rescheduling of venues for a telematic session too caused challenges, for example P1: *'There was a change of venue for the programme when we had the telematic sessions, they did have it at Bellville ... one of that venue changes ... took me to Stellenbosch side'* and *'Because like I did not actually have proper transport at that time and I had to rush to get transport ... if they could have like in advance tell us where they are changing the venues (to)'* and because P8 too did not have transport the venue seemed far: *'The venues were also far ... I did not have transport and had to find out who goes and where I should meet the person'*.

A few students experienced a lack of orientation or induction to the programme for example; P6: *'they actually just started with the programme ... there wasn't much of an orientation'* whereas others felt it was sufficient, but the lecturers could share challenges with them, which they might come across and it will also help older students who have not been involved with studies recently, for instance; P5: *'... (tell me) what problems may I encounter, what can I expect and how can I address it?'* and *'You know I think it will help us older ones just to feel more comfortable when we for example need to hand in assignments'*. P3 preferred an introduction to the various lecturers especially

where there are a few lecturers involved, in her words: *'... if they just can show the face of the person and say who is going to present ... because every time it is a huge surprise when we see here is another person and sometimes you don't even know whether you are in the correct class ...'* and *'... it really comes as a surprise every time, the same subject, three classes, but you had three different lecturers in the three classes ...'*.

Another aspect that was mentioned is that of the study guides. Many students considered it to be very good and it helped them tremendously; P5: *'... the text books or guide books if I can call it that are very good, it really is, it gave me guidelines and helped me a lot'* and P3: *'The guidance the study guide provide is fine, it is really adequate ...'*. Although they do believe the time allocation in the modules should be realistic, for instance P5: *'If I have to spend so much time (on one module) then I won't have time for the other modules ...'* and that the lecturers could add more detail to the outcomes or be more specific, for example P3: *'... they can give more detail ... so that you know specifically what they (the lecturers) want, what is important to summarise'*.

The aspect of assignments also generated many challenges, for example that they were given too many assignments and the fact that it had to be typed. It is worth asking: what other assessments strategies can be utilised with telematic education? Surely assignments are not the only strategies available and perhaps with the use of different assessment strategies the students will feel less overwhelmed. P1 for example states: *'... the assignment were too many per year and then we found we need to rush on the assignment because there is not much time ...'*, *'Secondly they wanted it to be typed, that also caused a lot of problems for time'* and *'I think one assignment (per month) should be easier'*. And P3: *'Education really had a lot of assignments and that was the other thing that determined that it wasn't for me'* and *'... there isn't time for so many assignments, not if you work full-time'*. P8 experienced similar challenges: *'If I can say the time allocated to certain things that needed to be submitted was very very, it was very little'*. Inflexibility towards the needs of individual students also came to the fore, for example

P4: *'If handwritten assignment were allowed, I would have my diploma by now'*. It begs the question: 'Should a written assignment be an obstacle for a student to complete her studies?'

Another aspect with regards to assessment P8 mentioned was that of a technical nature. Some of their tests were done on-line and while she was busy doing the test everything would go off-line. This made her very anxious as students must complete the test in a specific time allocated and she would be unsure whether the test was saved or not. She voiced this as follows: *'... if I can mention one more thing the tests that we had to complete on the Web, it was a nerve wrecking story because number one you had to use somebody's laptop ... now we are busy then it goes off-line, I don't know what happens, but then everything is off, you can't continue, you worry because you only have an hour to complete, then everything is off, then you must phone Tygerberg (campus) to say you were half way through the test because you are worried for it counts for marks ...'*.

4.5.3 Theme 3: Inadequate information available on programme

A brochure and general information guide are available to the students where information regarding the postgraduate programmes is found. It seems though that the information is insufficient as the following comments highlights; P7: *'They did send me the books, but it is not comprehensive, there are some things that you could add, for example the language (implying that the presentation language will be English) ...'*; P2: *'I did not know it worked like that, I thought all the exams on the modules are written at the end of the year'*; P1: *'I didn't realise I could do half (of the modules the first year) and then the next half (of the modules the second year) that would have made it much easier'*; P3: *'... I did wonder, I completed most of my assignments at that stage, wasn't there a way where I can finish some of the modules the previous year and some of it this year ...'* and P8: *'I thought if you fail subjects you must write those the end of the year as well as the new subjects and I told myself it was going to be too much ...'*.

It seems that students had a vague idea of what the programmes, which they register for entail, but instead of gathering information through the correct channels of the institution they rely on previous students or their colleagues' information. As one student (P8) put it very succinctly: *'With the course itself ... you must really be well-informed, comprehend what the course is about before you even apply for the course ... thus you know what is expected from you ...'*.

As lecturers we could in consultation with our students identify challenges that students may experience and either through a general information guide, orientation sessions or selection interviews guide them in making more informed choices. This presented itself through two students (P5 and P1) where they have made a request that lecturers could help them manage their challenges of studying full-time and juggling career and family commitments.

4.5.4 Theme 4: Administrative shortcomings

Students felt that their study material should reach them before they start so that they can prepare themselves for the broadcast sessions, as one student stated; P2: *'It put me off because the books they posted, arrived a day before the first telematic broadcast'* and *'Even when we attended class there were some students who did not receive any books as yet'*. Another student; P5: *'... it makes you lag behind if the literature is not available and it happened again this year with the students ...'* and P3: *'Mine arrived a bit late, yes last year I also received it late'*.

In contrast the student that could not attend the telematic sessions appeared to have experienced more support, which she expressed as follows; P4: *'After every session they would send me the CD'* and *'I could just phone then the books and question papers would be sent'*. One student (P3) made a suggestion on how communication can be improved between the students and administrative personnel, for example: *'They can perhaps have a link on the website where the DVD's of the broadcasts can be ordered then you don't need to phone ... and they can even put on the bank details for payment of*

the DVDs'. This would help especially for students who do not automatically receive DVDs.

She would also appreciate regular correspondence whether through formal letters or information on Webstudies as she states: '*Correspondence is important ... I don't know it just feels as if there is a communication barrier*', '*There is just not good communication for example when the study guides were late ...*', '*Then you wonder are you registered, are you not registered, nobody informs you whether you are ...*' and '*Then you phone again and you get put through from one (person) to the other to the other ...*'.

4.6 Discussion

The data presented shows that the students who responded to this study were challenged in multiple ways: a lack of opportunities to study due to work and family commitments; inadequate programme information which also resulted in indecisions about the programme of study; under-preparedness for postgraduate studies; language exclusions; unexpected challenges due to illness; feelings of blame and disappointment due to incompleteness despite being motivated to complete. Likewise students also felt demotivated to complete because of institutional factors such as the following: inaccessible, unapproachable, abrupt lecturers (yet supportive administrative personnel); daunting, intimidating and less 'friendly' teaching approaches and course content; and insufficient time to prepare for studies.

In essence, student completion and retention rates have been adversely affected because of institutional factors, discouragement (with reference to a value) and inappropriate teaching and learning strategies. To my mind, even if students complained about the lack of programme information, language biases (such as the course content and lectures which were mostly in English) by far the most salient reasons as to why students do not complete and have not been retained in the programme (and for which they felt bitterly disappointed) can be attributed to their lack of initiation into values and the

exposure to a defensible form of teaching and learning. These are the issues I wish to take up in the next chapter.

CHAPTER FIVE

DISCUSSION OF FINDINGS, LIMITATIONS OF THE STUDY AND POSSIBILITIES FOR FUTURE RESEARCH

5.1 Introduction

In Chapter Two I have argued that at least three major aspects impact student completion and retention rates in postgraduate nursing education (NE). These aspects include: infrastructural support, values initiation, and teaching and learning pedagogy. As is evident from my findings, students' non-completion rates are increased if a lack of infrastructural support is absent, students are not initiated into pertinent values and teaching and learning is not considered a dialogical encounter. Drawing on my findings in Chapter Four, the following could be cited as some of the main reasons why postgraduate students at SUND registered for the NE diploma, but do not complete: derogatory institutional factors, senseless discouragement, and inappropriate teaching and learning strategies.

To my mind, even if students complained about the lack of programme information, language biases (such as the course content and lectures which were mostly in English) by far the most salient reasons as to why students do not complete and have not been retained in the programme could be attributed to their lack of initiation into values and the exposure to a defensible form of teaching and learning. In this chapter, based on an analysis of my findings mentioned earlier, I shall focus on what ought to be done in relation to values initiation, and dialogical teaching and learning in order to build on the infrastructural support initiatives which are at times adequately attended to by many theorists and practitioners involved with studies on student completion and retention rates. I am convinced that the potential contribution of this research report lies in exploring student completion and retention in relation to values initiation, and dialogical teaching and learning – aspects which thus far do not gain sufficient attention in the literature which abound on studies in

nursing education. This claim is corroborated by the fact that most of the reasons cited for students' non-completion and retention relate to access and admissions, recruitment strategies, quality information to students prior to entry into the programme of study – aspects which deal mostly with institutional support strategies but not necessarily values initiation, teaching and learning (Cook & Rushton 2009: v-vii).

5.2 On the limits of infrastructural support to bring about sufficient student completion and retention in postgraduate nursing education

By now it is clear that student retention and completion have not been adequate or efficient in terms of retention, throughput and completion of postgraduate nursing education students. As has been made clear by Koen (2007), South African higher education institutions are quick to celebrate student completion rates, but do not necessarily address student non-retention and non-completion. It does appear from the literature and interviewees' comments that institutional support is a necessary condition for student success. I concur because any form of education happens successfully when relationships amongst people are engaging and people are mutually supportive of one another. This point is corroborated by Tinto's (1993) Student Integration Model (SIM) which suggests that students who strongly identify with the institution's internal characteristics will succeed, and those who do not will leave. Thus for SUND to offer tutorial support, and the University to render psychological (related to positive image, sense of belonging, stress, and satisfaction) services for students, opportunities for bursaries, the provision of excellent library facilities (although most of the interviewees indicated that resources are not always available and at times outdated), and student friendly instructionally designed materials of learning which encourage students' accessibility with knowledge, in themselves are worthy and credible learning support structures. As has been alluded to in Chapter Two and which has been confirmed in my interviews with ex-

postgraduate students who did not complete, key attributes of Tinto's model might be at play here:

A student enters higher education with a set of background characteristics, intentions and expectations, and his decision to persist or depart is a function of the extent to which he or she has succeeded in becoming integrated into the institution socially and academically. Tinto suggests that, where the experience of the institution is negative, the individual tends to experience diminished academic and / or social integration and may conclude that the costs (academic, social, emotional and / or financial) of persisting outweigh the benefits of persisting. At this point, the individual withdraws (Yorke in Koen 2007: 61).

Following the afore-mentioned, the institution (Stellenbosch University) is in fact expanding on these initiatives, considering the latest proposals to extend nursing education as far as the Worcester region in the Western Cape. Yet, most of these initiatives are concerned, so it seems, with the extrinsic variables of education. My view is that education, more specifically postgraduate nursing education should also be guided by intrinsic values – those internal goods without which education, specifically in this context, mainly nursing education, would fail to meaningfully exist. These intrinsic goods are referred to as values. They make education what it is. The point is, one can have the best buildings, library resources, study materials, time table allocations, transportation systems, and educational policies and procedures in place, but these paraphernalia would not necessarily on their own improve the education of postgraduate students neither would these extrinsic features of education on their own bring about improved student success and retention rates.

Education also has intrinsic dimensions which should guide its activities, that is, the apposite reasons why education should exist and function in the first place. These intrinsic reasons which are sacrosanct to an institution's functioning are referred to as values intrinsic to the institution and its activities. From the responses interviewees rendered, I deduce that if postgraduate

nursing education hopes to improve on students' success rates (that is, gain better throughput rates and hence completion and retention rates) it has to give more attention to initiating students into values, more specifically the values of caring and dialogism. In the main, institutional support is a necessary but not sufficient condition to improve student retention and completion rates at SUND. SUND also requires other conditions such as the cultivation of caring and dialogism – those intrinsic values which would hopefully offer postgraduate nursing education a plausible reason to exist and be implemented. It is to a discussion on these conditions of postgraduate nursing education which I now turn my attention.

5.3 Values, student retention and completion in postgraduate nursing education

From my analysis of the narratives of interviewees, I deduce that initiating postgraduate NE students into values other than motivation, conscientiousness and agreeableness would contribute to the possible success of these students' academic performances. To my mind, and of special interest to postgraduate nursing education, the value of caring has been significantly underplayed in the literature. It seems as if motivation, conscientiousness and agreeableness are not sufficient to enhance student completion and retention rates. Instead, following my analysis in the previous chapter, caring should also be practiced. This is evident from the views expressed by interviewees. Most if not all of the interviewees mention the value of perseverance as crucial to their future studies. By perseverance they mean that their lecturers ought to be more patient towards them while pursuing their qualifications. The upshot of such a view of perseverance is that it seems as if students regard the latter as a two-directional process, that is, lecturers should be patient with students, and the latter ought to be patient towards lecturers. Therefore, perseverance could possibly attend to the initiation of students into values. One requires such a process which involves a mutual concern for one another. Hence I would extend perseverance to

caring because the latter implies exercising some form of patience towards and concern for the other.

For more clarification on this concept of caring, I turn to the ideas of Nel Noddings who articulates a plausible view of caring. Noddings (1992: 24) in reference to nursing education considers caring as ‘a moment in which each (lecturer and student) must decide how to meet the other and what to do with the moment ... a moment of receptivity – one in which the full humanity of both parties is recognised – and it is followed by a return to the human other in all his or her fullness’. In fact I am advocating that university lecturers (like me) involved in the education of postgraduate students ought to take more care (which also involves a form of perseverance) in initiating students into their learning. This does not mean only that students should be motivated, committed and agreeable but also that university lecturers initiate them into the discourse of learning, a matter of recognising their ‘full humanity’ which in turn is then followed by a process of evoking their potentialities – a matter of attending to students ‘in all his or her fullness’. In turn, students then become deeply committed to their studies and the completion thereof. Through caring university lecturers understand what students need and then, following Noddings (1992: 23) ‘attend fully and openly’ to their needs, giving opportunities for them to develop the attitude of care. In others words, students are not just left to their own devices as if they need to come to grips with their work and pass. They are in fact cared for by being made aware by university lecturers that they need to utilise their potentialities and actually fulfil their ambitions. The difference between just asking students to be motivated and caring is that the latter is a two-directional process which requires of both the lecturer and student to make those who learn and teach realise that one has to be more attentive to expanding one’s potential in order to succeed – a matter of exercising caring. In a different way, students cannot be conscientious and agreeable to learning if they are not initiated into an ethics of care whereby they feel responsible to succeed and lecturers consider it their responsibility to evoke students’ potentialities – that is, making them realise through care that they can actually complete their studies. The need for care in fact grows out of some students’ expectations that the

university would make them feel that they belong through contacting them when they (students) have left the programme, and who in any case felt disappointed for not having completed the programme.

By far the most significant comment interviewees made during our sessions is that the postgraduate nursing studies has to be connected with past (how they performed in the course before and what prevented them from completing) student personal experiences. This idea seems to be in line with Noddings' (1992: 70) claim that if the criterion of students' personal experiences is attended to, that is, students should be allowed to exercise some choice in the participation in academic life, institutions would be considered as being caring. Moreover, MacIntyre (1999) also concurs with Noddings in this regard, that is, caring being considered as maximising the potential of students on the basis of their personal experiences. By this is meant that SUND should meet the challenge to care for postgraduate students in the following ways: it should be made clear that the SUND is a division within the university with a purpose to care for students and in developing their capacities (both lecturers and students) to care; to create a feeling of community that cares; and to develop respect for a range of human capacities build around essential themes of caring. Once again I am reminded by Tinto's (1993) argument in which it is claimed that the capacity of the higher education institutions to bond students collaboratively and caringly is important to not only their integration in institutions but also their retention and completion.

Thus, during the interviews I got a sense that the non-retention and non-completion of students can be attributed to their experiences of academic isolation – an idea which is supported by Tinto (1993) in the literature. For these reasons interviewees have been calling for more communication to unfold between them and the lecturers. Like Tinto, the interviewees do not necessarily attribute their non-retention and non-completion to their supposed inability to meet minimum academic standards or to financial insecurity, but to a genuine lack of, what I would say, caring.

5.4 Dialogical teaching and learning and student retention and completion in postgraduate nursing education

My analysis of the interviewees' comments suggests that student retention and completion rates can be enhanced through dialogical teaching and learning. The most important function which dialogical action performs is that of communication. An ideal conception of communication as a condition for dialogical action is one that 'promotes free and equal opportunity to speak ... (where none of the participants) is in a position to coerce or threaten others into accepting certain proposal or outcomes' (Young 2000: 23). Again drawing on Young, a communicative conception of dialogical action involves reasonableness, that is, the willingness and openness to listen to the views of others and to be persuaded by them if our ideas are found to be incorrect or inappropriate' (Young 2000: 24-25). Also to be reasonable is to treat people with respect, 'make an effort to understand them by asking questions, and not judge them too quickly' (Young 2002: 25). Young (2002: 38) aptly makes the point that 'being reasonable in a discussion means being open to listening to others and having them influence one's views, and expressing one's own claims upon them in ways that aim to reach their assent or understanding'. Considering Young's ideas on communication, the implications for teaching and learning would be as follows: One has to be willing and open to listen to the views of others; to be persuaded or influenced by others' views which make sense; to take others' views into questioning; and to modify, adapt or even abandon inappropriate or incorrect views. If these practices happen, communication occurs and teaching and learning would hopefully be a dialogical encounter. Unless, communication unfolds in teaching and learning student retention and completion rates would remain minimal. This idea is corroborated by Greene (1995) who argues that students' success is related to how educators connect with them dialogically.

Moreover, I am aware of the most recent developments in NE regarding the implementation of problem-based learning (PBL) as a methodology to improve learning. PBL implies that learning happens only after problems have been identified – that is, the student not only acquires knowledge about the

subject but also develops skills appropriate to the identifiable problems (Colliver 2000; Walton & Matthews 1989). This methodological approach to learning is often regarded as student-centred and contextualised in terms of real life situations (Knowles 1990). Although such an innovative approach to learning can potentially make learning more student-centred, I do think that it is limited because learning also has to be initiated by lecturers. In this instance, learning cannot be considered as learner-centred only, but also lecturer-centred. But what is more crucial to the advancement of PBL is the fact that communication can more likely be increased. And for this to happen the practices of listening, questioning, critiquing and provoking might not be irrelevant to PBL, and teaching I would add. In fact interviewees' responses indicate that lecturers' apparent 'inaccessibility, unapproachableness, and abruptness' further support the argument for communication, possibly around subthemes of communication: - that is, listening, questioning, critiquing, and provoking.

5.5 Possibilities for future studies

I have argued for postgraduate nursing education at SUND to be more intent on creating opportunities for caring and dialogical action, which if seriously implemented, can hopefully remedy some of the shortcomings associated with impoverished student retention and completion rates. I now wish to offer some possibilities as to how this study can trigger future research in this area of investigation. I refrain from using the term 'recommendations' because I think it would be rather presumptuous of me to 'recommend' to others what a limited study of this nature uncovered. In addition, 'recommendations' also specify a kind of mastery and finality, that is, my findings of caring and dialogical action should be considered as the final word and 'best' actions to be pursued by all those who wish to address the problems surrounding a lack of student retention and completion in postgraduate nursing education. In fact mastery and finality would close the doors to any innovative educational moment that might still be in the making.

Moreover, my own position and role as a nurse educator has been greatly influenced by the limited findings of this study. As I am writing this section, I am constantly questioning myself about how caring and dialogical I have been towards students since I commenced with my academic profession some three years ago and even during my brief sojourn as a training and development consultant at a different institution. Consequently, the possibilities I shall offer to improve postgraduate student retention and completion rates will mostly be linked to my current role as a nurse educator in the SUND. Hopefully my findings could potentially impact or even extend theories about contemporary postgraduate nursing education. My approach will be threefold:

Firstly, at a theoretical level, theories in and about postgraduate nursing education should also attend to the dimensions of caring and dialogism, more specifically communication. I am not ignoring the extensive literature on these concepts and practices in postgraduate nursing education at all. What I have found in this study is that the possibility exists that caring and dialogism can be reconceptualised and looked at differently. Whereas in previous studies and from what I could glean from my findings, caring was mostly considered as an empathetic enterprise which I have now extended to a process of mutual attunement whereby lecturers can evoke the potentialities of students and students in turn engage their lecturers. As far as dialogical action is concerned, teaching and learning has not been blind to change. However, dialogical action can also assume the form of communication whereby teachers and students can engage more attentively with one another and provoke one another's imaginations and creativities. For me this is where the potential theoretical contribution of this study lies: extending values currently operative in postgraduate nursing education to those values of caring and dialogism which can hopefully improve teaching and learning and hence, student completion and retention rates. In a different way, I have been arguing for a reconceptualised notion of values initiation which can potentially enhance teaching and learning in postgraduate nursing education.

Secondly, this study seems to be apposite to gain a better understanding of how programmes should be reconceptualised, redesigned and reconstructed. On the one hand, if SUND hopes to increase its student retention and completion rates it should consider to constantly improve its programmatic offerings which in any case should be more attentive to the expectations of relevance and sensitivity to context. I cannot imagine developing a programme for postgraduate nursing education which does not take into consideration the relevant academic concerns of students. Neither can one develop a programme that does not match the contextual demands of the time. Our teaching and learning materials ought to be more 'accessible' to students as to encourage greater insights into the content being taught. This requires that as designers and producers of programmes we should take more care in producing academic offerings which invite students to engage communicatively with ourselves and ideas. In a reconceptualised and redesigned postgraduate nursing education programme one could then foreground caring and communication more profoundly as guiding principles of the programme. Even during telematic interactions with students our teaching should be more engaging – that is, communicative as well.

Finally, I was not detached from this study. In fact I was attached. But this is not a kind of attachment where I hope to increase my rating with my Departmental Chair or the institution for some utilitarian purpose, for that in itself would reduce the genuinely morally worthwhile purpose postgraduate nursing education should have in mind. My attachment is about caring for students, in particular those who found it quite demanding and difficult to remain in the programme and to complete their studies, although they had the potential to succeed. It is this caring for students that guided me to making my teaching more communicative over the last few months. I have extended my role as a nurse educator intent to transmitting book knowledge to students, to one who now thrives on provoking students through genuine dialogical encounters. If our attachments cannot be about evoking the potentialities of students, and about communicating with them, it is very unlikely that student retention and completion rates will be enhanced.

Of course I am not ignoring the fact that student non-completion is 'a complex, multifaceted interaction involving the interplay between a student's pre-university entry experiences and a student's social and academic experience during the early period of transition into the university cultural milieu' (Cook & Rushton 2009: ix). This is probably an opportunity for another study in this field of student completion and retention rates or vice versa. However, I have been mainly concerned in this research report with the need to provide a pragmatic and conceptual solution to students at risk of departing early from the SUND postgraduate programmes and a desire to provide an interpretive analysis of theory on which to base future initiatives in postgraduate nursing education. Thus unlike studies which relate poor retention and completion rates to students' pre-university experiences (Cook & Rushton 2009), I have been concerned to address mainly those aspects of student retention and completion rates which link strongly with values initiation, and teaching and learning.

5.6 Limitations of the study

A few points need to be highlighted as possible limitations to this study, which relate to the interpretive paradigm in which this study is situated, these include the following:

Firstly, in qualitative research there is always a concern of potential researcher bias where the researcher may have interpreted the data according to her own perceptions rather than the perceptions of the participants'. In interpretive research the researcher is the primary instrument who constructs and analyses the data and is thus challenged to keep an open mind, give a reflexive account of herself and develop empathic listening skills (Denscombe, 2007: 301; Terre Blanche *et al* 2006: 277). These challenges can be addressed through the researcher clarifying her own assumptions and theoretical orientations about the study, which Denscombe (2007: 301) describes as 'a reflexive account of researcher's self', completing member checks and soliciting colleagues' opinions on emerging interpretations.

The second limitation that comes to mind is my choice of a research design. My initiative in utilising the case study design stems from my research question and the main aim of my study, which is to explore *the reasons as to why students do not complete their diploma* in a holistic and in-depth manner. Plausibly if a description was warranted on *how the students' experienced non-completion of their programme*, a phenomenological design would have been appropriate.

The third limitation relates to the specification of a theoretical framework, which may inform a researcher's interpretations as theory can shape observation (Bryman 1988; Firestone 1990).

Fourthly, the study was conducted with one group of students who did not complete their studies in the same year. Preferably it should be repeated with other groups of students in different years at the same institution or at another similar institution. Such an initiative might hopefully render more viable results in varying or multifaceted institutional contexts.

Taking the above-mentioned limitations into consideration, it is thus acknowledged that there is a possibility that the quality of this study can be improved by addressing these limitations.

5.7 Concluding comments

Postgraduate nursing education can most appropriately succeed in enhancing student retention and completion rates if our work as nurse educators and specifically a nursing education division, were to be guided by a professional dimension (an interest to improve theory), public dimension (to offer more relevant programmes), and personal dimension (such as to situate oneself better in one's teaching). These possibilities I hope could potentially guide more caring, communicative and academically rigorous postgraduate nursing education programmes. Only then postgraduate student retention and

completion rates might be enhanced. I conclude with the words of Cook and Rushton (2009: xiii): 'Students who leave without completing a qualification, however, are not lost in a wilderness somewhere; they are still potential students. They already know about the expectations of higher education and may only need support and career guidance to re-enter successfully'.

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APPENDIX A

PARTICIPANT INFORMATION AND CONSENT FORM (CHR 2006; adapted)

TITLE OF THE RESEARCH PROJECT:

Possible contributing factors to students' non-completion of the postgraduate nursing diploma

RESEARCHER:

Ilhaam Essa (Stellenbosch University Division of Nursing)

CONTACT NUMBER: 073 251 7416

You are being invited to take part in a research project. Please take your time to read the information presented here, which explains details of this project. You are advised to ask any questions about any part of this project that you may be uncertain about. Your participation in this research is highly appreciated. Also, your participation is **entirely voluntary** and you are free to decline to participate. You are also free to withdraw from the study at any point, even if you do agree to take part.

This study has been approved by the **Committee for Postgraduate Research at Stellenbosch University.**

What is this research study about?

I am currently a Masters student at the Centre for Higher and Adult Education, Stellenbosch University. My research aims to: (1) Explore possible reasons related to social and academic integration that might influence the non-completion rates of the non-clinical postgraduate diploma students at Stellenbosch University's Division of Nursing; (2) Explore possible reasons related to the ITE (interactive telematic education) delivery mode that might influence the non-completion rates of students; and (3) Suggest possible intervention strategies to enhance completion rates in the afore-mentioned programmes.

Why have you been invited to participate?

The study focuses on the 2008 cohort of students that participated in the Postgraduate Diploma of Nursing Education and Nursing Management, but did not complete.

What will your responsibilities be?

Participants who agreed telephonically to participate will take part in individual interviews (lasting more or less an hour) where an interview guide will be used. The interviews will be recorded on an audio tape and transcribed. Participants agree to honour the appointment date, time and place that were agreed to telephonically. If participants cannot honour their appointments, they will inform the researcher on the contact number given on this information form a day prior to the appointment, if possible. The participants will be required to sign the consent form below on the date of appointment after their questions have been satisfactorily answered by the researcher.

Will you benefit from taking part in this research?

If you decide to reapply for this course possible intervention strategies which can potentially emanate from this study can promote improved success in your completing of the course.

Are there in risks involved in your taking part in this research?

There are no foreseeable risks and discomfort associated with participation in this study. Confidentiality will be upheld throughout and after the study period. The reporting of the findings will be anonymous.

Will you be paid to take part in this study and are there any costs involved?

No, you will not be paid to take part in the study.

Is there anything else that you should know or do?

You will receive a copy of this information and consent form for your own records.

I wish to thank you in advance for your willingness to participate.

Ilhaam Essa
(Researcher)

Declaration by participant

By signing below, I agree to take part in a research study entitled:

Possible contributing factors to students' non-completion of the postgraduate nursing diploma

I declare that:

- I have read or had read to me this information and consent form and it is written in a language with which I am fluent and comfortable.
- I have had a chance to ask questions and all my questions have been adequately answered.
- I understand that taking part in this study is **voluntary** and I have not been coerced to take part in it.
- I may choose to leave the study at any time and will not be penalised or prejudiced in any way.

Signed at (*place*) on (*date*) 2009.

.....
Signature of participant

.....
Signature of witness

Declaration by researcher

I (*name*) declare that:

- I explained the information in this document to
- I encouraged him/her to ask questions and took adequate time to answer them.
- I am satisfied that he/she adequately understands all aspects of the research, as discussed above.
- I did/did not use an interpreter. (*If an interpreter is used then the interpreter must sign the declaration below.*)

Signed at (*place*) on (*date*) 2009.

.....

Signature of researcher

.....

Signature of witness

Declaration by interpreter

I (*name*) declare that:

- I assisted the researcher (*name*) to explain the information in this document to (*name of participant*) using the language medium of Afrikaans/Xhosa.
- We encouraged him/her to ask questions and took adequate time to answer them.
- I conveyed a factually correct version of what was related to me.
- I am satisfied that the participant fully understands the content of this informed consent form and has had all his/her questions satisfactorily answered.

Signed at (*place*) on (*date*) 2009.

.....
Signature of interpreter

.....
Signature of witness

APPENDIX B

Interview Guide (Louw 2005; adapted): Social and Academic integration

Mini-thesis title: Possible contributing factors to students' non-completion of the postgraduate nursing diploma

1. Do you currently work? Full-time / Part-time?
 - Full-time
 - Part-time
 - Full-time student

2. What was the main motivation for you to further your studies at SU?
What was your purpose in coming to SU?
 - study goals
 - reasons for further studies
 - motivation
 - reasons for specific institution

3. What adjustments did you need to make, before embarking on your studies? Which adjustments were the most difficult / strange?
 - Factors which made studies difficult / strange
 - Limitations in induction and orientation programmes

4. Did SU comply with your expectations? If NO, what did you expect and what was the reality? If YES, with what did you experience problems that led to you not completing the programme?

- Enough information on course
- Who and where student got information
- Correct nursing specialty for the specific person
- Students perception on the degree of difficulty of the course

5. What was your experience regarding the teaching medium and course?

- How the medium influence the students
- Were they familiar with it
- Did they find it difficult/ convenient

6. How prepared / committed were you to really work hard?

- Commitment / motivation
- Correct study methods
- Balance between studies and social activities
- Role of SUND in motivation of student

7. What were the consequences for you as a person when you did not complete your studies? What did you learn from this experience?

- Students feelings (opened up opportunities / feel like a failure)

APPENDIX C

Example of a transcription

Interview transcription P1:

14 May 2009; 10h50-11h45

Question 1:

I: J at the moment where are you currently working?

P: I am working at Khayelitsha hospital, which is situated at Tygerberg; it is called level one medical, level one district hospital. It is a medical side and a surgical both in one ward.

I: And you work full time or part time?

P: I do work, I am a full time worker, I am a professional nurse in the unit. Sometimes we do work as one sister, and then we do have an area manager so it is quite hectic at times because you have limited staff.

I: I can imagine if you just work one professional nurse. And it is a 40 hour week?

P: It is ja, we have work 12 hours per day.

I: Oh 7 hour shifts.

P: I usually go 6h30 and I come back at well maybe 19h15 to 19h30, reason due to being long handing over's. There's about 30 bedded of patients mostly diagnosis TB and HIV and besides the cardiac and kidney failure patients we do have a section called surgical section,

which run on a Tuesday for babies on Tonsillectomies are done in the same ward.

I: So it is both adults and children.

P: And children.

I: That is quite hectic

P: We have a great shortage of staff so we have been to the management, where they had a discussion but they're still employing slowly, we do have the community sisters who have joined us for this year. This year, so that makes two sisters, but at the moment I am on night duty. I am working only one out with two nursing assistants no staff nurse. So I do practically my job and the staff nurse.

I: And the staff nurse, that is hectic. And you work 3 sevens, 4 sevens or ...?

P: We work 3 sevens and 2 days off, sometimes 2 sevens in-between then 3 days off depending, we have alternate weekends off.

I: Ok, so you work over weekends as well?

P: If it is a shortage, then sister changes, the CPN changes our off duties to cover up the ward, besides they do use the moonlighting staff, the agency, but what they have discovered is a lot of hazards have happened. So they prefer using the hospital staff.

I: And when you go get your diploma, did you work full time as well, just as you working now?

P: Yes, yes.

Question 2:

I: What was your main motivation to further your studies at Stellenbosch?

P: My main motivation was to upgrade myself in the various fields of my nursing being a new professional nurse; I needed wide directions of my field of working so I know exactly what I am up to and should a question be approach to me I'd know how to answer them. It sort of helps me for the future. I was quite enthusiastic to do it.

I: You say you're quite new professional nurse? When did you complete your studies?

P: I studied ... completed in 2006.

I: Ok, so that is quite recently. And you enjoyed it?

P: Yes I did.

I: Where did you do your studies?

P: I did my training at Natal... with KwaZulu-Natal and I wrote my exams in Cape Town.

I: And what was your purpose in coming to Stellenbosch specifically?

P: Sorry just repeat that question?

I: For choosing Stellenbosch specifically to do your course?

P: I tell you what it is quite convenient to come up here and my family offered me direct transport over. And felt maybe I could meet new people, you know as going along maybe we can increase our group by a

... and make me better to socialise more and know more about the course, from the colleagues around me.

I: Were there many where you are working at the moment that also did the course?

P: Yes.

I: So you were a group together that actually ...?

P: Yes, when I come up to Stellenbosch then I saw my group on the first day of orientation. When I looked around it was quite a friendly group and quite a few of us were sharing our telephone numbers. We got more excited and said people do care. So that is why ...

I: And some of them were working with you also?

P: Yes. Many at Tygerberg they haven't seen me, but they've tried to relate to me. I am from the same hospital, we will meet up together.

I: But you didn't work in the same ward specifically?

P: No

Question 3:

I: And then what adjustments did you need to make before starting, embarking on your studies?

P: Adjustments I need to make is like to have, to work out my time management. Time management like coming off long hours of work and being calling, being called at any time back to work and also to make time management for the family also needed me on both ways. Being such a hectic year at work with staff shortages, it really got me tied and in my views, in my opinion the shortages and through the letter to management, but nothing has been done at that time. I've lost hope thereafter saying that you know if we could get time, we did apply for time for study leave to matron, she then gave me a letter saying that she has shortage of staff she cannot give me time.

I: So she ... you didn't have any study leave?

P: For last year yes.

I: And when you had to write exams which you ...?

P: I had to take or ask for a day off or request for a day.

I: So it was your day off?

P: Yes it was my day off.

I: And what do you feel what were the most difficult adjustments to make?

P: The most difficult adjustment ... is to come ... ok there was switching of day and night duty, suddenly you work on day and then said we need you for night duty, can you pull through? So the adjustment of my day and night shift really affected me. You know I think the body needs to

adjust to one working plan, then coming to night duty thereafter, but it is just like a day and then you coming on nights.

I: So it doesn't give you time to adjust really.

P: It was very difficult.

I: And could you find a specific time for you to actually work on assignments and go through your work?

P: I used to really sacrifice my days off, at night. Lots of chores at home to be done, but I've really tried to put aside, hence I had a little page says time how many hours can I give myself and I use to plan out in that way. That's how I manage to do some of my assignments, you know and to go to the library and I did a lot of walking around, Luke was never there so I had to go around on my own.

I: And your family self?

P: They always there, in fact they needed their time for themselves and they needed time for food and clothing to be ironed and what, but they also gave me part of my time.

I: And your children, they're small or ...?

P: No, my daughter is sixteen.

I: Ok, so she's a teenager.

P: No sometimes you've got to be behind them to study at times you know.

I: I agree. And were you, did you have any induction or orientation programmes, I think you did mentioned you had an orientation programme.

P: At the university?

I: Ja

P: I've been attending on my first day orientation and we were spoken to by the telematics ...

I: Oh the telematic session?

P: Yes that's an event, I come in there.

I: So you didn't have a contact session where all the students came and the lecturers came and you met them physically face to face?

P: Yeah, I only met one I think.

I: So your first contact was with when you had the actual session?

P: Yes, yes.

I: Do you think there are limitations in having it that way? What would you have preferred?

P: I preferred I could have met them personally. Being on partly of a hearing problem maybe it would help me straight on talking to the person, not saying the ... didn't help me out I was focussing on it, but some parts here and there I was losing out. The students became noisy, while writing whatever he's been saying and then you miss one or two words and then you try to skip up and look at the next one and see what did she write and the she didn't hear also. And then it is a bit, you find it a bit difficult.

I: And if we had orientation programmes what would you like them to discuss in that day say if we have one day that we sat out for orientation? What are

the kinds of things that you find that maybe if they mention it or discussed it, it would have made your studies a bit easier?

P: I found they should have ... they tried their utter best for us, but I think that more personal like meeting your preceptor like where the problematic fields if you could phone them and tell them you know I need to meet you. I think you also might ... part was I didn't have the time also to do that and they were not knowing that I needed help thereafter.

I: So maybe if we have a day set out you can discuss those things?

P: Yes.

I: Like the times that or were you given times that you could phone them or email them or come and see them?

P: They did, they did say on the letter this is my, your certain person that you can call and the telephone number, so I felt that probably maybe I wasn't I was too afraid maybe I would be able to hear them correctly what they were saying or I needed like to go out there meet them.

I: So it is better to actually meet them face to face.

Question 4:

I: And then also your expectations did the nursing department did it comply with your expectations what you thought the program was gonna be about?

P: Ja, definitely, definitely.

I: And with what did you experience problems that led to you not completing the programme eventually?

P: As I said the time management for me from work wise I felt that if they, even if I needed more like study leave and it was not granted how I would be able to manage to complete the course one. Two on my lecturers I would I come up here to present my lectures to listen to my notes whatever they wouldn't give me at one stage I had to stay away from work to come to the programme. And then somebody did see me do that and also discussed about it, which also let me down.

I: So you feel that if the workplace is a bit more lenient then it would have made it a bit easier for you?

P: Yes.

I: And do you feel beforehand that you had enough information on the course itself?

P: I actually when I received the letter that I was accepted on the course I didn't think I had enough information, I was so enthusiastic to do it and said I would like to upgrade myself and go up and when you've come from a studying period like where you finish your professional nurse, from a staff nurse to a professional, then you say, you still fresh, you still want to go on studying then eventually now you realise no I didn't get enough or I am not knowing so much how this course is going to go

on and then you find it difficult how to cope thereafter. So in fact I needed like more information.

I: Is that one of the things maybe we can give in our orientation programmes, to give you an overview of all the modules and for example tell you so many assignments will be in this module, so many tests if there were tests, whatever will it make it a bit easier if we have an orientation programme that would add that in?

P: I think ...

I: Especially seeing that sometimes students did not receive a lot of information on the course?

P: Yes.

I: Where did you get the information that you had?

P: I got it from my colleagues who also have completed the course. By while just bumping into them and then ask where are you now what are you doing now how far is your studies and then they would ask why did you leave go on you know. And that is how we get along knowing more information.

I: And did you find it was the correct direction that you took, to further your studies?

P: Yeah I think I took a good direction, but in the end I couldn't cope. I realise you know you could still go back to it you know and the more you get the more you learn better. Maybe probably I would love to do it next year again because that would be like ample time for me there.

I: You couldn't ask them to maybe let you do the ... say half the modules the one year and the other half the following?

P: I think that was there I have chosen all in one I could I did half, I didn't realise I could do half and then the next half that would have made it much easier.

I: And nobody ... when you actually send a letter or told them that you're not going further anymore, did anyone speak to you about it?

P: Not really, not really.

I: Nobody asked you why you're not continuing and tried to change your mind or gave you other options?

P: No, actually when I stopped thereafter, like there probably was no other information, then I realise that I didn't do anything for that year. So until there came this year when they send me a sudden letter saying I will give you a year study leave. By then I've applied for psychiatry at that time and then psychiatry accepted me. So that was behind me saying at least I had a year's study leave opportunity. Then my letter was, of this course, is still sitting in matron's office, which she always reminded me that you do apply for study leave. Apply-apply, but she has turned me down almost three letters, which discouraged me, so I said if I complete this complete year and probably next year where I'll switch onto something then I would still go on with the course, I know I will have ample time thereafter.

I: So I couldn't quite ... the psychiatry you were accepted to go do psychiatry as well?

P: Yes.

I: And you got study leave for that?

P: I got study leave for that.

I: Oh, it is with a different ...?

P: Because they took on the new staff they've employed from ... they employed more staff. So because of two sisters per ... in the ward during the day, then they used their community sisters so there are extra staff. So that psychiatry letter came in 2006. Since 2006 it's also being sitting with the nursing manager, so two letters have been sitting here together, so and then she ... the second one she always said me there is no leave, no leave. And then she contacted the first one and she gave me the leave, so I wondered why it happened that way. So I said ok I will do psychiatry and complete it and if they give me an option to go back to my course I will complete it next year.

I: So you're actually doing psychiatry this year?

P: Yes, this year.

I: And where are you doing the psychiatry?

P: At Stikland hospital.

I: Is it ... what is it a diploma or is it your psychiatry year?

P: Yes.

I: Because you did the general nursing finish?

P: Yes.

I: Now I understand more or less. And in the work that you're doing, will the psychiatry actually help you with that?

P: We do have psychotic patients being admitted recently and epileptic seizures. I think due to the HIV patients, they are quite demented at

times and there are really bad cases that are coming in. I think after they've chosen me on the study leave they've been given me quite a few of these cases, which I needed to handle.

I: And have you found having gotten the study leave that it has helped you much more than when you didn't have study leave?

P: Yeah it would have helped me much more, much more.

I: And now with your psychiatry, you are completing?

P: I am going to start the 1 June.

I: Is it a six months course?

P: No. it is a year, also a year course. I complete next year. So they won't be able to have the course anymore, I think it's discontinued this is the last year that they will have it

I: Best of luck with it.

P: Thanks.

I: Then also your degree how did you feel how difficult was the diploma, the management one?

P: What I found it was ... I don't know if it fits in this part of it, the assignment, the assignment were too many per year and then we found we need to rush on the assignment because there is not much time and then work out, run to every library and every sort of information. Secondly they wanted it to be typed, that also caused a lot of problems for time. We are so used to hand written things and then we running around for that. I found I needed more time for that also and then eventually when you submit the assignment, now thinking and make up

you're mind you've tried all your best. Then they come in with a lot of comments on it, you feel so disheartened now. How do I cope now and then you read all over again and then sometimes you just want to put your head down and cry. I tried my best, but I just can't get through to it.

I: One of the previous participants said that they had about two assignments per month.

P: Yes.

I: Is that more or less?

P: Yes.

I: So if there is like one assignment will it be a bit easier?

P: I think that one assignment should be easier.

I: And the references and articles and things that you needed for the assignment, could you get it easily or ...?

P: Sometimes the books are not there you know you have to do a lot of research and running around and use the internet and things to get information. It's like your study is not only like sitting at home and getting it, you've got to wake up and run around and get the things.

I: So you ... can you also say that maybe you need ... there is some tools you actually need at home to make it easier for yourself?

P: Yes that could have been better you know.

I: If you for example if you can do your internet searches at home and then use the internet to like take out a book, ask them for a book, will ... so do you think those things should be in place also before you start?

P: Yeah I think that should be in place before I start, it would have been much easier.

I: And also because you said the typing if you have like a computer at home with a printer connected ...?

P: Yeah I've got that.

I: So if you type on it ... it is essential for you to have those things.

P: It's long since I did typing you know?

I: Don't worry sometimes I still type two fingers.

Question 5:

I: Then also your experience regarding the teaching medium and the course itself, how did you feel about it?

P: I found one lecturer was quite soft and then I had quite a few students around me and we would start bumping each other's elbows and start asking what is she saying you know you cannot pick up. And I don't know whether they do have a little button system where you press and tell the person to speak a bit louder. But the whole entire class found it to be moaning amongst themselves because they couldn't pick up, only the one that were in the front would pick up the voice, but at the back it was too soft, we were in the third and fourth row, but eventually the students lost out parts of their notes. They couldn't recall, so we had to wait for the students to complete our telematic to complete and then we had to go ask the student what did you copy out there, please lend us your book.

I: So the sound was also not ...

P: Ja the sound was very soft.

I: Which venue did you use, the Bellville one?

P: Yes.

I: And also what ... was it very familiar the way the teaching took place?

P: For me I was so used to all my teaching, being ... having a lecturer. It's like going to a school and looking at a teacher's face all the time, but I've found it interesting, but I needed to get more to it.

I: And the fact that if you have to ask a question you had to use the phone, did you ever do that?

P: I was a bit nervous; I may not hear properly or might ask the wrong question.

I: At the moment they have the telephone ... if you have your telephone with you, you can actually type a sms and then send it. So you don't need to speak and nobody will hear you also in the different venues, but the sms goes through to the lecturer on the screen that she's got in front of her and then she can actually answer your question there or she can say ok she will just complete this work and then she will answer the questions.

P: I've seen students doing that.

I: Do you feel that is a better option than the telephone?

P: For me I think the telephone is better, for me so I can interact quickly.

I: Ok, but you said about the sound?

P: Ja it is that I think we needed to or I don't know whether I needed to move more to the front but the entire row was with me. There were quite many students that said no this lecturer here is talking too slow we cannot hear.

I: So maybe she was just talking too soft?

P: Yes soft, very soft.

I: What did you find very difficult about the way of teaching?

P: Actually I never feel anything difficult about the teaching, the thing is for the first time watching these telematic sessions got me a bit nervous, and said no I need to get more used to it more what should I say to come up more to the lecturer to grasp more from them maybe in that way I could adapt easily to it, for me it was strange, very strange.

I: And what did you find was convenient about the way of teaching?

P: The way of teaching is very good there is no other complains about it, I think it was quite excellently done.

I: And the days and times it was scheduled, did it fit in with you working full time?

P: Ja, that is the only part, there is maybe one or two that I perhaps missed out because of working conditions and cannot get off, but I needed like one of the colleagues I used to phone to ask what's next. I never got to my preceptors; I should have been phoning them and asking them. I felt like I was going to be in trouble, so I used to get to a friend to say what did you copy what was the notes about, sometimes a student will learn you sometimes the student say I am too busy I cannot bring it across.

I: So you never made a phone call or send an email?

P: No I didn't.

I: But you felt you could do it; you just couldn't fit it into your programme?

P: Yeah I just couldn't move forward and pick up that receiver and speak maybe I could get more help, but I felt no maybe useless at times, I'm skipping out and losing out and it becomes quite difficult.

Question 6:

I: Then also the six question, how prepared or committed were you to really work hard? How do you feel about that?

P: Sorry?

I: How prepared or committed were you to really work hard?

P: It's to put enough time ...

I: I think it actually came through that you were really excited about the course and that you were really you were trying, you were using your days off and you were sometimes requesting off to do your assignments and things.

P: Yes, the enthusiasm is still there to complete.

I: And you found you use the correct study methods?

P: Yes, yes.

I: And could you find a balance between your studies and all the other social activities?

P: It was quite difficult for that to balance to all because sometimes at home they expect you to ... there is much expectations at home and then eventually when you come from Kwa-zulu you get a lot of visitors coming up there and piling up and taking of your time, that is also an irritating part of it because you need to fulfil your studies, you need to see your future. That makes it very very difficult. And I realised that I should put a stop to these things, you should limit and to think and put your studies first in life, that will make it more ... is to concentrate more for the future, for the more we can cope our home situation and work wise, we not gonna go through to anywhere.

I: I understand exactly what you're saying because I also have a house where there are always visitors and like weekends I know I cannot do anything. I can do it you know late at night when they leave or very early the morning.

P: Yes.

I: But then you usually so tired because of all the visitors that you just ... that's why ... I am on study leave at the moment and why I can actually continue my studies because I found with last year working and family and ... so I understand exactly what you're saying.

P: Yeah, I usually did my studies more towards the night, starting by 8h00 pm if the family is still around by 9h00 then I'll work from 10h00 until 1h00 in the morning, I'll give of my time then you must know you still have to get up the next day and you still have to care for this people and sort your family out and get back to work and come back. Then it was like a holiday resort in my place, ten to fifteen come one time, it is a big lot you know, it's very difficult and then you cannot tell family members anything that will hurt them you've got to accommodate them and you have to respect their culture you have to respect their rights and eventually you get let down because you need to pull through your studies.

I: No I can fully ... I know exactly how what you going through. What do you think can we do the department do to keep you motivated and to help you with your studies?

P: I think I would like to send me more guides how should I go about with myself, how can I manage the course in which we ... and if I'm encountering difficulty what should I do.

I: And that will help?

P: That will help me.

I: Seeing that you're talking about the study guides did you receive your study guides on time?

P: Yeah, one thing, I need to read it more and clearly to understand more information you know and to get along with it so it is all about ...

Question 7:

I: The last questions what were the consequences for you as a person when you did not complete your studies?

P: It is just that because when I lost out on the time management and I found I cannot complete certain things, I cannot read my books at times that's when I just lost hope of giving up the course and when I wrote the letter I didn't get the leave or I wrote for a day off and I didn't get the day off. I felt that the hospital say that you can go ahead and study, they promised us a whole lot of time to be given to us and then they turn my letter down, applying for these things I just felt that there was no time left, it's been ... you're occupied in all directions. As we look at it now as the years come you look at that the hospital said we can lift you up again, we can send you in a direction. That is why I have set my mind and said let me do my course this year and next year I am free to complete to go back to it to complete you know. I never give up.

I: That's good and what did you learn from this experience?

P: I have learned ... well it is not a good experience to leave a course, if I had continued it would have been a very-very good experience. It would have been a very good experience if I have completed the course and I would have been proud myself to say I have finished this and it would have made me feel happy, but I think deciding to leave the course because I didn't complete having started excited then I leave the course it makes me think back that I should go back for the future. I am sure I will meet new people if I joined back to the course if they accept me back. I will get more good information and I think my time management I must really directed in the way that I want to, make it to be and find time that I need, tell myself that I need more time to study and that I will do well.

Question 8:

I: Is there anything that I didn't ask that you feel is important for this study?

P: Not really, there is only one thing there was a change of venue for the programme when we had the telematic sessions they didn't they had it at Bellville I am sure we came up to Bellville. They don't use Unisa hey?

I: No.

P: One of that venue changes was we had to come up right up, which took me to Stellenbosch side.

I: Yes there is one in Stellenbosch.

P: Because like I did not actually have proper transport at that time and I had to rush to get transport, for wherever we had our venue was convenient even if they could have like in advance to tell us where they are changing the venues.

I: So when they change it, it mustn't be at the last minute, they must give you time to plan?

P: Yes, time to plan because it becomes very difficult and far away to travel.

I: Did you make ... I know they use DVDs, they do recordings of you know the lessons. Did you know about it that there is DVDs that you can also get?

P: Not really.

I: Ok. Thank you very-very much J.

33 min30 sec