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EXPLORING FIRST-YEAR NURSING STUDENTS' PERCEPTIONS ABOUT THEIR EXPERIENCES AND COPING MECHANISMS IN A PRIVATE NURSING EDUCATION INSTITUTION IN GAUTENG

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A research report submitted to the Faculty of Health Sciences, University of the Witwatersrand, in partial fulfilment of the requirements for the degree Master of Science in Nursing.

JOHANNESBURG 2022

DECLARATION

I Malefasa Victoria Onyeagbau declare that this Research Report is my own unaided work. It is being submitted for the Degree of Master of Science in Nursing at the University of the Witwatersrand, Johannesburg and has not been submitted before for any degree at any other university.

Signature:  Date: 10/11/2022

Student Number: 2293815
Protocol Number: M201181

DEDICATION

This research study is dedicated to my Grandparents, my supportive husband Chima Onyeagbau thank you for being a pillar of strength.

My sons Chinasa and Chinedu Onyeagbau's hard work, discipline and dedication makes every goal achievable.

ABSTRACT

First year nursing students' experiences are likely to influence the nursing population and the workforce. It is critical to understand the experiences that student nurses face during their first year of study and how these experiences affect their completion of the Nursing Diploma course. The purpose of the study was to explore and describe the first-year nursing students' experiences, how they impact on their academic performance and their coping mechanisms in a selected private nursing education institution (NEI) in Gauteng in order to make recommendations for how the NEI can assist the students. A qualitative exploratory descriptive design was used in this study. Data was collected from second year nursing students who were interviewed on their previous year's experiences in a private nursing institution in Gauteng by means of semi-structured telephonic interviews. The researcher ensured adherence to ethical principles and measures of trustworthiness throughout the study. Data was collected and analysed using Creswell's (2018) data analysis approach. Four themes were generated from the qualitative data collection and analysis. Recommendations for nursing education, practice and research were made.

Keywords: First-year nursing students, Experiences, Coping mechanism, Nursing Education institution, qualitative exploratory descriptive research

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CHAPTER 1

OVERVIEW OF THE RESEARCH STUDY

1.1 Introduction

This chapter provides an overview of this research study, which describes the process that was undertaken by the researcher to explore and describe the experiences and coping mechanisms of first-year nursing students in a private Nursing Education Institution (NEI) in Gauteng. The researcher begins with the background of the study, followed by the research purpose, research question, objectives and significance of the study. A brief overview of the research design, methods, and the presentation of the researcher's philosophical stance as well as operational definitions are also included.

1.2 Background of the Study

Nursing students' first-year experiences differ from those of students who are in their second, third or fourth year of study of a nursing diploma course. They are new to the tertiary environment, are affected by the new environment, by people they do not know, as well as new ways of learning new content. These students come from different backgrounds, and they enrolled in nursing courses for the first time, with no experience in being a student in tertiary institution neither in the field of nursing. Lekkas et al. (2016) said that first-year student nurses are bound to experience a change of environment, learning, teaching styles, technology, the burden of finances, English second language cultural diversity as well as a change in academic language.

English is taught as a compulsory subject in South African schools from primary school up to high school. According to Kangere (2016) English language proficiency levels remain very low. English is used as a medium of communication in academic

institutions all over the world, including South Africa. However, many students who enrol in nursing programs have English as a second language says Sailsman (2021). Due to English not being the students' first language, students struggle with academic challenges. The language barrier leads to difficulty with speech, reading, and comprehension. The use of nursing terminology as a language on its own, adds stress to nursing students who are already challenged with using English language in their academic environment, meaning nursing students have two new languages to adjust. Many nursing students do not make it to their final year of training, which is one of the main reasons for the shortage of nurses Drennan and Ross (2019). The shortage of nurses has become an ongoing global struggle (WHO 2020).

Kangere (2016) states that Baccalaureates students experienced negative and positive during their first year of nursing. The positive experiences mentioned by Multilingual/Multi cultural (ML/MC) students association were students' resilience, and self-motivation as well as the support that students give to each other. Negative experiences were also highlighted which include personal constraints, language differences, and academic navigation. The experiences of first-year nursing students in a private NEI in Gauteng which are a fee-paying and profit-based institution, could be similar to the experiences of first-year students elsewhere (Kangere, 2016). However, these experiences need to be explored to discover the unique experiences of the students in this setting.

A negative experience in this setting could have been academic navigation as there is a lot of material to be covered (e.g., anatomy and physiology), which contains a lot of nursing terminology that is new to students. Langtree, Razak and Haffejee (2018) stated that the academic environment on its own was a new setting for first-year nursing students. The medium of communication and the subjects taught present a new challenge to these students. These already strenuous conditions put more strain on first-year nursing students; especially those who exclusively used English as their second language; which leaves them unable to achieve good results and proceed to the next level or even complete their education.

Langtree, Razak and Haffejee (2018) stated that the clinical environment must be understood in a short amount of time. First-year students have to balance theoretical content and practical hours, which is physically and mentally demanding as students spend hours in the clinical environment learning new procedures and having to integrate what they learn in theory; put it into practice and still prepare for assessments and tests, within a very short period.

Kethru and Nuuyoma (2019) stated that the workload of the curriculum content affects students' performance. Kerthu and Nuuyoma (2019) commented that students were also placed in a clinical environment that was new to them. They were required to spend hours perfecting their nursing skills and also integrating their theoretical knowledge into practice. Theoretical learning came with experiences which required the students to internalise and process content. Mhlongo and Masango (2020) stated that the NEI curriculum was divided into different subjects, namely, Anatomy, Physiology, Infection Control, Psychology, Ethos, Sociology, and Pharmacology. Mhlongo and Masango (2020), said that the first-year nursing students needed to process all the new information within a short space of time. Mhlongo and Masango (2020) stated that there was a lot of nursing terminology to be learnt and nursing ethics to be internalized, as part of nursing etiquette and nursing culture.

According to Mhlongo and Masango (2020) the first-year nursing students were left feeling overwhelmed and unable to cope; with the limited time they had to adapt to all these new experiences. The students who took part in Mhlongo and Masango (2020) study felt pressured, exhausted, and overwhelmed by the high-level performance that was expected of them within a short period. Coopesami, Pete and knight (2017) commented that most first-year nursing students had never used a laptop or a desktop before and suddenly they were expected to know how to use laptops, desktops, and smartphones. Technology became a hindrance to them, hindering their chances of passing the course, rather than a tool for success as students were not technologically ready for online learning. Kangere (2016) stated that ML/MC students experienced diversity in both clinical and classroom environments. For instance, communication

between people with different cultures who did not share the same values and language became a challenge and created difficulty in terms of interaction with each other. This caused some of the students to feel isolated and unable to interact with their peers and lecturers, and therefore they could not get the help they needed to navigate the academic environment.

Kangere (2016) stated that some students faced financial struggles, as breadwinners for their families. The experiences of first-year nursing students showed that financial challenges were not addressed effectively by the private NEI where the study was performed and therefore, it affected the students' ability to focus on their studies. The students were left with no choice but to work and study at the same time. This sometimes led to them quitting the course due to their not being able to cope with their finances and the expectations of the course. However, there were some positive experiences in that first-year nursing students learnt to rely on each other. They found themselves supporting each other and they built relationships whereby they gained strength from each other, and that made them determined to finish their course. The selected NEI had no support structure that addressed students' various experiences. The students ended up not finishing their studies or achieving underwhelming results. It was therefore important to study the experiences of these first-year nursing students to understand them so that the issues they faced could be addressed.

1.3 Purpose of the Study

The purpose of the study was to explore and describe the first-year nursing students' experiences, how they are perceived to impact on their academic performance and their coping mechanisms in a selected private NEI in Gauteng in order to make recommendations for how the NEI can assist the students.

1.4 Research Question

What are the experiences of first-year nursing students, their perceived impact on their academic performance and what are their coping mechanics in a selected private NEI in Gauteng?

1.5 Objective

The objective of the study was to explore and describe the first-year nursing students' experiences, how they are perceived to impact on their academic performance and their coping mechanisms in a selected private NEI in Gauteng.

1.6 Significance

The study highlighted the experiences that have a negative impact on first-year nursing students and their coping mechanisms. The study findings assisted in making recommendations that can assist the NEI in which the study was conducted, Department on Health (DoH), Department of Higher Education and Training (DHET) and South African Nursing Council (SANC) to create solutions to assist first year nursing students. This will help the students with navigating through their experiences and enable them to complete their program and increase the number of nurses available to be employed in the healthcare system.

1.7 Research Design and Method

This study was a qualitative exploratory descriptive study using semi-structured telephonic interviews as the method of data collection. Qualitative explorative descriptive research is identified as important and appropriate for research questions which focus on discovering the who, what, and where of events or experiences and to gain insight from participants regarding a poorly understood phenomenon (Bradshaw, Atkinson and Doody, 2017).

1.8 Philosophical Stance

Denzin and Lincoln (2018) defined paradigms as human constructions, which dealt with first principles or beliefs by indicating where the researcher was coming from in order to construct meaning from collected data. Paradigms are important as they provide beliefs and pathways for scholars in a particular discipline. They influence what should be studied, how it should be studied, and how the results of the study should be interpreted. A paradigm interprets the researcher's philosophical beliefs and what the researcher hopes to achieve at the end of the research study. It explains the significance of the research process, the chosen methodology, and the meaning that is derived from the collected data. The researcher chose the interpretivist paradigm to conduct her study. According to Pham (2018), the interpretivist paradigm focuses on seeking to understand the standpoint of individuals with many beliefs about a phenomenon. The approach is based on a naturalistic approach of data collection. In this study, semi-structured interviews, note taking and audio recording were used to collect data. During the data collection process, the researcher sought to understand the lived experiences of the participants. Different perspectives were sought from several participants; each of whom had a different interpretation of their first year as nursing students.

This study was a qualitative descriptive study that used semi-structured telephonic interviews as a method of data collection. The researcher chose this approach as she could engage with the participants in a formal interview using a semi-structured interview guide. This allowed the researcher to get different responses from the participants who were actively involved in exposing their experiences as first-year nursing students. In the interpretivist approach the researcher could view the world through the participants' experiences. In this study the researcher explored the experiences of the first-year nursing students in a private NEI in Gauteng to gain a deeper understanding of the phenomenon.

1.9 Operational Definitions

Nursing students: This study focused on first-year nursing students enrolled for the Staff Nurse Diploma course (R171) in a private NEI in Gauteng.

Student experiences: Harvey and Newton (2004) stated that student experience was primarily the nature of the engagement of a student with learning and teaching. However, it may also include other aspects that impinge on learning, some of which are the responsibility of the higher education institution.

1.10 Chapter Outline

Table 1.1: Overview of the Chapters

Chapter	Description
Chapter 1	Overview of the Research Study
Chapter 2	Literature Review
Chapter 3	Research Methodology
Chapter 4	Presentation of Research Findings
Chapter 5	Findings, Limitations, Recommendations, and Conclusion of the Study

1.11 Summary

In this chapter, a brief overview of the study was given. This included the background, purpose, problem statement, the research question, the objective, research design, method and the setting. Relevant definitions were explained. The following chapter will present the literature review as it related to the experiences of first-year nursing students.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

Polit and Beck (2020) stated that a literature review is done to show how a research topic fits into a particular field of research and highlights a research phenomenon. Chapter two focuses on reviewing the literature related to the experiences faced by first-year nursing students in a private nursing institution in Gauteng. The review aimed to bring attention to what has been written by other authors in South Africa and all over the world relating to this phenomenon. The perusal of existing literature on the topic of interest helped the researcher to understand the meaning and nature of the identified research problem. Burns and Grove (2018) stated that a literature review is a presentation of what has been published about a research topic.

2.2 Nursing Shortages

World Health Organisation (WHO) (2020) stated that the ratio of nurses to the population in South Africa was 4.08 (184459) per 100 000. According to the South African Nursing Council (SANC) (2020) statistics the number of nurses in South Africa was 280,231. However, the SANC register consists of nurses who do not practice as well as those outside South Africa. This means that this number is not a true reflection of how many nurses we have in South Africa who form part of the healthcare workforce. Currently, the whole world including South Africa has a great shortage of nurses. Cullinan (2015) the South African department of health estimated that the country needed more than 44.700 new nurses. The negative experiences experienced by first – year nursing students are adding to the nursing students not completing the course and the country experiencing even more nursing shortages.

2.3 Curriculum changes

South African Nursing Council (SANC) has upgraded Nursing Education to higher Education status, in order to meet international standards. The first-year nursing students enrolled for the Staff Nurse Diploma course (R171) are the first group to be learning the new curriculum of the new course. A change in the curriculum also plays a major role in the teaching and learning of first-year students currently, because it comes with a new approach to teaching. This includes learning online, which both tutors and students are not familiar with. The private NEI in which the study was conducted was given low student intake numbers as it's a new curriculum and the tutors and students all need to acclimatize themselves to the changes. The role of nursing education is to mass-produce numbers of nurses to increase the supply of the country's health workforce Nyoni and Botma (2020). However, this will not be possible with the new program. SANC has given the NEI permission to train 30 students as their yearly intake for the new curriculum; and at the end of the program, they will produce a very small number of registered nurses because not all the student nurses will manage to complete the program at the same time or may never complete the program.

Matlakala (2016) said that transforming nursing education could be beneficial or it could be a total disaster for South African healthcare. She emphasised that the enhancement of the curriculum could produce skilful, knowledgeable, and experienced nurses. Our nurses will be highly trained critical thinkers who can make complex clinical decisions. On the other hand, there's uncertainty about the new qualifications as the NEI will not be able to produce enough nurses as the intake numbers are minimal. We are already experiencing shortages in the nursing workforce. The profession and the healthcare setting may experience a challenge regarding the demand and supply of qualified nurses. This will further increase the shortage of nurses in South Africa. Table 2.1 below shows the numbers of all nurses who are registered and enrolled as well as student nurses in Gauteng, as per SANC statistics; including nurses who are not practising in South Africa. Table 2.1 also shows the total number of nurses in Gauteng as per SANC (2020) which is not enough for the Gauteng health system.

Table 2.1: Registered, Enrolled, Student Nurses on the SANC Register for 2020

Gauteng Nurses	2020 Population	Nursing Manpower as at 2020/12/31				In Training as at 2020/12/31		
		Registered Nurses	Enrolled Nurses	Auxiliary Nurses	Total Nurses	Students	Pupils	Pupils N/A
Female Nurses	7 733 504	36887	14 059	15 688	66 634	3 615	1 112	561
Male Nurses	7 754 633	3313	1 272	1 052	5 637	819	131	65
Total number of Nurses	15 488 137	40 200	15 331	16 740	72 271	4 434	1 243	881

The experiences of nursing students in their first academic year may negatively or positively influence the nursing workforce as well as the entire healthcare system of South Africa. A first-year nursing student who has not received mentorship in the clinical area by a senior registered nurse will have a negative experience, it may affect their performance and lead to failure at the end of the academic year. When first-year nursing students are used as workforce without being accompanied by a senior nurse or clinical facilitator, they feel overwhelmed and end up quitting the course. This will affect the number of students completing the program timeously or even completing the course in the future; thus, leading to a shortage of nursing country-wide, or even globally as Matlakala (2016) pointed out that nursing shortages are a problem not only in South Africa but also globally.

2.4 The Effects of Adapting to new Strategies of Teaching and Learning Online

Sandvik et al. (2021), defined a teaching strategy as a generalized plan for a lesson. It includes structure, intentional objectives, and an outline of tactics implemented in a teaching strategy. Implementation of such a strategy would ensure that effective teaching and learning takes place. According to Goodwin (2022) online teaching as a teaching strategy, however, was found not to be suitable for every student and therefore did not meet all students' learning needs online as students were used to a classroom setting where there is interaction. According to Sandvik et al. (2021), a

learning strategy is a method used by an individual to organise themselves using a set of skills, to effectively and efficiently learn and achieve their learning objectives in a non-academic and academic setting. Each individual student employs their own method of learning, which theoretically, online teaching system disrupts.

Xu (2016) discussed the following teaching strategies to be used by educators to ensure effective teaching: Lecturing, high fidelity simulation, concept mapping, online courses, games, role playing, jigsaw classroom and case studies. Lecturing is a commonly utilised and preferred method appreciated by educators and students because it is interactive and allows students to ask questions immediately when they need clarity and thereby, educators can easily assess whether students are following and understanding what is being taught. This teaching method is used to present to a large group of students and to cover a lot of content at the same time. High fidelity simulation allows the educator to recreate a clinical scenario in an artificial setting where mannequins are used as patients to enable students to practice their clinical skills and be reasonably competent before performing a procedure on a patient. This gives students a confidence boost as they can practise techniques over and over before performing a procedure on a live patient. According to Xu (2016) concept mapping encourages students to represent ideas visually. This gives them the opportunity and ability to develop skills in analysing, evaluating, and thinking critically. As it is a visual presentation it is always easier to remember. Online courses are used as a form of remote teaching which allows the students and the educator to be taught anywhere where they can access a computer and Wi-Fi connection. It is deemed to be cost effective as the student does not have to travel to class. The educator can plan class activities and assessments in advance. Lectures can be recorded, allowing the students to listen to the recordings again and again until they grasp the content. Xu (2016) says games are always fun, and students learn easily when they enjoy what they are being taught, even when the content may be considered uninteresting. Games bring an open, and enjoyable atmosphere that is ideal for learning and enhances content understanding and communication between the students and their educator. According to Xu (2016) in roleplaying, students can play a part that represents someone as a character or to demonstrate an event. It helps students to

get out of their shell if there are shy. They can learn how to communicate on front of others, and it helps them to develop skills such as conflict resolution. Xu (2016) explains that in jigsaw' classroom students form groups to work together to resolve a task. The group allocates one member to each subject matter to search for data and bring back to the group. Xu (2016) says case studies are realistic and complex, which help bridge the gap between theory and practice. Case studies are realistic and complex stories that help bridge the gap between theory and practice. Case studies assist students to relate theory to practical situations. They assist with problem-based learning so students can come up with solutions when they are faced with patient problems that require them to act swiftly as they are working with human lives, and every minute wasted is crucial. Educators present real life patient scenarios, ask questions, and require participation from all students.

2.5 Factors that Influence the Choice of Teaching Strategies

Sandvik et al. (2021) explains that students whose home and schooling background differs from the new university environment, will find it difficult to adjust to the university teaching and learning strategy. According to Sandvik et al. (2021), the teaching strategy can influence the learning outcomes negatively or positively. If the students are taught using a learning strategy that is not conducive or suitable for the type of students taught, they will not benefit or learn from it. The objectives of the lesson will not be achieved by the students.

2.6 Factors that Influence Approaches to Learning

According to Qureshi, Larson and Vishnumolakala (2022) a learning approach is an adopted learning method or style used by students in a learning environment. When students are under the impression that there is too much content to be learned, they tend to apply surface learning.

Qureshi, Larson and Vishnumolakala (2022) says students have different learning methods. One may prefer writing down notes while the educator is teaching and referring to the notes later; while another student might prefer to listen and then make

notes after the lecture to internalise the information that was taught in class. According to Qureshi, Larson and Vishnumolakala (2022) the students' choice of approach is determined by teaching factors, such as assessments, subject workload, type of learning method, lecturer enthusiasm when teaching and feedback students receive from lecturers. The manner in which a lesson is presented plays an important role in determining how students process the information being taught. If the lesson is presented using role-playing for instance, it provides a stimulus which may intrigue the students and grab their attention.

2.7 Financial Impact on First-year Nursing Students

According to Kangere (2016), one of the negative experiences for Baccalaureate nursing students was personal constraints. These included a wide array of factors such as a lack of finances, which play a huge factor in determining if students pass the academic year. This is because they need to pay fees and require study materials. Matlakala (2016) reported that the transferring of nursing education to higher education will probably result in students' loss of employee status with the provincial departments of health and consequently the loss of available stipends. This leads to a further financial burden on student nurses. Mirna et al. (2018) raised the issue of dysfunctional bursary systems. Most of the participants in their study were not satisfied with the student bursary system, which their college instituted in 2012. Their dissatisfaction was because management did not the bursary terms and conditions clearly. Secondly, they had no knowledge of which students would qualify for the bursary. Thirdly, there were reports that management only paid out the bursary when the students were already four to five months into the course, which added to the financial challenges students were already experiencing. Lastly, the lump sum received that was finally received was less than what was promised. The students were affected negatively as they could not afford their daily cost of necessities such as food, transportation, uniforms, accommodation, textbooks, research, and fees. This added pressure on them and affected their studies as some resorted to working overtime, thus reducing the time that was supposed to be spent on schoolwork. Bvumbe and Mtshali (2018) recognized the importance of a well-defined and nationally

standardized funding model for nursing students that would better meet students' direct and indirect academic needs.

2.8 Academic Experiences in a Theoretical and Clinical Learning Environment

Acording to Kethru and Nuuyoma (2019), student nurses academic experiences of the theoretical and clinical learning environment. The issues that were discovered as affecting the students' experiences in the theoretical and clinical environment were the: environment for learning, learning approaches, languages used for learning, strategies used for teaching and factors that influence learning. Some of the most common suggestions from students was that tutors should present the lecture with more passion and make the lessons more interactive and not boring for students to remain focused. Some participants stated that lecturers should be approachable and accommodate student's needs. Many participants also stated that lesson times were short and therefore should not be disturbed by announcements in the middle of lessons. They stated that lessons were fast paced, and that content delivery was too fast. Students stated that the teaching strategies and classroom environment being created by their tutors had demotivated them and that they had coped by making noise and sleeping in class. The tutors were not specialized in what they were teaching therefore these left students feeling that their tutors were under qualified. According to Vasset et al (2021). Students expressed the view that tutors should give guidance and lead in discussions The tutors also explained their teaching role in detail as to what it entails to be a subject expert, explaining the content, guiding discussions, and keeping the discussion alive as some of their responsibilities. This was to assist the students to know the tutor's role and their roles as students to achieve a conducive learning and teaching environment. According to the students, a lack of these characteristics caused the students to feel demotivated. Leading to a low program achievement rate and inability to continue with the nursing program. Causing a further decline in the nursing workforce.

2.9 Factors that Influence English Second Language (ESL) students

According to Sailsman (2021) ESL students' academic performance was below average compared to the students whom English is their first language. According to Sailsman (2021) in nursing education, it was discovered that ESL students had more learning difficulties and lower academic achievement, than their native, English-speaking counterparts who had English as their first language, which makes it easy for them to communicate and navigate the academic environment because the language was not new to them, so it did not add any form of stress or barrier to learning. Verbal communications such as reading, writing and self-expression had been reported as problematic for some ESL students. For them to understand a message they had to first translate it into their mother tongue to make sense of the message and then bring it back to English. This exercise is time-consuming, especially when they are faced with a lot of content to cover in both theory and practice.

Kangere (2016) explained that MC/ML students need more time to study and to take timed tests. Time is a barrier with regard to how much of it is needed by MC/ML students. This group of students benefited from supportive programs such as writing classes and were given more time to take tests, and active learning activities to assist them in bridging the gap of their barrier to learning. Kangere (2016) revealed that some ESL students requested more time to complete tests and assignments from their faculty. They also recorded lectures on devices so that they could review these at their own time and pace, for better understanding. MC/ML students are unlikely to achieve desired results due to not having English as their first language or even passing their first year.

2.10 Gap in the Literature

The literature reviewed in this chapter showed that all first-year nursing students are impacted by their backgrounds and nursing shortages leading to students being expected to be part workforce. According to Qureshi, Larson and Vishnumolakala (2022) the effects of adapting new strategies of teaching and learning online, factors that influence the choice of teaching strategies, factors that influence approaches to

learning can negatively affect first year nursing students. Kangere (2016) stated that negative financial impact on first-year nursing students, negative academic experiences in theory and practical, other factors that influence ESL students and negative emotional experiences leads to developing coping mechanism for the negative experiences. Lekkas et al. (2016) raised the issue that students, who enrol in nursing courses for the first time, come from all different walks of life with different backgrounds. Their experiences are influenced by their background, and some have positive first-year experiences while some have negative ones. Lekkas et al. (2016) stated that due to different backgrounds the first-year nursing students are bound to experience a change of environment, learning styles, teaching styles, technology, the burden of finances, having English as a second language, cultural diversity as well as a change in academic language. All of these factors can have a negative effect on the first-year nursing students.

Furthermore, Sommers and Wirawan (2019) stated that more research is needed to determine the variables linked to the first-year nursing students' first semester grand point average (GPA) score. Variables that may affect the first-year nursing students negatively can be a combination of admission factors such as educational background, first language, and factors that may occur during the first semester (e.g., transitioning to tertiary environment, study habits or teaching methods).

The researcher identified a gap in the literature on first-year nursing students demographics as stated by Sommers and Wirawan (2019). Their character analysis profile could assist in creating better understanding of the effects of these problems on first year nursing students' academic success. Matlakala (2016) stated that there was a global shortage of nurses. The gap identified in the literature is that there are no working solutions to assist first year student nurses to be able to pass the program in order to alleviate the current workforce shortages stated in Langtree, Razak and Haffejee's (2018) article. According to Sommers and Wirawan (2019) the gap in the literature was also that there was a need to study what would be required to ensure

a smooth transition and adaptation for first year nursing students to the new academic environment. The researcher aimed to address this gap through conducting this study.

2.11 Summary

In this chapter, the literature review was done by the researcher to understand the meaning and nature of the identified research problem and to show the gap in the literature that the study was addressing. The following chapter will be discussing the research methodology followed in this study.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 Introduction

In this chapter, the researcher will present and discuss the research design and method, the research setting, the population and sampling strategy, data collection and data analysis of this study, as well as the validity, reliability, and ethical considerations relevant to the study.

3.2 Research Design and Method

This study was a qualitative exploratory descriptive study using semi-structured telephonic interviews as a method of data collection. Qualitative exploratory descriptive design is important and appropriate for research questions focused on discovering the "who, what and where" of events or experiences and gaining insight from informants regarding a poorly understood phenomenon, as stated by Bradshaw, Atkinson and Doody (2017). The researcher chose exploratory descriptive research design to explore and gain in depth description of the first-year nursing student experiences, their academic impact and their coping mechanisms in a selected private NEI in Gauteng as well as assisting the students. The researcher used a qualitative approach in the study whereby the data can be in a form of text, pictures, or sound, which can be collected and analysed as stated by Bradshaw, Atkinson and Doody (2017). A qualitative approach assists in deepening the understanding of the subject matter or phenomenon. According Polit and Beck (2020) qualitative research focuses on generalization and prediction. Burns and Grove (2017) averred that the quantitative research design method is a formal objective, rigorous systematic process for generating information about the world, to describe life experiences and give them significance. A qualitative descriptive design was chosen by the researcher to emphasize the description of the human experiences of the experiences of first-year nursing students in a private nursing institution in Gauteng and the coping mechanism employed by these nursing students when dealing with negative experiences. According to Polit and Beck (2020) a descriptive phenomenon, describes the

conscious experiences of the everyday lives of the first-year nursing students, which describes what they hear, see, believe, feel, remember, decide, evaluate, and act.

3.3 Research Setting

The study was conducted in a private NEI in Gauteng and involved second-year nursing students. The reason why this specific NEI was chosen is because it offers the new three-year qualification diploma in nursing program (R171) which has second year nursing students (who were first year nursing students in the previous year). This was the course and group of students the researcher was interested in.

3.4 Population

According to Burns and Grove (2017) a population is the group of persons or objects that are of interest to the researcher who or which, meet the criteria that the researcher is interested in studying. The total population in this study was all the nursing students registered for the second year of the Diploma in nursing program (R171) in 2021. The course had n=30 students who were first registered in 2020. Some of the students (n=6) deregistered from the course as they failed to pass the first year; leaving a total population of n=24 students.

3.5 Sample Size and Method

Burns and Grove (2017) stated that: “A sample is a subset of the population that is selected for a particular study, and sampling defines the process for selecting a group of people, events, behaviours, or other elements with which to conduct a study”. Total sampling was used in this study to ensure that the sample is composed of participants who have the most characteristics, representing the typical attribute of the population

The total population of n=24 was approached to ask them for their permission to participate in the study. The sample size was n=16 willing participants, the other n=8 were not willing to participate. The researcher handed the participant information

sheets, participant consent forms, audio consent forms and questionnaire guide. Then the researcher explained the process as well as the documents to the participants. In a qualitative study a sample size cannot be determined in advance because it is only established when data saturation point is reached. Polit and Beck (2020) stated that the researcher assesses issues that are raised by the participants, their variations, the richness and depth of the data and the point at which data is being repeated and becomes redundant as it has reached the data saturation; thus, determining the sample size. The exact sample size was determined by data saturation. This is when no new information was discovered during data analysis. Data saturation according to Creswell (2018) is reached when participants start giving the same information that has been given by previous participants. Data saturation was reached after the tenth interview.

3.6 Inclusion and Exclusion Criteria

According to Brink et al. (2018) inclusion and exclusion criteria allow the researcher to decide, whether the object or person can be regarded as a member of the study population. Participants included were students registered on a three-year diploma in the nursing program (R171) who were in their second year and had experienced either positive or negative experiences during their first year of study. Participants excluded were nursing students who had traumatic experiences in their first year of training e.g. rape, gender-based violence etc. because they would have a different experience from other students in their first year; due to the trauma. Students who had disabilities or special needs were also not included because their experiences would not be the same as other students, due to their disabilities.

3.7 Pilot study and Data Collection

According to Brink et al. (2018) a pilot study is a small-scale study conducted prior to the main study, on a limited number of participants from the population to be sampled. According to Brink et al. (2018) costs can be avoided in the actual study, due to the pilot study which shows the value of doing a pilot study. The researcher conducted a pilot study on five participants to predict how the research would proceed, to highlight any limitations, and to test whether the process worked for the study.

The researcher contacted the NEI and asked for permission to conduct the study on second-year nursing students in the Diploma program (R171). The NEI granted the researcher permission and access to the selected total population's contact details. The researcher contacted their class lecturer to assist with facilitating the perfect timing according to the selected population's availability as determined by their timetable, to enable the researcher to meet the selected total population.

A meeting was scheduled, the students were briefed by their lecturer about the meeting. The researcher met with the students and introduced her study and handed them consent forms for participation and for audio recording as well as information sheets. The researcher collected consent forms from the n=16 willing participants. Semi-structured telephonic interviews were set up at a time that was convenient for the participants. A semi-structured interview guide (see Appendix D) was used to collect data. According to McGrath et al. (2019) an interview guide enables a researcher to prepare the questions or the topics to be covered in the interview in advance, explores the language, the clarity of the questions, and aspects of active listening, thus allowing the interviewer to explore issues brought up by the interviewees. There were n=5 participants from the n=16 participants participated in the pilot study to pilot test the interview guide. The researcher adjusted the questions on the interview guide based on the results of the pilot study. The Interview Guide was adjusted as the researcher realised after conducting a pilot study that she needed to add a third question on how students coped with their various experiences (see Appendix D).

3.8 Data Analysis Process and Steps numbering no 3.8

The data analysis process and steps were used following Creswell (2018) step-by-step approach for qualitative data analysis guidelines. The researcher used the following steps: organizing and preparing the data; reading through all the data; coding of the data; searching for themes; reviewing the themes; defining and naming the themes, and report writing. Each of these steps will be described below.

Step 1: organizing and preparing data

The recorded data was assigned codes to ensure anonymity and it was then transcribed verbatim. During this process, the researcher familiarised herself with the data, which allowed the researcher to correct mistakes that occurred during transcription.

Step 2: reading the data

During this phase, the researcher began reading the data collected so she could familiarise herself with it. Reading the notes line by line and listening to the audio repeatedly to understand the content assisted the researcher to gain insight into what the participants were saying.

Step 3: coding the data

The researcher looked at the notes she had made and listened to the audio recordings to search for clusters of information or chunks of data and assigned a code to each chunk. This was in the form of a word or phrase describing the chunk of data. The researcher used the codes or labels in the actual language of the participant, making it more authentic. Co coder checked the codes to ensure consistency of the coded data by the researcher.

Step 4: searching for themes

The quality of the qualitative research was ensured when the researcher ascertained that she had accurately depicted what the participants conveyed, by making use of member checking as per Creswell (2018) guidelines. The researcher worked with a colleague who had conducted a qualitative study previously to ensure that she was on the right track. Themes were identified by analysing the coded data and a table presentation of themes was done, so that the codes could be grouped into potential themes, followed by putting together the coded data that were identified, which then led to the researcher being able to formulate theme categories. According to Creswell (2018) guideline themes are identified during the coding process. The researcher used the identified themes to build additional layers of complex analysis. From the identified themes a phenomenon was explored and described by the researcher from the perspective of individual participants' data and was supported by diverse quotations from the participants' interviews.

Step 5: reviewing the themes

During this phase, the researcher reviewed the themes to understand how they could be used in the qualitative narrative. This included deciding which passages of narrative conveyed the findings best. During the reviewing of themes, the researcher could check with the co-coder for any inconsistencies, or they used member checking to determine the accuracy of the qualitative findings, through taking the final report or specific descriptions or themes back to the participants and determining whether the participants felt that they were accurate.

Step 6: defining and naming themes

During this phase, the researcher named all the themes and interconnecting themes and gave them a meaningful description, highlighting what was interesting under the theme. Descriptive information about each participant was conveyed in a table with quotes.

3.9 Report Writing

Denzin and Lincoln (2018) said that asking questions such as: "What were the lessons learned?" captured the essence of the idea that the researcher wanted to portray during the study. The researcher explored the experiences of first year nursing students. Themes emerged and were used, together with a subtheme and accompanying quotes from the narratives, to create a report where the themes were arranged coherently to produce a final report addressing the topic being studied, the objectives, and the research questions. The researcher compared the themes and subthemes of the collected data to make sure there was a correlation. In the final step of the data analysis, the researcher interpreted her findings and produced a report of her findings which is in the next chapter.

3.10 Trustworthiness

Denzin and Lincoln (2018) stated that trustworthiness was the term used to assess the validity of the information as it measured the objectivity of the outcome, to avoid

the results from appearing to have come from the researcher, rather than from the interviewees. Researchers demonstrated the trustworthiness of a qualitative study by using the following criteria: credibility in preference to internal validity, transferability in preference to external validity/generalizability, dependability in preference to the reliability, and confirmability in preference to objectivity. These principles were applied during the study as described below.

3.10.1 Credibility

Nyathi (2018) states that credibility is preferred more than internal validity in quantitative research. Denzin and Lincoln (2018) say ensuring credibility is one of the most important factors in establishing trustworthiness. The researcher used peer review of codes. The researcher's emphasis was on whether the informants considered that their words matched what they intended. Peer debriefing, where the researcher asked for assistance from a colleague who was studying the same degree and understood the research and the context of the study, to debate each step of the research process.

3.10.2 Transferability

Since the findings of a qualitative project are specific to a small number of individuals, it is impossible to demonstrate that the findings and conclusions apply to other situations and populations. However, thick descriptions of the data were provided. Also, the data collection continued until data saturation was reached.

3.10.3 Dependability

Denzin and Lincoln (2018) stated that dependability could be ensured by employing a prototype design which would produce the same results if another researcher performed the same study. The researcher assured dependability by reporting the process of the study in detail.

3.10.4 Confirmability

Critical to this process is the “audit trail”, which allows any observer to trace the course of the research step-by-step via the decisions made and the procedures described. By making a digital recording and transcribing the data, the voice of the participant was captured so the researcher could not have provided biased interpretations of what was said. All digital recordings and transcripts are to be kept safely for two years after completion of the study in case it becomes necessary to check the validity of the research. The researcher's supervisor assisted with the analysis process.

3.11 Ethical Considerations

Polit and Beck (2020) suggested that the following ethical considerations had to be adhered to in research studies: Voluntary participation, the right to anonymity and confidentiality, justice, informed consent and oversight by an institutional review ethics board. In this study, these ethical considerations were implemented as follows.

3.11.1 Voluntary participation

Participants were not coerced or forced to participate. They were given an explanation in the form of an information sheet. This sheet contained information regarding what the study was all about. It was explained to them that they could decide not to participate at any given time. Rewards were not promised to the participants.

3.11.2 Right to anonymity and confidentiality

The transcribed data was allocated a code to ensure that no students interview could be identified; therefore, upholding the ethical principles of confidentiality and anonymity. Their names were not used in the study. Instead, they were assigned codes to maintain anonymity.

3.11.3 Justice

Polit and Beck (2020) stated that in research ethics the principle of justice seeks to ensure that the participants who could not protect their interests should not be exploited to advance new knowledge. The study was approved and monitored by the University of Witwatersrand research committee. Participants were not subjected to any physical harm, discomfort, or psychological distress. The information sheet contained contact information for the researcher supervisor in case the participants needed to report something about the researcher.

3.11.4 Informed consent

According to Polit and Beck (2020) giving informed consent should be able to provide sufficient and essential information in an understandable manner, which would assist the potential participants to make an informed decision as to whether they wished to participate in the study.

To satisfy the guidelines, the following were used as per the University of the Witwatersrand's guidelines:

- **Appendix A:** Information sheet for participants.
- **Appendix B:** Consent to participate in research.
- **Appendix C:** Consent from the participants to use digital recording.

3.12 Summary

In this chapter the research design and methods were discussed. Other elements discussed and addressed were the population, the sampling, sample size, the data collection process, data analysis, and ethical issues. Chapter 4 will discuss the findings based on the data collection.

CHAPTER 4

RESEARCH FINDINGS

4.1 Introduction

In this chapter the researcher will present the research findings and discuss them. Firstly, the participants demographics, emerging themes and subthemes are presented. This is followed by the discussion of the demographics and themes and subthemes. A summary of the chapter is given lastly.

4.2 Participants Demographics

Participants' demographics are shown in table 4.3. Their information was used by the researcher to provide data determining whether the participants represented a sample of the target population. The table contains the demographic data of the sixteen participants of the study. The demographics are age, sex, race, language, nationality, marital status, dependant, highest qualification, and previous nursing experience. There were fourteen female participants and two male participants. The participants' ages varied from twenties to forties. The study participants were from different races and nationalities. There were participants who had prior nursing experience and a some who had no nursing experience. Two of the participants had English as their first language.

Table 4.1 Participants demographics

Participants	Age	Sex	Race	Language	Nationality	Marital Status	Dependents	Highest Qualification	Previous Nursing Experience
1	30	Female	Coloured	English	South African	Single	0	Pre-Nursing Program	Yes
2	24	Female	White	English	South African	Single	1	Pre-Nursing Program	Yes
3	34	Female	Black	Isizulu	South African	Married	4	Enrolled nurse Auxiliary	Yes
4	40	Female	Black	Venda	South African	Single	2	Enrolled nurse Auxiliary	Yes
5	35	Male	Black	Igbo	Nigerian	Single	2	Enrolled nurse Auxiliary	Yes
6	37	Female	Black	Shona	Zimbabwean	Male	3	BSc Psychology	None
7	32	Female	Black	Isizulu	South African	Single	1	Enrolled nurse Auxiliary	Yes
8	39	Female	Black	Venda	South African	Married	2	Enrolled nurse Auxiliary	Yes
9	27	Male	Black	Isizulu	South African	Single	3	Matric	None
10	35	Female	Black	Isizulu	South African	Single	2	Enrolled nurse Auxiliary	Yes
11	36	Female	Black	Venda	South African	Married	2	Enrolled nurse Auxiliary	Yes
12	26	Female	Black	Sesotho	South African	Single	0	Enrolled nurse Auxiliary	Yes
13	29	Female	Black	Isizulu	South African	Single	4	Enrolled nurse Auxiliary	Yes
14	25	Female	Black	Sepedi	South African	Single	0	Grade 12	None
15	25	Female	White	Afrikaans	South African	Single	1	Grade 12	None
16	32	Female	Black	Ndebele	South African	Married	2	Grade 12	None

4.3 Emerging themes

Four themes and ten subthemes emerged during this data analysis process in table4.5 namely:

1. Poor planning, subthemes: Compact learning, change of teaching strategy, late student funding, technological challenges and student readiness/preparedness
2. Program aids integration of theory and practice
3. Negative effects of the program, subthemes bring social life disruption, brings physical stress, brings mental stress, brings financial stress and unconducive learning environment
4. Inability to cope with the stressors

Table 4.2 Emerging Themes and subthemes

THEME	SUBTHEME	PARTICIPANT QOUTES
1. Poor program planning	1.Compact learning	*"Okay, the challenges I had was umm too much schoolwork. I needed to submit a lot of assignments within a limited time and there were examinations to prepare for as well. So, I felt I was really lost." (Participant 6, age: 37, previous qualifications: BsC Psychology)*
	2.Change of teaching strategy	*""Online class affected me because I'm a person who usually learn from body language the expressions and I can remember things. You know some people talk with their hands and other people talk with expressions and it makes sense to me and going online was very difficult because it meant that I had to go back to my books and learn that the subject on my own and as much as the lecturers were available but it wasn't the same thing because when I needed clarification, other students needed clarification too so it meant that the lecturer would respond, very late it was difficult for me".*
	3.Late student funding	*"Well, we have been for the longest time been waiting not received our stipend and being able to work overtime it's been very difficult because we still have families and responsibilities that we need to care for. It's been very challenging quiet emotionally and mentally challenging". (Participant 2, age: 26, previos qualifications enrolled nursing auxiliary).*
	4.Technological challenges	*"Yes, we were writing online, and the problem was if were given assignments, we must submit that in time sometimes because of network problem, sometimes we were just copying the tests that we were writing, and others they end up not registering because they send, and it never reached due to network problem." (Participant 1, age: 30,previos qualifications pre nursing).*
2. The program aids integration of theory and practice		*"So, I am saying that uhm doing theory first then practical makes things much easier and it untangles the work because with the knowledge that you have in theory, put it into practical makes you understand what you are doing, so you are not going into it blind, and you don't know what you are actually doing and that was the great part of it." (Participant 1, age: 30, previous qualifications pre nursing)*

3 .Negative effects of the program	6.Social life disruption.	*"My children didn't understand why I had to read all the time and not spend time with them, or help them with their homework, or even play with them, like I used to do. So, it was for me, it was depressing." (Participant 6,, age: 37, previous qualifications BsC Psychology).*
	7.physical stress	*"Sometimes you won't have to sleep because there is a lot of work. You really need to study to pass, but if you don't work, you will fail my biggest fear right now is to be deregistered." (Participant 7, age: 32, previous qualifications enrolled nursing auxiliary*
	8.mental stress	"It affects me emotionally. It affects me also mind when I'm trying to read. Like I said, I'm reading with the stress and then I see that there is a lot of work all day I try to find a way doing the assignments and try to find the information and then the writing the test at the same time and then I see that is too much for me". *(Participant 4, age: 34, previous qualifications enrolled nursing auxiliary*
	9. financial stress	*"So, it was a bit challenging I had to spend too much in buying data, because you must work on website, so you have to log in and it is too much expensive data. All these things combined cause stress and pressure." (Participant 5, age: 35, previous qualifications enrolled nursing auxiliary).*
	10.Unconducive learning environment	*"We did not understand very well and sometimes we never got that one-on-one interaction with our lecturers, which really impacted on us negatively". (Participant 6, age: 37, previous qualifications BsC Psychology).*

4.4 Discussion of Demographics

The researcher noticed that participants without previous nursing experience had more challenges. Participants without dependants had no financial struggles, however their counterparts who had dependents were struggling financially. Participants who had English as their second language had a more positive experience as compared to their counterparts. These demographics have revealed the factors that influenced the participants' studies either positively or negatively.

4.5 Discussion of themes and subthemes

The four themes and ten subthemes are discussed as follows:

4.5.1 Theme 1: Poor Program Planning

This first theme that emerged raised the notion that the program was poorly planned and not well organised; with a very compact structure that put students under pressure, due to limited time. The sub-themes under this theme were the following: Compact structure, Limited time, Student funding, Technological experiences and Student readiness/preparedness.

Sub-theme 1: Compact structure

Nine participants suggested that the course structure was too congested, with a lot of course material. The content that was taught needed more time to be delivered by the lecturers and to be absorbed by the participants. The content needed to be interactive as well as being able to allow consultation and feedback. There are a number of periods to be taught in clinical and theory, to meet the Education and training requirements for the qualification as stipulated by SANC. This is what one participant 6 said about the challenging workload within a very short space of time:

> *"Okay, the challenges I had was umm too much schoolwork. I needed to submit a lot of assignments within a limited time and there were examinations to prepare for as well. So, I felt I was really lost, then we had to stop face to face lectures and start online classes which were quite different from physical class. So, it was a bit challenging."*

Online learning was a new way of learning which required a mind shift from the traditional way of learning and teaching. The participants also raised a point that because the program is a new program done online, they were the first intake for the program. According to Xu's (2016) teaching strategies, online teaching can be beneficial if implemented correctly. Participant 2 stated:

> *"Okay, so for me personally it was quiet challenging in the beginning especially because we have a new course that was rolled out in our year, we were the first*

intake for the new online course, so we faced a lot of challenges in trying to establish uhm … I'd say ground rules on how to run the program as you are trying to get it established when you start with something it has its challenges, but we have really grown at the campus as a student at understanding what the program is required from us and what is expected from us and umm it has had umm many challenges."

According to Matlakala's (2016) study, the new nursing program was bound to have unforeseen challenges. She states that transformation in nursing education could bring about opportunities and experiences. Migrating from legacy courses to new qualifications is a lengthy process and the participants, being the pioneer group, will be faced with challenges. Participant 6 stated that:

"Yes, it was so different, at first I didn't bother myself to study up until the early mornings, but then this time we are having another syllabus, new curriculum where we have more modules and last time, I only had three, now I have about five modules per semester or six now, I am going to have seven that I am going for my next semester for the second year, so you see you have to put more effort in this otherwise you will not make it."

Sub-theme 2: Change of teaching strategy

Participants suggested that there was a lot of content that needed to be covered and time was very limited considering other aspects of learning that had to be integrated e.g., assignments. research, clinical experiential learning, clinical practical hours, assessments, and personal duties. According to Sandvik et al. (2021) a teaching strategy can influence the learning outcomes in a positive or in a negative way, if the teaching is not structured in an effective manner for the learners, it will have a negative impact on them. Participant 12 stated the following:

"Online class affected me because I'm a person who usually learn from body language the expressions and I can remember things. You know some people talk with their hands and other people talk with expressions and it makes sense to me and going online was very difficult because it meant that I had to go back to my books and learn that the subject on my own and as much as the lecturers were available but it wasn't the same thing because when I needed

clarification, other students needed clarification too so it meant that the lecturer would respond, very late it was difficult for me".

Participant 16 stated the following:

"In the middle of the course we were now told that we are going to do online learning one thing which was the first thing first time for everyone, so, it was quite challenging".

Sub-theme 3: Late Student Funding

Student funding caused a lot of frustrations for the participants as they did not receive funding on time from the National Students Financial Aid Scheme (NSFAS). However, they had to still pay for their fees, buy data, upgrade their learning devices, textbooks, buy uniforms, pay for transport and care for their dependents and themselves financially without any means of generating an income.

According Bvumbe and Mtshali (2018) lack of finances poses a huge risk factor for failure as it can impact on the academic success of a student negatively. Participant 2 stated the following:

> *"Well, we have been for the longest time been waiting for the bursaries, obviously not received our stipend and not working overtime, it's been very difficult because we still have families and responsibilities that we need to see to, and there's been no income coming in, so it's been very challenging quiet emotionally and mentally challenging. Without a salary coming in it does make it extremely difficult."*

The manner in which the program was structured, according to the participants, did not allow them any spare time to earn money to meet their financial needs. Participant 2 stated the following:

> *"Yes, so our program runs from Monday to Friday, but it is allocated according to the way SANC wanted the program to be structured, so you have a certain amount of theory hours a week and clinical hours a week. Due to the way it's structured you can't be working seven days a week unfortunately, because we*

have classes and time scheduled from Monday to Sunday. I am unable to work overtime during the weekend to substitute my finances."

Sub theme 4: Technological experiences

Technology was a challenge for the participants as they were abruptly introduced to online learning in the middle of their course. The participants found the technology not to be user friendly due to access and added expense. Some participants stated that they were not previously exposed to navigating technological gadgets (e.g., laptops and smartphones). The findings of Coopesami, Pete and Knight's (2017) study showed that technological/equipment readiness play an important role in students' academic success. Participant 1 stated the following:

"I learned more about computers and laptops; we were not exposed to it that much."

A participant stated that online learning was a new way of learning and was challenging. Participant 5 stated the following:

"So, if we are really lost, when we had to go online learning and is quite different from physical class."

Having a test online was a challenge to some participants. Participant 1 stated the following:

"So, online classes, online tests were difficult because they are available for a short period of time. So, the paper was out of 50 and they only give you an hour to do it. You become nervous, you're checking the time, some of the questions were actually very long, and you had to read in English language to understand what they are asking in the multiple choice questions"

Submitting an assignment was a challenge. Participant 1 stated the following:

"Yes, we were writing online, and the problem was if were given assignment, we must submit that in time sometimes because of network problem, sometimes we

were just coping the tests that we were writing, and others they end up not registering because they send, and it never reached due to network problem."

Sub-theme 5: Student preparedness

Participants felt that they were not prepared by the NEI for the intense program structure. They felt that they were not mentally ready for the transition from traditional learning to the new online learning. Some participants felt that if they had been prepared from the beginning they would have planned and restructured their personal lives to fit in with the change and would have found the necessary support where needed. One of the participants (participant 6) stated her learning preferences and what her expectations were from the lecturers, as follows:

"I think what would've helped was for the lecturers to like to sit down with us before we even started with the lectures to sort of tell us just a glimpse of what to expect with anatomy and physiology. We never knew that it was going to be that much we received the modules, but you need to read and understand at the beginning. I think it was going to help if we had a counselling session explaining to us that guys this is going to need hard work. You're going to need to put in time to read and understand, and it's going to be a lot of work. So, for us, we discovered it on our own during the first year."

Another participant stated that the English language was a challenge when he needed to express himself in class. Participant 13 stated the following:

"You ended up being scared to put your input because maybe you're scared that they will laugh at you especially us from those rural areas. Our English is not that perfect. So, you're scared even to put some ideas because you're scared to talk with your English because it's not that rolling English."

According to Sailsman's (2021) study on the language needs of nursing ESL students, students with ESL backgrounds required a high level of support to succeed academically during their nursing program. It is crucial for the students to be academically ready for them to succeed in their studies the following participant got to learn about computers while already in the program. Participant 1 stated the following:

"I got to learn about computers for the first time, we were previously not exposed to it very much."

A participant stated that she did not know how to use her learning material. Participant 9 stated the following:

"I did not know that it's here for my studying purposes because I saw this book, I knew that is a study guide, but I did not know that, especially on my first on my first months to the course I do know that it was for my leaning units how it works as it help all those stuffs you see."

According to Coopesami, Pete and Knight (2017) students must be technologically/equipment ready for them to succeed in a new E Learning environment. Fadana and Vember (2021) stated that student orientation is necessary for first year nursing students to facilitate the transition from high school to tertiary education and to develop the necessary strategies on how to adapt in the new environment. According to Fadana and Vember (2021) preparing the students mind-sets helped them to get ready to face new challenges better. The participants in Fadana and Vember's (2020) study were orientated but they felt that they had not been fully prepared on what to expect.

4.5.2 Theme 2: Program *aids Integration of theory and practice*

The participants stated how they benefited and what they gained from the program. They stated that they understood theory better when they immediately integrate the learning into practice. It made them remember and put the subject matter into a better context. In nursing education integration of theory and practice is crucial for students to put what they are taught into context. It allowed the students to gain a better understanding and interpretation of the subject matter. Participant 2 stated the following:

"Well, I mean if we are starting doing the theory aspect of something and you are able then to go into the clinical setting and you do the simulation of the same teaching that was done for theory and you are now doing the simulation training and from the simulation training you are going into the hospital to practice that

simulation training and theory so you are taking the theory and simulation then putting into practice and it's better to do it that way."

Langtree, Razak and Haffejee (2018) stated that students spend hours in the clinical environment learning new procedures and having to integrate what they learn in theory and put into practice. The program made it easy for students to integrate theory and practice by being able to immediately practice what they were taught in theory and not waiting to practice only after the theory block.

Participant 1 stated the following*:*

"So, I am saying that uhm doing theory first then practical makes things much easier and it untangles the work because with the knowledge that you have in theory, put it into practical makes you understand what you are doing, so you are not going into it blind, and you don't know what you are actually doing and that was the great part of it."

4.5.3 Theme 3: Negative effects of the program

Under this theme the following subthemes were identified as negative program effects social life disruption, physical stress, mental stress, financial stress and unconducive learning environment.

Subtheme 1: Social life disruption

Participants mentioned how they had to cut out their social lives and how interactions with family and friends changed. Participant 6 stated the following:

"I ended up not even spending time with my family ended up stopping all social activity to the great activities during weekends."

For some, this meant relocating to avoid distractions. Some had to get help from nannies and family members to fill the gap left by their absence from family related duties.

Sub-theme 2: Physical stress

Participants suggested that they couldn't maintain optimum hours of sleep as they had a lot of work to do. They slept late and woke up early, even when they were with their family. Participant 7 stated the following:

> *"Sometimes you won't have to sleep because there is a lot of work. You really need to study to pass, but if you don't work, you will fail my biggest fear right now is to be deregistered.*"

Participants always felt as if they were losing out on study time. Participant 6 stated the following:

> *"For example, I needed to involve my husband more with the children and the work and I needed to organize a helper with the children so, I had to rearrange me, my social life and then I had to change my daily routine and so that I could get more time to study. And then I had at some point I had to seek counselling from my sister because I was feeling overwhelmed and discouraged."*

Sub-theme 3: Mental stress

Participants felt that the program was very challenging, emotionally and mentally. Participant 2 stated the following:

> *"It's been very difficult because we still have families and responsibilities that we need to see to and there's been no income coming in, so it's been very challenging quiet emotionally and mentally challenging because you still have a family at the end of the day that you need to take care of and without a salary coming in it does make it extremely difficult."*

The program brought depression to some of the participants. Participant 6 stated the following:

> *"We now must stop with our weekend activities. We had to adjust our social life. It came as a shock and to be honest it was it was depressing. My children as well, they didn't understand why I had to read all the time and not spend time*

with them, or help them with their homework, or even play with them, like I used to do. So, it was for me, it was depressing."

Sub-theme 4: financial stress

Participants mentioned that online classes brought additional stress as they needed to purchase gadgets to aid their online accessibility to classes and they had to purchase data to stay connected which were additional expenses to their study cost. Participant 5 stated the following:

"You have to turn off your speaker to avoid disrupting the class so we are instructed to use the chat box, you can ask your question and then the lecturer will see the question and reply to you so if you are using a small phone, it is difficult for you to access that chat room but if you are using a tablet or laptop, it is much easier, yes so you have to buy a bigger laptop or tablet."

Another participant stated that she fells emotionally and mentally challenged as she has no salary to take care of her family. Participant 5 stated the following:

"So, it was a bit challenging I had to spend too much in buying data, because you must work on website, so you must log in and it is too much expensive data. All these things combined cause stress and pressure."

Sub-theme 5: Unconducive learning environment

A participant stated that the national online learning platform was not conducive as it did not provide them the opportunity to interact with their lecturers. Participants felt uncomfortable approaching the lecturers and asking questions because they were not familiar with the lecturers from other campuses. They felt uncomfortable in a class full of students from other campuses. Participant 6 stated the following:

"Okay, for us it goes deeper because now instead of them putting us in one class for our Gauteng Southwest Campus. They put us in a national class. So, we had to be in class with students from other campuses and we sometimes are to be taught by lecturers from other campuses. We did not understand very well and sometimes we never got that one on one interaction with our lecturers, which really impacted on negatively because they are questions that you might have

that, you don't feel free to ask them on a national platform sometimes, we felt shy to ask question on a national platform we just kept them to ourselves, which really impacted on us negatively, because we ended up not even getting the information that we needed and sometimes you find yourself needing more explanations, but because it's a new lecturer that you don't know from another campus. It was like, it posed a lot of difficulties to ask them questions."

Another participant stated that the other students did not give them a chance to participate in class. Participant 6 stated the following:

"Okay, we had other students from other campuses, who would not give others a chance to ask questions or even to answer like, they were so dominant, everything. They wanted to answer themselves. They wanted to do all the participation by themselves. So, it didn't give a chance to other students from other campuses."

According to Goodwin (2022) online teaching is not suitable for all students. A participant stated that there were disruptions at home while attending an online class. Participant 11 stated the following:

"At home, there are a lot of disruptions and so many things can distract you and you will lose focus in class when she's teaching you making example doing activities, and all those stuffs but with online class is so difficult."

4.5.4 Theme 4: Coping with stressors.

. In this study participants reported that the program was overwhelming leaving them felling emotionally stressed and they could not cope with the stress. All Participants reported that they felt overwhelmed by the workload. Participant 11 stated the following:

"The workload was too much, and I was not coping with the workload."

Another stated that she could not cope in the new environment. Participant 12 stated the following:

"Emotionally, it was, it was stressful because it was a new environment, it was a new process and I've never had to do that."

According to G*oodwin, Kilty, and Kelly's* (2022) study, online learning can be overwhelming for first year nursing students had to develop coping mechanism to deal with the stress. Participant 6 stated the following:

"And then I had at some point I had to seek counselling from my sister because I was feeling overwhelmed and discouraged."

Participant 11 stated the following:

"*Right now, if I feel that I cannot cope, I feel down. I console myself that I started this course and I will push. I don't have to quit any more, no more quitting".*

Participant 5 stated the following:

"*I am the kind of person that is so reserved I don't like to share my problems with people, I told the HoD that I am really stressed she told me to inform ICAS, so ICAS is in charge of students they advise you, they try to deal with your stress to the give you psychological and help. I called ICAS but the number was no going through. I said, I don't need to call anybody then. I have to do it on my own. I was exercising I was doing breathing exercises then I was able to calm down and settle my issues alone than asking people or asking for help. So that is me".*

Participant 4 stated the following:

" It's difficult for me I prayed at all times so that God can help me"

4.6 Summary

The findings that emerged in the study during data analysis of the interviews with participants were presented in this chapter. A discussion of findings was also done. Recommendations and conclusion based on the issues raised will be discussed in Chapter

CHAPTER 5

LIMITATIONS, RECOMMENDATIONS AND CONCLUSION OF THE STUDY

5.1 Introduction

This chapter summarises research findings, limitations, recommendations of what needs to be done to improve the negative experiences of first-year nursing students. The conclusions is from the findings of the study aimed to assist in the first-year nursing student to succeed in their academics and complete the course.

5.2 Summary of research findings

During data analysis the following four themes emerged: 1. Poor program planning, 2. Benefits of the program, 3. Negative effects of the program and 4. Personal and program outcomes. These were the lessons learnt from this study. Participants indicated that the program was not well planned, and that it was overwhelming. It was a new program, in a new environment of higher learning, whereby the method of teaching was delivered (lecturing) differently from what they were used to. Participants indicated that the theoretical content taught was new and they had to integrate what they learnt in clinical with what they were taught in theory to be able to grasp the skills needed in the clinical setting.

Some participants highlighted as a positive experience the fact that they were excited to be part of the pioneer nursing program (R171) as they were the first group to be enrolled for this program. They also thought that the qualification standard was high since it is recognised as a higher education qualification. Participants also mentioned that the program made integration of theory and practise easier, and they could grasp concepts quickly when theory is put into practice simultaneously.

A participant indicated how he was challenged when a lecturer used the English language to communicate in class. He was from a rural area and in high school they were not taught in English. Participants indicated how online classes were abruptly introduced and they had limited interaction with lecturers, they also mentioned that online classes are unconducive for learning as they experience disruption during learning and sometimes losses focus and concentration and being unnoticed by the lecturer. Participants indicated using technological gadgets (e.g., laptops), was a new learning experience for some of them. Participants mentioned the unplanned financial burden. They were required to purchase laptops, data (for internet connectivity) and textbooks. These requirements had a negative effect on them economically.

5.3 Limitations

The researcher conducted the research in one NEI in Gauteng therefor could not generalise the study findings to other NEI's.

5.4 Recommendations

Based on the findings of the study, the researcher made the following recommendations for the NEI, and other stakeholders to improve and enhance the experiences of first year nursing students. These recommendations are aimed at incorporating the DoH (2020-2024) strategic plan for nursing education, and to bring nursing students into alignment with the World Health Organisation (WHO) (2018) National Health Plan Strategy, which states that health system governances should be about collaboration of people who are serious about finding solutions to some of the most pressing problems we face in governance of health systems.

5.4.1 Recommendations for Nursing education

NEI management needs to determine how best NEIs can prepare and facilitate adaptation for first year nursing students for the theoretical and clinical academic

environment. NEI management needs to determine how best NEIs, and the educators can plan the academic year for first year nursing students. NEI needs to investigate the barriers that prevent students from completing the program in the specified time. Computer literacy should be included in the admission criteria, as it will assist students to cope better with online learning. The researcher recommends that English be integrated into the nursing education curriculum as a subject, to assist ESL students to improve their academic results. NEI can develop and implement readiness tools to prepare matriculants for the tertiary education academic environment.

5.4.2 Recommendations for nursing practice

The DoH and the department of higher education and training (DHET) should determine how best funding can be provided timeously for private NEI nursing students. This will assist the students with purchasing all the required course material timeously (e.g., laptops and textbooks).

The DoH, the DHET and South African Nursing Council (SANC) need to establish how they will meet the demand and supply of the nursing workforce in the country. This will alleviate the pressure from students being used as a workforce in areas that have clinics. That will also allow senior nurses to fulfil their teaching role to students as they will have more time to teach when there are enough qualified nurses to provide nursing care.

5.4.3 Recommendations for further research

Research should be conducted on how to successfully structure and implement online learning for first year nursing programs.

5.5 Conclusion

The views of first year nursing students on their positive and negative experiences were explored in this study. The findings that were generated from the study created

awareness of the factors affecting first-year nursing students. The issues mentioned by participants can help provide insight for all stakeholders; namely the NEI, the DoH, DHET and SANC about the experiences of first year nursing students. If solutions to the findings are implemented by all the stakeholders mentioned, it will help reduce the negative effects on first-year nursing students. Such solutions can assist in the reduction of the failure rate in the nursing programs and increase the nursing workforce that is needed in the country and around the world. The solutions suggested could also assist with replacing the ageing nursing population as well as the nurses who have left the country for greener pastures.

Assessing students for program readiness and the benefits of students being prepared for higher learning are important for the enhancement of academic success and program completion leading to the increase of nurses and alleviation of nursing staff shortages. In the current study it was shown that most first-year nursing students come from a background utilizing traditional ways of learning, and at tertiary level, they have to adjust to a dramatically changed learning environment. For the technological learning culture to be successful, NEI's must prepare first-year students better. Coopesami, Pete and Knight (2017) stated that students need to be technologically ready and equipment ready for the new technological learning culture. Coopesami, Pete and Knight (2017)'s study recommended that NEI's should practise strict adherence to admission criteria.

The WHO (2020) stated that nurse educators' core competencies should include the effective use of technology. Curriculum readiness is a crucial factor for the successful introduction of the new program. Kirstein (2019) stated that the current curriculum used to teach the new qualification (R171) is questionable as it does not include any form of training for educators and students. It is a new curriculum that educators and students need to be prepared for before implementation. There should be upskilling or training for educators to be able to teach the new qualification, prior to implementation.

The researcher's first observation was that the new learning and teaching environment came with a lot of negative experiences for first-year nursing students. The learning environment hindered some participants' ability to obtain the best possible results in their studies. It was a new environment that they needed to adjust to, and it was very different from the high school environment. All the negative experiences first year nursing students face can result in a high failure rate, leaving the NEI with a very low number of student nurses completing the program. Low student numbers could result in educator retrenchment, deployment or even closure of the NEI.

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Appendix A

INFORMATION SHEET FOR PARTICIPANTS

INVITATION TO PARTICIPATE IN THE STUDY TITLED: EXPLORING FIRST YEAR NURSING STUDENTS' PERCEPTIONS ABOUT THEIR EXPERIENCES AND COPING MECHANISMS IN A PRIVATE NURSING EDUCATION INSTITUTION IN GAUTENG.

Hello, my name is Victoria Onyeagbau. I am currently registered for a Master of Science degree with the Department of Nursing, University of Witwatersrand, in Johannesburg, South Africa. You have been approached to participate in this study as it is about describing your experiences of first-year nursing students in a private NEI in Gauteng.

Purpose of the study: This study aims to explore the experiences of first-year nursing students in a selected private NEI in Gauteng, to understand how students' difficulties in this regard can be addressed. This is not related to the experiences that students might have faced due to the Covid-19 pandemic as this is not the focus of the study but on other experiences related to being a first year student in a private NEI facility.

What is involved in this study?

You will be asked to participate in a telephonic recorded interview with me which is expected to last between 30 minutes and 45 minutes. I will ask you questions about your experiences as a first-year nursing student in a private NEI in Gauteng and the impact this may have had on your academic achievements.

Benefits and Risk to the participants: This study will allow you to tell us about your experiences as a first-year nursing student in a private NEI in Gauteng. The study may not directly benefit you immediately, but you will be helping other prospective nursing students who will be undergoing the same training after you.

Voluntary participation, Consent, and Confidentiality: Your participation in this study is entirely voluntary so you may choose not to participate or withdraw from the study at any time. This will not affect the tuition and support you receive in this institution. Should you decide to participate, your identity will be hidden as your interview will be assigned a code to maintain your confidentiality.

Reimbursements

No payment or cost is associated with your participation, but you will be provided with data to enable you to send-in the signed consent form. The interview will be telephonic from a land line on a speaker phone and recorded.

Permission will be obtained from the Human Research Ethics Committee (Medical) at the University of Witwatersrand before the commencement of this study. In case you want to report any concerns about this research project, you can use the following contact details: HREC (Medical) Contact details: Prof. C Penny, Secretariat: Ms Z. Ndlovu, Zanele.ndlovu@wits.ac.za, or Mr Rhulani Mukansi, Rhulani.Mkansi@wits.ac.za 011 717 1252.

Should you wish to know more about the study you may contact me on telephone number 082 341 5968.

Thank you for taking the time to read this information sheet.

Yours Faithfully,

Victoria Onyeagbau

MSc. Nursing student

Appendix B

PARTICIPANT CONSENT SHEET

Exploring the experiences of nursing students in a private NEI in Gauteng

1. I have been given a Participant Information Sheet which explains the nature and processes involved in this study, which is attached hereto.
2. I was given time to read it, or had it read to me, in the language I best understand.
3. I was given time to ask any questions I wanted to and found the answers given to me to be reasonable and satisfactory.
4. I fully understand why the study is being conducted and what the intended outcomes will be.
5. I understand that there will be no immediate benefit to me, should I agree to participate, nor will I receive any payment; conversely, participation will not cost me anything but my time.
6. I understand that, even if I initially consent to take part in the study, I may subsequently withdraw at any time and will not be required to give any reasons; if that were to happen, any data collected about me for the study would immediately be destroyed, unless I give consent for it to be retained
7. I have been given a range of contact details, listed below. If I require further information or become concerned about any aspect of this study, I am free to speak to any of these contacts.

Contact details:

Principal Investigator: Victoria Onyeagbau, telephone no. 0823415968, or by e-mail at malefasa@gmail.com,

Supervisor: Dr Rita Maboko, telephone no. 011488-4217/72, or by e-mail at Disebo.Maboko@wits.ac.za

Ms. Z Ndlovu or Mr. Rhulani Mkansi, Committee Secretariat, telephone nos.: 011 717 2700 or 1234, or by e-mail at Zanele.Ndlovu@wits.ac.za or Rhulani.Mkansi@wits.ac.za

Name of Participant: _____ Date: _____

Place:_____ Signature or mark: _____

Witnessed by:

Name of Witness: _____ Date: _____

Place: _____ Signature: _____

Appendix C

CONSENT FORM FOR AUDIO RECORDING OF STUDY PARTICIPATION

Exploring the experiences of first-year nursing students in a private NEI in Gauteng.

I hereby consent to an audio recording of the interview

I understand that:

- The recording will be stored in a secure location (a locked cupboard or password protected computer) with unrestricted access only given to the researcher and the research supervisor.
- The recording will be transcribed and any information that could identify me will be removed.
- The recordings will be erased within either (a) two (2) years of the publication of the research findings, or (b) six (6) years if no publications arise from this research.
- Anyone wishing to access this information in the future will first have to obtain the approval of the Human Research Ethics Committee (Medical) of the University of the Witwatersrand, Johannesburg.
- Direct quotes from my interview, without any information that could identify me, may be cited in the research report or other write-ups of research.

Name of Participant: _____ **Date:** _____

Place:_____ **Signature or mark:** _____

Witnessed by:

Name of Witness: _____ **Date:** _____

Place: _____ **Signature:** _____

Appendix D

SEMI-STRUCTUREDD INTERVIEW GUIDE

Demographic questions

Age:

Sex:

Nationality

Race:

First Language:

Marital Status:

Number of dependants:

Highest qualification:

Previous nursing experience:

Physical traumatic experiences in first year:

Disabilities:

1. **Main question:** Please tell me about your experiences as a first-year nursing student at the nursing education institution, excluding any experiences you might have had were related to the Covid-19 pandemic?

   Probes

   a. Can you tell me more about that?
   b. Would you please give me an example of what you are saying?
   c. So, in other words, what you mean is.....

2. **Main question:** How have your experiences as a first–year nursing student impacted your academic performance?

   Probes

   a. Can you explain more about that?
   b. Would you please give me an example of what you are saying?
   c. So, in other words, what you mean is.....

3. **Main question:** How did you manage (cope with) your negative experiences as a first-year nursing student

   Probes

   a. Can you elaborate more about that?
   b. Would you please give me an example of what you are saying?
   c. So, in other words, what you mean is.....

Appendix E

REQUEST FOR PERMISSION FROM THE HEAD OF THE NEI

[redacted]

[redacted]

RESEARCH OPERATIONS COMMITTEE [redacted]

Approval number: UNIV-2021-0009

Ms Victoria Onyeagbau

E mail: Victoria.Onyeagbau@[redacted]co.za

Dear Ms Onyeagbau

RE: EXPLORING THE EXPERIENCES OF FIRST-YEAR NURSING STUDENTS IN A PRIVATE NURSING EDUCATION INSTITUTION IN GAUTENG

The above-m[redacted]ned research was reviewed by the [redacted] Research Operations Committee's delegated [redacted] and it is with pleasure that we info[redacted] that your application to conduct this research a[redacted] Education Gauteng South West Campus, has been approved, subject to the following:

i) Research may now commence with this FINAL APPROVAL from the [redacted] Research Operations Committee.

ii) All information regarding [redacted] will be treated as legally privileged and confidential.

iii) Netcare's name will no[redacted]entioned without written consent from the [redacted] Research Operations Committee.

iv) All legal requirements with regards to participants' rights and confidentiality will be complied with.

v) All data extracted may only be used in an anonymised, aggregated format and for the purposes of this specific study as specified in the proposal. The data may under no circumstances be used for any other purpose whatsoever.

vi) Netcare must be furnished with a STATUS REPORT on the progress of the stu[redacted] at least annually on 30th September irrespective of the date of approval from the [redacted] Research Operations Committee as well as a FINAL REPORT with refere[redacted] to intention to publish and probable journals for publication, on completion of the study.

vii) A copy of the research report will be provided to the [redacted] Research Operations Committee once it is finally approved by the releva[redacted]imary party or tertiary

[redacted]

institution, or once complete or if discontinued for any reason whatsoever prior to the expected completion date.

viii) [redacted]e has the right to implement any recommendations from the research.

ix) [redacted]e reserves the right to withdraw the approval for research at any time during the process, should the research prove to be detrimental to the subje[redacted]letcare or should the researcher not comply with the conditions of approval.

x) Please note that you are -

1. Specifically made aware that this approval is gr[redacted]ed to you on the basis of you being a permanent employee in good standi[redacted]tcare
2. Should you cease to be an employe[redacted]tcar[redacted]at any time for the duration of the research study this approval gra[redacted]o you for access to, analysis and/or publication [redacted]are data will be automatically revoked.
3. You are req[redacted]to inform [redacted]care Research Operations Committee of the change in your employment status at Netcare within 30 (thirty) days of you leaving Netcare's employment
4. You will be required to re-apply to [redacted]etcare Research Operations Committee for approval to continue with you[redacted]search

xi) APPROVAL IS VALID FOR A PERIOD OF 36 MONTHS FROM DATE OF THIS LETTER OR COMPLETION OR DISCONTINUATION OF THE STUDY, WHICHEVER [redacted]S THE FIRST.

We wish [redacted]ur research.

Yours [redacted] 27/2/2021

Prof [redacted]
Full m[redacted]rch Operations Committee & Medical Practitioner evaluating research applica[redacted]ment and Governance Policy

S[redacted]
C[redacted]arch Operations Committee
N[redacted]d
D[redacted]

[redacted]

Appendix F

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

R49 Ms M Onyeagbau

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)
CLEARANCE CERTIFICATE NO. M201181

NAME: **(Principal Investigator)**	Ms M Onyeagbau
DEPARTMENT:	School of Therapeutic Sciences Department of Nursing Education Medical School University
PROJECT TITLE:	*Exploring the experiences of first-year nursing students in a private nursing education institution in Gauteng*
DATE CONSIDERED:	2020/11/27
DECISION:	Approved unconditionally
CONDITIONS:	
SUPERVISOR:	Ms DR Maboko
APPROVED BY:	Dr CB Penny, Chairperson, HREC (Medical)
DATE OF APPROVAL:	2021/05/05

This Clearance Certificate is valid for 5 years from the date of approval. An extension may be applied for.

DECLARATION OF INVESTIGATORS

To be completed in duplicate and **ONE COPY** returned to the Research Office secretariat on the 3rd floor, Phillip Tobias Building, Parktown, University of the Witwatersrand, Johannesburg.

I/we fully understand the conditions under which I am/we are authorized to carry out the above-mentioned research and I/we undertake to ensure compliance with these conditions. Should any departure be contemplated from the research protocol as approved, I/we undertake to submit details to the Committee. **I agree to submit a yearly progress report**. When a funder requires annual re-certification, the application date will be one year after the date when the study was initially reviewed. In this case, the study was initially reviewed in **November** and therefore reports and re-certification will be due in the month of **November** each year. Unreported changes to the study may invalidate the clearance given by the HREC (Medical).

Signature of Principal Investigator _____ Date _____

Appendix G

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)

24 January 2021

To Whom It May Concern

SUBJECT: **CONFIRMATION OF PROVISIONAL STUDY APPROVAL**
(This letter is not a clearance certificate - not yet cleared)
Protocol Ref No: M201181
Protocol Title: Exploring the experiences of first-year nursing students in a private Nursing Education Institution in Gauteng
Principal Investigator: Mrs M. Onyeagbau
Department: Nursing

This letter serves to confirm that the Human Research Ethic s Committee (Medical) has provisionally approved the above mentioned study. In order for a clearance certificate to be issued, the researcher is required to submit written approval to conduct the study in your district/institution.

The researcher has been informed that this letter is not a clearance certificate and that the study cannot commence without your approval and receipt of a clearance certificate from the HREC (Medical).

Should you have any queries, you may contact me at tel: 011 717 1234/2700/2656 or by email Rhulani.Mkansi@wits.ac.za or HREC-Medical.ResearchOffice@wits.ac.za

Yours Faithfully,

.....
Mr Rhulani Mkansi
Administrative Officer
Human Research Ethics Committee (Medical)

UNIVERSITY OF THE WITWATERSRAND
OFFICE OF THE DEPUTY VICE CHANCELLOR RESEARCH
24 JAN 2021
RESEARCH OFFICE HREC (Medical)
JOHANNESBURG

Research Office Secretariat: Faculty of Health Sciences, Phillip Tobias Building, 3rd Floor, Office 304, Corner York Road and 29 Princess of Wales Terrace, Parktown, 2193 Private Bag 3, Wits 2050 I **T**+27 (0)11-717-1234/2656/2700/1252 **E**: Rhulani.Mkansi@wits.ac.za I **Office E** HREC-Medical.ResearchOffice@wits.ac.za IWebsite: www.wits.ac.za/research/about-our-research/ethics-and-research-integrity/

Appendix H

Participant 11 transcribed interview

Interviewer: Good morning. My name is Victoria Onyeagbau. I'm a student at Wits University. I'm pursuing my master's degree and my topic today it's exploring the experiences of first-year nursing students in a private nursing education institution in Gauteng, can you please tell me your year of study?

Participant: When did I start studying?

Interviewer: Yes, which year are you currently in now?

Participant: I'm in my second year.

Interviewer: Okay, thank you and how old are you?

Participant: I'm 36, sister.

Interviewer: Okay, and what is your nationality?

Participant: I'm African.

Interviewer: Okay, were you born in South Africa?

Participant: Yes, I was born in South Africa.

Interviewer: Okay, and what is your first language, your home language?

Participant: It's Venda.

Interviewer: And are you married or single?

Participant: I am married.

Interviewer: And how many dependents do you have? Financial dependents

Participant: I have two.

Interviewer: Okay, and what is your highest level of education?

Participant: It's a grade besides this one that I'm doing now?

Interviewer: Yes.

Participant: It's grade twelve.

Interviewer: Any nursing experiences?

Participant: Yes, before I did this diploma, I have done auxiliary.

Interviewer: Okay, do you have any work experience, were you employed?

Participant: Yes, I was employed.

Interviewer: Okay, alright, for how long?

Participant: Its long, eight years sister.

Interviewer: Okay, and in your first year of study, did you experience any physical trauma?

Participant: No.

Interviewer: Do you have any disability?

Participant: No.

Interviewer: Okay, and I'm going to move on to our first question and it excludes any experiences you might have that are related to the Covid pandemic. Can you please tell me about your experiences as a first-year nursing student in nursing education Institution?

Participant: That my first year was difficult, I was not coping, I was not understanding what was going on with the course I didn't know what to do with it was so difficult for me with this first-year.

Interviewer: Mmh and can you please just make me understand when you say it was difficult, you were not coping, you were not understanding what's going on with the course. What do you mean? Break it down for me?

Participant: There was a lot of work loads. The work was too much in a short time and then like when we have to write the tests, we used to write this like every day Monday to Friday not skipping days in between.

Interviewer: Okay.

Participant: The workload was too much, and I was not coping with the workload.

Interviewer: Mmh …

Participant: I was not understanding the course yet. I was trying to digest what is going on, but it was too much for me.

Interviewer: So, if I understand you, well you are saying the way the course is structured It had a lot of work.

Participant: Yes.

Interviewer: And was, is it different from when you were studying to become an ENA and what is different?

Participant: Yes, is different because with the cause that I was doing in an enrolled nursing auxiliary we were focusing on one thing, the modules we have got about six modules, you have to know all those different modules.

Interviewer: Okay. What are the modules?

Participant: Like a subject like anatomy, like psychology like GNS General Nursing Science.

Interviewer: Okay.

Participant: We do all those different, with enrolled nursing auxiliary we focus on one thing.

Interviewer: Okay, and uhm when you said, you were not understanding the work, can you break it down for me? What is it that you were not understanding?

Participant: It was difficult for me to understand those modules, with General nursing it was better because general knowledge but anatomy and physiology, I was so blank I didn't understand what is going on.

Interviewer: So, was it the modules themselves that you were not understanding or was it the way the modules are designed? Can you make me understand and or give me examples?

Participant: I think it's the way the modules are designed.

Interviewer: Mmm …

Participant: Yeah, if it's anatomy you must focus only if it is anatomy, you must focus only on the human body like the parts and the bones and all that stuff.

Interviewer: Mmm and when you find yourself not understanding. What did you do? How did you go about it for you to understand?

Participant: I tried to go for remediation with the lectures so that I can understand the module.

Interviewer: Hmm Did that help you?

Participant: Yes sister, it helps.

Interviewer: Okay, and what else was your challenge?

Participant: Uh, you said, we must not include Covid. the other challenge us when we started this online class.

Interviewer: Okay.

Participant: It was like we started January, February, March and then we went over to online classes.

Interviewer: Okay. So how did the online class affect you?

Participant: It affect me sister, with the network, most of the time there is no network and at that time things like laptop, I was using my phone it was not easy, I used to miss classes, most of the days.

Interviewer: So, if you have missed a class, what do you do to catch up?

Participant: they record the lectures. you must listen to it later when you got network then you listen to the recordings.

Interviewer: Were the recordings helpful?

Participant: Yeah, I can't say it's helpful. Sister is not like when you are in class, you're looking at somebody's teaching, you understand if I can make example with online class is something else.

Interviewer: How is it different …

Participant: Disruptions.

Interviewer: Okay, what disruptions?

Participant: At home, there are a lot of disruptions and so many things can distract you and you will lose focus in class she's teaching you making example doing activities, and all those stuffs but with online class is so difficult.

Interviewer: So, if I hear you in other words in class, you have activities that you are more involved with?

Participant: Yes.

Interviewer: So, when you are in online classes, you feel like you are not involved, you're on your own?

Participant: Yes, I feel like I'm on my own.

Interviewer: Okay, so how did you overcome that?

Participant: Oh sister, as time goes on, we got used to online class that you will have someone to teach you and you have to focus otherwise if you don't focus sister, it is up to you what you want to achieve.

Interviewer: So, how did you manage? How did you manage to focus all before we move to, how did you manage, is there any other experience that you want to share with me? We spoke about the online. We spoke about the modules, what else was your experience with your first year? Is there anything positive or is the only negative stuff?

Participant: Hello sister I am still here.

Interviewer: Okay, any other thing that you like to share?

Participant: The positive thing about my first year is when we go to the simlab and we must practice how to do nursing, how to nurse the patient, it was so interesting sister.

Interviewer: Okay, how was it interesting? Can you please give me examples?

Participant: We were learning how to nurse the patient, but it was not the real patient. We practice then after that we go and do it in the hospital.

Interviewer: So, to you, how did it make you feel? As you say it was interesting. Was it beneficial for you?

Participant: Yes, it was beneficial, it makes me feels like a real nurse.

Interviewer: How is it different from what you were used to? When are you studying your ENA?

Participant: There is not much, not much difference sister, it's the same thing that I was doing sister, what we were doing there it's just that we were doing it practically.

Interviewer: Mmh okay so you actually enjoyed doing it in the simlab first then going to do it on the actual patient. How did that make you feel? Did it make you feel that you know what you're doing you're more equipped?

Participant: Yes, yes it made me feel like I know what I'm doing, Sister are you still there?

Interviewer: Yes. I'm also writing at the same time so yes, I'm still here. Let's move on to our next question. How have your experiences as a first year student impacted on your academic performance? At the end of all the struggles you went through. How was your academic performance?

Participant: I struggled, I was not doing well with my test and at the end I failed two modules that I'm repeating now.

Interviewer: And how does that make you feel?

Participant: It makes me feel like I'm not serious and I must pull up my socks.

Interviewer: Do you think that it is because you are not serious or it's because of the experiences that you went through?

Participant: It's because of the challenges that I went through, I even wanted to quit the course.

Interviewer: Mmh so what stopped you?

Participant: I asked some of the people who have done nursing who are now registered nurse, one of them is a registered nurse, I talked to her I told her that I want to quit then she advised me, not to quit because I can still make it.

Interviewer: Mmh

Participant: Even if it is difficult, she told me it's difficult first-year is difficult, and you will be fine after that then I took her advice.

Interviewer: Okay.

Participant: Then I continued the course.

Interviewer: And is there any other person that you have gone to for advice? Or that you feel could have supported you?

Participant: Yes, I even told the head of department of nursing that it's difficult for me, I don't think I will make it, then she also advised me advised me that it is too early to quit that I still had a long way to go she said she don't think it's the right decision to quit.

Interviewer: Mmh and …

Participant: And she told me to sleep and tomorrow I must tell her what I have decided.

Interviewer: Okay.

Participant: And when I woke up in the morning the following day, I decided to continue with the course because if I didn't continue, I'm going to stay as an ENA forever I want to upgrade myself.

Interviewer: Okay, and did you have any other support at home?

Participant: At home yes, my husband I told him that I wanted to quit, he said no don't quit you already started you just have to continue even if it's difficult.

Interviewer: Mmh …

Participant: Otherwise, at the end you will regret your decision.

Interviewer: Okay, and as you said to me when you started, you had a challenge of you must have a laptop, you were having a cell phone, the internet connection, how did you that affect you financially?

Participant: Yes sister, it affected me financially because I must get money to buy the laptop. I must buy Wi-Fi it affected me financially because I am no longer working permanent now that I am studying, I have to ask my husband to give me money to buy those stuff.

Interviewer: Okay. So, what do you mean, you're no more like permanent? Are you no more employed?

Participant: I am still employed with Netcare they are still paying me but is not like, before when you are working permanent, you were able to work over time, now my salary is without overtime and I still have to pay medical bills and other necessities it's not like before, things have changed now.

Interviewer: Okay, So, the salary is a little bit less?

Participant: Yes, it's less I am no longer affording things that are used to afford, things that I used to buy.

Interviewer: And how does that make you feel? Or how does it affect you? Since you are no more affording the things, you used to buy or do?

Participant: Yes sister, I'm used to buying things but now I am no longer buying things I used to buy, I used to buy things for my kids, I am no longer, buying the things that

I’m trying to cope with the situation now, I'm trying to survive with the situation that I'm in right now.

Interviewer: Okay, and how are you coping? What is your coping mechanism that you are using? You are trying to cope. How are you doing it?

Participant: (Laughs) Sister, I am trying not to go for shopping, because I know I love shopping, I’m no longer shopping a lot like before, I am limiting the shopping I am writing the list of things that I must buy, I am budgeting now, I have to budget for the whole month.

Interviewer: Mmh … Okay.

Participant: So that I do not spend too much because the money is not enough.

Interviewer: And umh … lastly as you told me, how are you coping with your finances, can you please tell me how you are managing with your other experiences with you now learning online and having to have these six modules. How are you coping with all the modules that you have with the limited time, what is it that you are doing differently to allow you to cope?

Participant: So, with these six modules I make sure that I study every day, now there's more time to relax now. I have to study every day making sure that I'm balancing all the modules. Making sure that I'm doing all the work every day for each module.

Interviewer: Mmh …

Participant: Because if you concentrate on one module, you’re missing the other one, you have to focus on all of them the same time yes, the workload is too much as I am managing right now, making sure that every day am busy with the work.

Interviewer: So, in a day do you do all the modules? How do you balance?

Participant: I make a timetable that this week Monday I will do anatomy because it is not possible to do two modules at the same time, Monday it is anatomy, Tuesday it is GNS, Wednesday like that sister, otherwise I won’t manage.

Interviewer: Okay, and how are you managing? Or how will you cope? They do have to carry over the two modules. So how many modules are you doing now?

Participant: I carry that two modules sister and then it's affecting my other modules for the second year which means this year and only doing only three modules, I am doing the two modules that I carried over and one from the second year, because the other modules affect the others.

Interviewer: So how many years is this course?

Participant: Its three years course.

Interviewer: Okay, what's going to happen? Are you going to be able to finish all the modules in three years?

Participant: No, which means I won't finish in three years may be in four to five years.

Interviewer: Mmh …

Participant: If I keep on failing, will be more, but for now it is two is going to be four years.

Interviewer: Okay.

Participant: Yes.

Interviewer: And if I may ask, how are you paying your fees?

Participant: The hospital is the one who is paying for me.

Interviewer: Okay.

Participant: But the books I am the one who's buying the books.

Interviewer: Okay.

Participant: And another thing, if you fail the modules you pay for yourself like these two modules, I pay about seven thousand rand.

Interviewer: Okay, from your own pocket?

Participant: Yes.

Interviewer: Mmh …

Participant: Because I failed them, and the hospital doesn't have budget for the modules that I have failed.

Interviewer: Okay, I hear you.

Participant: Yes.

Interviewer: So, tell me also about the time when you wanted to quit, you're feeling down. How are you coping with those moments, now if you feel thousand things that you cannot cope? What do you do?

Participant: Right now, if I feel that I cannot cope, I feel down I console myself that I started this course and I will push I don't have to quit any more, no more quitting.

Interviewer: Okay, so you're strong now.

Participant: Yes, I'm strong now it's not like before.

Interviewer: Okay, alright Shandu, I think we have come to the end of our interview thank you so much for allowing me to speak to you for giving me this opportunity and good luck with the rest of your course and happy women's day.

Participant: Thank you, sister. Thank you very much.

Interviewer: Thank you. My dear, bye-bye.

Participant: Bye-bye!

Appendix I

PROOF OF LANGUAGE EDITING

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Proofreading and Editing Certificate

Busy Bee Editing have completed the proofreading, editing, syntax, language editing, layout, spelling, grammar and reference checking to the best of their ability **(on short notice)** on a 20,268-word Research Report titled: **EXPLORING THE EXPERIENCES OF FIRST-YEAR NURSING STUDENTS IN A PRIVATE NURSING EDUCATION INSTITUTION IN GAUTENG**, by **MALEFASA VICTORIA ONYEAGBAU,** Student No.: 2293815 submitted to the faculty of Health Services in partial fulfilment of the requirements for the degree of **MASTER OF SCIENCE IN NURSING** at the University of the Witwatersrand, Johannesburg**.**

Any amendments or alterations done to this Treatise by Malefasa Victoria Onyeagbau hereafter are not covered by this proofreading and editing confirmation. It is up to Malefasa Victoria Onyeagbau to ultimately decide whether to accept or decline any amendments done by Busy Bee Editing and it remains Malefasa Victoria Onyeagbau's responsibility at all times to confirm the accuracy and originality of the completed Research Report.

,

Hugo Chandler

Hugo Chandler

Brenda van Rensburg

Brenda van Rensburg

Date: 31 March 2022