



UNIVERSITY
OF
JOHANNESBURG

COPYRIGHT AND CITATION CONSIDERATIONS FOR THIS THESIS/ DISSERTATION



- Attribution — You must give appropriate credit, provide a link to the license, and indicate if changes were made. You may do so in any reasonable manner, but not in any way that suggests the licensor endorses you or your use.
- NonCommercial — You may not use the material for commercial purposes.
- ShareAlike — If you remix, transform, or build upon the material, you must distribute your contributions under the same license as the original.

How to cite this thesis

Surname, Initial(s). (2012). Title of the thesis or dissertation (Doctoral Thesis / Master's Dissertation). Johannesburg: University of Johannesburg. Available from: <http://hdl.handle.net/102000/0002> (Accessed: 22 August 2017).

**FACTORS INFLUENCING ABSENTEEISM AMONGST STUDENT
NURSES AT A PUBLIC NURSING COLLEGE IN GAUTENG
PROVINCE**

By

Philla Lucas Gcaki

A research dissertation submitted as a fulfilment of the requirements of the degree

Of

MASTERS IN PROFESSIONAL NURSING SCIENCE



ETHOS AND PROFESSIONAL PRACTICE

In the

**UNIVERSITY
OF
FACULTY OF HEALTH SCIENCES
JOHANNESBURG**

At the

UNIVERSITY OF JOHANNESBURG

Supervisor: Dr Nompumelelo Ntshingila

Co-supervisor: Prof Marie Poggenpoel

2019

TURNITIN

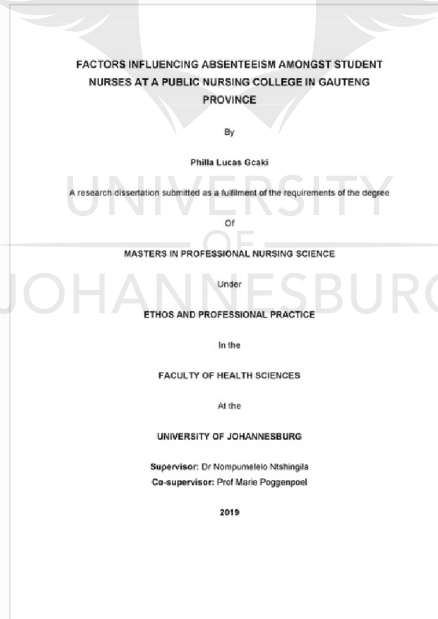


Digital Receipt

This receipt acknowledges that you received your paper. Below you will find the receipt information regarding your submission.

The first page of your submissions is displayed below.

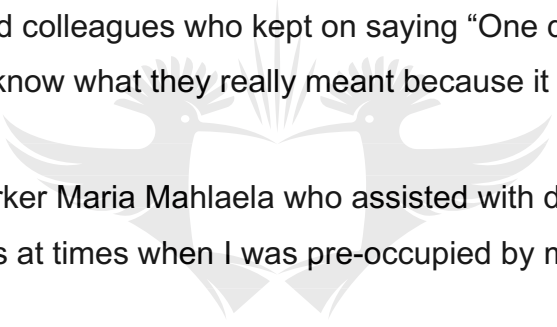
Submission author: PL GCAKI
Assignment title: Submit proposals, theses, dissertati
Submission title: Factors Influencing Absenteeism Am
File name: TURNITIN DRAFT 1 WITHOUT R
File size: 210.62
Page count: 96
Word count: 23,869
Character count: 132,975
Submission date: 23 Oct-2019 08:32PM (UTC) (020)
Submission ID: 1198914882



DEDICATION

I would like to dedicate this research study to the following people:

- My late wife, Mrs Madiboko Virginia Gcaki who supported and encouraged me through difficult times. I say thank you, my love, for believing in me and understanding the role I had to fulfil as a student husband.
- My wonderful mother Nombuso Princess Gcaki for bringing me into the world so that I can influence other people positively and make a change in the nursing education system of South Africa.
- My lovely children, Lukhanyo Gcaki, Akhona Gcaki and Samkelo Gcaki for understanding when I was a student.
- To all my friends and colleagues who kept on saying “One day you will finish, uzoqeda”. I did not know what they really meant because it seemed like an impossible mission.
- To my domestic worker Maria Mahlaela who assisted with domestic chores and other responsibilities at times when I was pre-occupied by my studies.



This one is for you.
UNIVERSITY
I LOVE YOU ALL!
JOHANNESBURG

ACKNOWLEDGEMENTS

I wish to thank the Heavenly Father – The Almighty, who instilled courage in me to be fearless of the unknown. He gave me strength to persevere even when I doubted myself. Thank you Lord, you never stop amazing me; indeed, God helps those who help themselves.

I acknowledge and thank the following persons, committees, institutions and government departments.

- The Gauteng Department of Health, for permitting me to conduct the study.
- University of Johannesburg Research Ethics Committee for evaluating my research proposal and approving it.
- Chris Hani Baragwanth Nursing College (Mrs N Ntsele - College Principal) and Bona Lesedi sub-campus (Mrs Gidimisani – Vice-Principal) for allowing me to conduct the study.
- Dr Nompumelelo Ntshingila and Prof Marie Poggenpoel for their supervision during this study; they supported me consistently through difficult times, and kept on saying, “We would like to see you finishing Philla”.
- Mr Anesu Kuhudzai (Statistician) for his expert skills in analysing the statistical data.
- Dr Grace Fayombo from Nigeria who allowed me to use the questionnaire that she developed for my data collection.
- Leatitia Romero for language editing and final formatting.
- My late wife Mrs Virginia Gcaki who was so supportive during the process of this study.
- To my kids, Lukhanyo Gcaki, Akhona Gcaki and Samkelo Gcaki for being good children and being understanding while this study was in progress.
- To all my friends and colleagues who gave their support and assisted as mediators when data had to be collected.
- Finally, yet importantly, how can I forget the respondents for their participation, without them this research study would not have been a success.

ABSTRACT

Worldwide, absenteeism amongst student nurses in healthcare facilities is a major challenge resulting in poor patient care in many health institutions, portraying a negative image of the nursing profession to the public. The concern is that if this problem persists, there will be fewer nurses completing their training successfully. The image of the nursing profession will continue to be perceived negatively by the public.

The purpose of this study was to investigate and describe the factors influencing absenteeism amongst student nurses in a public nursing college in Gauteng Province. The researcher thereby analysed and determined the correlational relationship between student-centred, home-related, school-related and social factors, and made recommendations to manage student nurses' absenteeism.

The research design that was used in this study was quantitative and descriptive. The sample included student nurses from level 1 to level 4 of their studies (n=229), registered at a nursing college in Gauteng Province for the R425 nursing programme.

A structured self-administered questionnaire, Factors Influencing Absenteeism Questionnaire (FIAQ), was used to collect data. A total of 480 questionnaires were distributed to respondents at two nursing campuses at different levels of study, and 311 questionnaires were returned, giving a total response rate of 64.7%. Of the 311 returned questionnaires, 229 were found to be valid for analysis, giving a valid response rate of 73.63%.

Descriptive statistical analysis, hypothesis testing and reliability testing were conducted and the IBM Statistical Package for the Social Sciences (SPSS) version 25.0 was used for analysing the research data.

The results revealed both positive and negative responses from respondents on factors influencing absenteeism amongst student nurses at a public nursing college in Gauteng Province. In some instances, student nurses agreed and disagreed that certain variables influenced them to be absent from class. In general, results indicate

that student nurses absent themselves from class due to student-centred factors, home-related factors, school-related factors and social factors (Tables 4.6 – 4.9). The FIAQ was reliable and consistent to measure absenteeism. Correlational analysis indicates that more positive relationships exist between various factors.

Specific and general recommendations for nursing education, practice, policy and further research were made.

Keywords: Absenteeism, nursing student, nursing college, lecturer or nurse educator and factors



TABLE OF CONTENTS

AFFIDAVIT	i
DEDICATION.....	iii
ACKNOWLEDGEMENTS.....	iv
ABSTRACT.....	v

CHAPTER 1: ORIENTATION AND OVERVIEW OF THE STUDY

1.1	INTRODUCTION	1
1.2	BACKGROUND AND RATIONALE OF THE STUDY	1
1.3	PROBLEM STATEMENT	2
1.4	RESEARCH PURPOSE.....	4
1.5	RESEARCH OBJECTIVES.....	4
1.6	DEFINITION OF KEY CONCEPTS	4
1.6.1	Student nurse.....	4
1.6.2	Nursing college	5
1.6.3	Factors	5
1.6.4	Absenteeism	5
1.7	PARADIGMATIC PERSPECTIVE OF THE STUDY.....	6
1.7.1	Person.....	6
1.7.2	Health.....	6
1.7.3	Environment.....	7
1.7.4	Nursing and midwifery	7
1.8	THEORETICAL ASSUMPTIONS	7
1.9	METHODOLOGICAL ASSUMPTIONS	8
1.10	RESEARCH DESIGN AND METHOD.....	8
1.10.1	Research design	8
1.10.1.1	Quantitative research	9
1.10.1.2	Descriptive research	9
1.10.2	Research method	9
1.10.3	Population and sampling	9

1.10.4	Sample	10
1.10.5	Sampling method	10
1.10.6	Inclusion and criteria	10
1.11	DATA COLLECTION	11
1.12	DISCUSSION OF QUESTIONNAIRE	11
1.13	DATA COLLECTION METHOD	11
1.14	DATA ANALYSIS	12
1.14.1	Distribution of data	12
1.14.2	Publication of results	12
1.15	RESEARCH RIGOUR: VALIDITY AND RELIABILITY	12
1.15.1	Validity	13
1.15.2	Reliability	13
1.16	PILOT STUDY - QUESTIONNAIRE TESTING	13
1.17	ETHICAL PRINCIPLES	13
1.17.1	Principle of autonomy	14
1.17.2	Principle of beneficence	14
1.17.3	Principle of non-maleficence	15
1.17.4	Principle of justice	15
1.18	RESEARCH HYPOTHESES	16
1.19	OUTLINE OF THE DISSERTATION	17
1.20	SUMMARY	17

**CHAPTER 2: CONCEPTUAL FRAMEWORK ON FACTORS INFLUENCING
ABSENTEEISM AMONGST STUDENT NURSES**

2.1	INTRODUCTION	18
2.2	INFORMATION AND LITERATURE SEARCH PROCESS	18
2.3	DEFINITION OF ABSENTEEISM	19
2.4	TYPES OF ABSENTEEISM	19
2.5	CLASSIFICATION OF ABSENTEEISM	19
2.6	CONCEPTUAL FRAMEWORK	20
2.6.1	Modified version of Taunton, et al's. Predictors of Nurse Absenteeism conceptual framework	20

2.7	APPLICATION OF THE CONCEPTUAL FRAMEWORK TO THE STUDY.....	21
2.8	FACTORS INFLUENCING ABSENTEEISM AMONGST STUDENT NURSES.....	23
2.8.1	Student’s demographic factors as factors influencing absenteeism	23
2.8.1.1	Age.....	23
2.8.1.2	Marital status.....	24
2.8.1.3	Gender.....	24
2.8.1.4	Current level of study.....	24
2.8.1.5	Current distance from campus.....	25
2.8.1.6	Method of transport.....	25
2.8.2	Student-centred factors that influence absenteeism.....	26
2.8.2.1	Students’ lack of interest in course or subject.....	26
2.8.2.2	Lack of personal interest in the studies.....	27
2.8.2.3	Inability of students to match the opted course or programme.....	27
2.8.2.4	Lack of self-confidence amongst other students.....	27
2.8.2.5	Not understanding the subject.....	28
2.8.2.6	Requiring time to prepare for tests or exams.....	28
2.8.2.7	Inferiority complex among the students.....	29
2.8.2.8	Lengthy classes.....	29
2.8.2.9	Too much socialisation amongst students.....	29
2.8.2.10	Requiring time to prepare for examinations.....	30
2.8.3	Home-related factors that influence absenteeism.....	30
2.8.3.1	An over-expectation by parents.....	30
2.8.3.2	Lack of parental support.....	30
2.8.3.3	Lack of parental care and involvement in children’s academic activities.....	31
2.8.3.4	Death of a family member.....	31
2.8.3.5	Poor family relationships.....	32
2.8.3.6	Home being too far from the campus.....	32
2.8.3.7	Family responsibility and commitment.....	32
2.8.4	School-related factors that influence absenteeism.....	33
2.8.4.1	Poor lecturer - student relationship.....	33
2.8.4.2	Poor teaching skills of lecturers leading to boring lectures.....	34

2.8.4.3	Negative peer influence on lectures	34
2.8.4.4	Lecturers not turning up for scheduled lectures	35
2.8.4.5	Excessive homework and projects for students	35
2.8.4.6	Lack of recreational and allied activities like sports programmes ..	35
2.8.4.7	Lack of refresher's or farewell parties	36
2.8.4.8	Inadequate orientation about the hours of training.....	36
2.8.4.9	Unsuitable environment for conducive learning	37
2.8.4.10	Poor infrastructural facilities in schools	37
2.8.4.11	Inclement weather	38
2.8.5	Social factors that influence absenteeism	38
2.8.5.1	Unavailability of opportunities for entertainment like malls or movies around the campus.....	38
2.8.5.2	Low social value for education	39
2.8.5.3	More regard of wealthy persons than educated persons	39
2.8.5.4	Belief that much education is not required for success and business.....	39
2.8.5.5	Political activities such as rallies and riots	39
2.8.5.6	Transportation problems	40
2.8.5.7	Attending community activities	41
2.8.5.8	Afraid of bullying students at school.....	41
2.9	SUMMARY	41

CHAPTER 3: RESEARCH DESIGN AND METHOD

3.1	INTRODUCTION	42
3.2	RESEARCH DESIGN AND METHOD.....	42
3.2.1	Research design	42
3.2.1.1	Quantitative research	43
3.2.1.2	Descriptive research	44
3.2.2	Research method.....	44
3.2.2.1	Population and sample.....	45
3.2.2.2	Population	45
3.2.2.3	Research setting of the study	45

3.2.2.4	Accessible population of the study	46
3.2.2.5	Sample and sampling method	46
3.2.2.6	Inclusion and exclusion criteria	47
3.2.2.7	Sample size	47
3.3	DATA COLLECTION	48
3.4	DISCUSSION OF THE QUESTIONNAIRE	48
3.4.1	Section A: Demographic data	49
3.4.2	Section B: Reasons student nurses are absent.....	49
3.4.3	Section C: Measuring Rate of Absenteeism (absenteeism during lectures and from practical areas).....	50
3.4.4	Section D: Suggested programmes and those in existence	50
3.4.5	Rating scale	51
3.4.6	Data collection method	51
3.5	DATA ANALYSIS	52
3.5.1	Descriptive statistics	53
3.5.2	Inferential statistics	53
3.5.2.1	Distribution of data.....	53
3.5.2.2	Publication of results	54
3.6	RESEARCH RIGOUR: VALIDITY AND RELIABILITY	54
3.6.1	Validity	54
3.6.1.1	Content validity.....	54
3.6.1.2	Internal validity	55
3.6.1.3	External validity	55
3.6.2	Reliability	56
3.6.2.1	Reliability testing	56
3.7	RESEARCH HYPOTHESIS	56
3.7.1	Testing of hypothesis	58
3.8	SUMMARY	58

CHAPTER 4: RESEARCH RESULTS AND DATA ANALYSIS

4.1	INTRODUCTION	59
4.2	THE SAMPLE	59

4.3	DESCRIPTIVE ANALYSIS OF DEMOGRAPHIC DATA	60
4.3.1	Age	60
4.3.2	Marital status	61
4.3.3	Current level of study	62
4.3.4	Current distance from campus	62
4.3.5	Method of transport	63
4.4	RESPONSES TO QUESTIONS RELATED TO FACTORS INFLUENCING ABSENTEEISM.....	63
4.4.1	Descriptive analysis statistics of subscale variables.....	64
4.4.1.1	Student-centred factors	64
4.4.1.2	Home-related factors	66
4.4.1.3	School-related factors.....	67
4.4.1.4	Social factors	69
4.5	RESPONSES RELATED TO ABSENTEEISM DURING LECTURES AND PRACTICALS.....	70
4.5.1	Absenteeism on lectures and practical	70
4.6	RESPONSES TO WAYS OR METHODS TO REDUCE STUDENT NURSES' ABSENTEEISM	73
4.7	RESPONSES ON PROGRAMMES THAT ARE ALREADY IN EXISTANCE AT THE NURSING COLLEGE.....	73
4.7.1	Extra classes.....	73
4.7.2	Counselling programme.....	73
4.7.3	Consultation programme.....	74
4.7.4	Disciplinary procedure	74
4.7.5	Programmes for library visits	74
4.7.6	Peer group teaching.....	74
4.7.7	No response or no programme.....	74
4.8	FACTOR ANALYSIS	74
4.8.1	Exploratory factor analysis.....	75
4.8.1.1	Analysis of sample	75
4.8.1.2	Analysis of commonalities	75
4.8.1.3	Variance analysis	76
4.9	RELIABILITY ANALYSIS.....	78
4.9.1	Student-centred factors.....	79

4.9.2	Home-related factors	79
4.9.3	School-related factors	79
4.9.4	Social factors	79
4.9.5	Summary of reliability testing	80
4.10	CORRELATIONAL ANALYSIS.....	80
4.10.1	Interpretation	82
4.10.1.1	Home-related factors.....	82
4.10.1.2	Student-centred factors.....	82
4.10.1.3	School-related factors	82
4.10.1.4	Lectures	83
4.10.1.5	Practicals.....	83
4.11	HYPOTHESES TESTING	83
4.12	CONCLUSION.....	86

**CHAPTER 5: DISCUSSIONS, LIMITATIONS, RECOMMENDATIONS AND
CONCLUSION**

5.1	INTRODUCTION	87
5.2	EVALUATION OF THE STUDY	87
5.3	DISCUSSION OF THE FINDINGS RELATED TO THE FACTORS INFLUENCING STUDENT NURSES ABSENTEEISM.....	88
5.3.1	Demographic data.....	88
5.3.2	Factors influencing absenteeism	89
5.3.2.1	Student-centred factors	89
5.3.2.2	Home-related factors.....	89
5.3.2.3	School-related factors	89
5.3.2.4	Social factors.....	90
5.4	LIMITATIONS	91
5.5	SPECIFIC RECOMMENDATIONS.....	92
5.5.1	Student-centred factors.....	94
5.5.2	Home-related factors	94
5.5.3	School-related factors	95
5.5.4	Social factors	95

5.6	GENERAL RECOMMENDATIONS	96
5.6.1	Recommendations for nursing education	96
5.6.2	Recommendations for policy development	97
5.6.3	Recommendations for further nursing research.....	97
5.7	CONCLUSIONS	98
5.8	SUMMARY	99
REFERENCES		100

TABLES

Table 4.1:	Response rate of respondents	60
Table 4.2:	Marital status of respondents	61
Table 4.3:	Current level of study of the respondents.....	62
Table 4.4:	Current Distance from Campus.....	63
Table 4.5:	Method of transport	63
Table 4.6:	Student-centred factors	64
Table 4.7:	Home-related factors	66
Table 4.8:	School-related factors	67
Table 4.9:	Social factors.....	69
Table 4.10:	Absenteeism from lectures	71
Table 4.11:	Absenteeism from practical areas	72
Table 4.12:	Sampling exploratory factor analysis.....	75
Table 4.13:	Commonalities.....	76
Table 4.14:	Total variance explained	77
Table 4.15:	Reliability analysis of FIAQ.....	78
Table 4.16:	Pearson's Correlation of Relationship between Variables	81
Table 4.17:	Hypotheses results	85
Table 5.1:	Specific recommendations	93

FIGURES

Figure 2.1: Conceptual framework of “Predictors of Nurse Absenteeism” (Modified version of Taunton, et al. 1995).....	22
--	----

PIE CHARTS

Pie Chart 4.1: Age distribution of respondents.....	61
---	----

APPENDICES

APPENDIX A: REQUEST FOR PERMISSION TO USE QUESTIONNAIRE ON ABSENTEEISM.....	111
APPENDIX A.1: LETTER FROM THE STATISTICIAN THAT APPROVED THE QUESTIONNAIRE.....	112
APPENDIX B: ETHICAL CLEARANCE LETTER FROM THE UNIVERSITY OF JOHANNESBURG (REC).....	113
APPENDIX B.1: HIGHER DEGREE COMMITTEE LETTER FROM UJ.....	114
APPENDIX C: LETTER TO THE HEAD OF DEPT, REQUESTING TO CONDUCT THE STUDY.....	115
APPENDIX D: PERMISSION TO CONDUCT A RESEARCH STUDY FROM THE ACADEMIC INSTITUTION CHBNC.....	116
APPENDIX D.1: PERMISSION TO CONDUCT A RESEARCH STUDY FROM THE ACADEMIC INSTITUTION (BONALESEDI CAMPUS).....	117
APPENDIX E: FACTORS INFLUENCING ABSENTEEISM QUESTIONNAIRE (FIAQ).....	118
APPENDIX F: RESEARCH LETTER INFORMATION LETTER.....	127
APPENDIX G: CONSENT TO BE A RESEARCH PARTICIPANT.....	130
APPENDIX H: PERMISSION TO CONDUCT THE STUDY FROM DEPT OF HEALTH IN GAUTENG PROVINCE.....	131
APPENDIX I: EDITING CERTIFICATE.....	132

CHAPTER 1: ORIENTATION AND OVERVIEW OF THE STUDY

1.1 INTRODUCTION

In Chapter 1, the researcher gives an orientation of the planned study, followed by an overview of the background and rationale of the study. The research problem, research purpose, research questions and objectives are also discussed. Key concepts are defined, and the significance of the study and stated paradigmatic perspective are presented. Moreover, the research design and method are described, and a concise description of the ethical considerations followed throughout the research process is presented.

1.2 BACKGROUND AND RATIONALE OF THE STUDY

Student nurses' absenteeism from healthcare facilities is a major challenge worldwide, resulting in poor patient care in many healthcare institutions, portraying a negative image of the nursing profession to the public (Maluleke, Thopola & Lekhuleni, 2014:395). The United Kingdom (UK), Canada, and South Africa have high absenteeism rates amongst student nurses in the public sector as compared to the private sector (Simelane, 2013:3). In SA, the Gauteng Department of Health has a specific strategic goal in place, which is that of increasing the number of nurses by training and producing professional nurses who will add value and improve the workforce in various healthcare sectors. This goal is in line with their strategic plan to combat the shortage of nurses across all healthcare services in the country (National Strategic Plan for Nurse Educators, Training & Practice 2012/2013 – 2016/2017:18). In the SA context, student nurses have a dual-status; they assume the role of full-time students and employees (Basic Conditions of Employment [BCEA] Act 75, 1997). Employees are entitled to 30 working days' sick leave every three years. If a student nurse is absent, a valid proof of absenteeism must be produced to the employer or authorities of the nursing college according to the contract agreement that is in place (BCEA, Act 75, 1997). There seem to be a similar trend that is followed by nursing programmes nationally and internationally with regard to the clinical and theoretical hours that nursing students must meet. In the United Kingdom, in order to register as

a qualified nurse, students must complete the components required of each year of the course before progressing to the next level. Theory-based education comprises 50% and the practice component comprises 50% (Black, Curzio & Terry, 2014:224).

In SA, student nurses are supposed to have a minimum 80% attendance record. This applies to both theory and clinical components of their training (South African Nursing Council Regulation 425 of 1985). Moreover, in the nursing profession, student nurses' attendance is mandatory during their training for both theoretical and practical exposure to different disciplines to meet their theoretical and clinical learning outcomes (Simelane, 2013:13). Student nurses studying at both government and private nursing colleges have to complete 44 weeks for each academic year during their training for them to qualify to sit for examinations or to be registered as professional nurses after four years of training (South African Nursing Council (SANC), 2001). Another study in the United Kingdom investigated student absenteeism and found that most students are absent voluntarily and more than 50% of the absences are on Mondays and Fridays (Lipscomb & Snelling, 2010:575). As a regulatory legislative requirement, if a student did not comply with the required minimum hours for the programme for which they are registered, then they must make up those hours before the month ends in which the examination is written, and acceptable proof must be submitted thereof (Thobakgale, Lekhuleni & Kgole 2013:183).

1.3 PROBLEM STATEMENT

Absenteeism among student nurses from the classroom and clinical settings is a great concern to nurse educators, college administrators and hospital management as it reduces quality of teaching, learning, clinical exposure and assessment (Thobokgale, 2013:6). The researcher, as a nurse educator in one of the campuses that was not part of the research, observed that the rate of absenteeism is increasing based on statistics (College Human Resource Statistic Report, 2017). Absenteeism also impacts negatively and reduces the required training hours stipulated by the SANC which are 2000 for two academic years (SANC, 1997).

Absenteeism is prevalent in certain African countries like Nigeria and is caused by student-related factors, home related, school related and social factors (Fayombo, 2012:122). According to Singh (2015:2), there is a lack of knowledge or research-based evidence in South Africa on the side of officials and managers on how to effectively deal with absenteeism. The concern is that if this problem persists, there will be fewer nurses completing their training successfully and there will be many more in the years to come where nurses become scarcer and the need for nursing becomes greater (Zerwekh & Garneau, 2012:556). This will likely result in fewer nurses being trained, which will impact on the quality of care patients receive. Singh (2015:2) further says that the poor quality of care will result in poor performance standards causing public complaints, lawsuits and litigation; ultimately, there will be more medico-legal hazards, and patients might die under these circumstances. As a result, the image of the nursing profession will continue to be perceived negatively by the public it serves (Maluleke, et al. 2014:395). Student nurses also do not seem to understand how absenteeism impacts on their studies, training, and patient care; instead, they are using it as a coping measure that gives them time to recover from physical exhaustion. Seemingly, student nurses become so desperate to absent themselves – especially in clinical areas – that they fraudulently sign the next day's clinical attendance register and the off-duty register for those who they know are not planning on attending (Department of Health, 2009). Therefore, students fail to meet the 4000 practices hours stipulated by the statutory body for nurses, namely the SANC (Act no 33 of 2005) within the stipulated years.

The gap that the researcher addressed in this study is the lack of research conducted on this topic in Gauteng Province. According to the available literature, only two research studies were conducted in Limpopo Province on student nurses' absenteeism (Baloyi, 2014; Thobakgale, et al. 2013). This lack of research on absenteeism amongst student nurses has stimulated the researcher to ask the following research questions:

- What are the factors influencing student nurses' absenteeism in a public nursing college in Gauteng Province?

- Is there a relationship or correlation that exist between student-centred factors, home-related factors, school-related factors, and social factors?
- What recommendations can be made to manage student nurses' absenteeism?

1.4 RESEARCH PURPOSE

The purpose of this study was to investigate and describe the factors influencing absenteeism amongst student nurses in a public nursing college in Gauteng Province. The researcher thereby analysed and determined the correlational relationship between student-centred, home-related, school-related and social factors, and make recommendations to manage student nurses' absenteeism.

1.5 RESEARCH OBJECTIVES

The objectives of this study were:

- to investigate and describe factors influencing absenteeism amongst students nurses in a public nursing college in Gauteng Province;
- to determine the relationship or correlation that exist between student-centred, home-related, school related and social factors, lectures and practical setting that influence absenteeism amongst student nurses;
- to make recommendations to manage student nurses' absenteeism in a public nursing college in Gauteng Province.

1.6 DEFINITION OF KEY CONCEPTS

The following key concepts were used in this study.

1.6.1 Student nurse

The SANC (Act No 50 of 1978:16) defines a 'student nurse' as a person who is registered as a student in a nursing institution. This person may be a student midwife undergoing an education and training programme and receiving supervision at an

approved nursing school after having met the admission requirements of the programme. In this study, the 'student nurse' will refer to a person registered and accepted to study a four-year Comprehensive Diploma Nursing Programme at an accredited public nursing college in Gauteng Province under the auspice of Regulation R425.

1.6.2 Nursing college

SANC Act (No 50 of 1978:6) defines a 'nursing college' as an approved and accredited nursing school offering nursing programmes under an approved curriculum. The institution must be affiliated with a specific university. In this study, 'nursing college' refers to a public nursing college situated in Gauteng Province that is accredited to train nurses in the R425 programme and other nursing courses.

1.6.3 Factors

Stevenson and Waite (2011:509) define 'factors' as circumstances, facts or influences that contribute to a result. In this study, 'factors' influencing absenteeism amongst student nurses at a public nursing college in Gauteng Province were researched.

1.6.4 Absenteeism

According to the Labour Relations Act (No 66 of 1995, as amended), 'absenteeism' is an unauthorised leave by an individual who intends to return to work. According to the Advanced English Oxford Dictionary (Simpson & Weiner, 2017:2), absenteeism is defined as a frequency of being away from work or school, especially without a valid reason; this can be associated with low job motivation. Absenteeism refers to the practice of regularly staying away from work or school without good reason (Stevenson & Waite, 2011:5). Baloyi (2014:1) defines absenteeism as a period where a student nurse did not attend classes as scheduled, or a student nurse was not present in a clinical area with or without permission. In this study, 'absenteeism' means failing to attend scheduled classes according to a timetable and not reporting for duty in clinical areas as per clinical student allocation programmes.

1.7 PARADIGMATIC PERSPECTIVE OF THE STUDY

Paradigms for human enquiry are mostly characterised in terms of the manner in which they respond to the basic ontology and epistemology of the researcher (Polit & Beck, 2017:11). In the paradigm of this study, the following aspects were considered important by the researcher: person, health, environment and nursing.

1.7.1 Person

The researcher views a person as a complete unique being, created by God under His image. A person is not only a physical being, but also a mental and spiritual being. The researcher viewed the individual student nurse as wholistically in interaction with the internal (body, mind, and spirit) and the external (physical, social and spiritual) environment (University of Johannesburg, 2017:12). This should be considered in order to understand a person as a wholistic being. In this study, a 'person' refers to the nursing student in a nursing college in Gauteng Province. A person can either be a male or female student nurse who is in constant interaction with the environment in which he or she lives and studies. In this research study, a person can be absent from class due to factors influencing him.

1.7.2 Health

Health is a changing dynamic interactive process in a person's environment. The health status of a person will be reflected in the interactions in a person's environment (University of Johannesburg, 2017:12). According to the World Health Organisation (WHO) (2010:22), 'health' is defined as the state of complete physical, mental and social well-being. Health is a changing, dynamic, interactive process in a person's environment and the health status of a person will be reflected in the interaction in a person's environment (University of Johannesburg, 2017:12). In this study, the researcher refers to 'health' as the ability of a nursing student at a nursing college to interact with the environment to promote attendance and prevent absenteeism.

1.7.3 Environment

The environment includes an internal and external environment, that consist of dimensions of body, mind and spirit (internal), while the external environment consists of physical, social and spiritual dimensions (University of Johannesburg, 2017:12). For the purpose of this study, the researcher refers to the 'environment' as the classroom and clinical setting at the college of nursing, where facilitation of learning takes place. This environment should be therapeutic and conducive to learning so that the nursing student can achieve the expected learning outcomes, both in class and in clinical settings.

1.7.4 Nursing and midwifery

Nursing and midwifery is an interactive process where the nurse or midwife facilitates health promotion by mobilising resources in a sensitive, therapeutic profession (University of Johannesburg, 2017:12). In this study, the researcher believes that nursing is a profession in which students are functioning under guidance and supervision through which they are supported and mentored. This nursing profession is promoted by motivating students to attend classes on a daily basis when they are supposed to. Student nurses are discouraged from being absent during training.

1.8 THEORETICAL ASSUMPTIONS

Theoretical assumptions are general statements about the research domain, which forms part of the existing theory and related discipline. Normally they are testable and provide epistemic findings of the research domain (University of Johannesburg, 2017:12). The researcher's assumptions with regard to the student nurses, absenteeism, nursing and nursing education were based on the theory of Taunton, Hope, Woods and Bott (1995:218), which identifies the 'Predictors of Nurse Absenteeism'. The theory of absenteeism informs us that absenteeism amongst student nurses is caused and influenced by any the following factors: student-centred, home-related, school-related and social (Fayombo, et al. 2012:122). This theory is discussed in detail in Chapter 2.

1.9 METHODOLOGICAL ASSUMPTIONS

The methodological assumptions reflect the researcher's views of the nature and the structures of science within the discipline, and provide structures to the research objectives and the context of research; it then influences decisions about the research design. The functional approach of the research must include planning, choosing the best method and structure for the research so that the objectives are directly linked to the research design and methods (University of Johannesburg, 2017:10-12). A quantitative design was used in this study. Validity and reliability were also adhered to in this study to ensure rigour.

1.10 RESEARCH DESIGN AND METHOD

The research design is discussed in this section.

1.10.1 Research design

In this study, a quantitative and descriptive research design was used. In quantitative research, the researcher believes all human behaviour is objective, purposeful and measurable. A post-positivist philosophy of science is maintained when there is logic and truth that prevails in quantitative research, with patterns and trends that will discover the reality (Grove, Burns & Gray, 2013:24). A descriptive study aims to provide information about the prevalence of a variable or its characteristics in a data set, to explore and describe ideas which are called 'phenomena' (Grove, et al. 2013:672). In this study, the researcher described the factors influencing absenteeism amongst student nurses in their first to fourth-year level of study. The researcher also determined the relationship between student-centred factors, home-related factors, school-related factors and social factors that exist thereby influencing absenteeism in both lectures and practical settings.

1.10.1.1 Quantitative research

A quantitative research design is a form of study process to describe test relationships in a study (Burns, et al. 2013:706). In quantitative research, the researcher believes all human behaviour is objective, purposeful and measurable. The quantitative design is also seen as an objective and systematic process that is precise in the measurement and qualification of data (Burns, et al. 2013:24). The quantitative design will be discussed further in Chapter 3 of the study.

1.10.1.2 Descriptive research

A descriptive study aims to provide information about the prevalence of the variables or characteristics in a data set (Grove, et al. 2017:672). Polit and Beck (2017:226), concur that the main purpose of a descriptive research design is to observe, describe and document all the aspects of a situation as it would occur in a natural situation or setting. The descriptive and inferential approach was followed in this study and will be discussed further in Chapter 3

1.10.2 Research method

The research method includes the population, sampling, data collection and data analysis techniques. These are discussed in the following paragraphs.

The research was conducted with the intention of investigating and describing factors influencing student nurses' absenteeism by means of a deductive conceptual framework based on the literature and empirical investigation. A detailed survey was conducted, and the researcher asked participants to make recommendations on how absenteeism could be constructively managed.

1.10.3 Population and sampling

A population is defined as a group of people, documents, events or specimens about whom the researcher has shown interest in collecting information or data (Moule & Goodman, 2014:461).

The population in this study included all the nursing students registered for the R425 programme in a public nursing college in Gauteng Province. In this study, the target population was students in all years of education in the four-year nursing programme (Regulation, R425) at a particular public nursing college in Gauteng Province.

1.10.4 Sample

A subset of the population that is selected to participate in the research study is called a sample (Polit & Beck, 2017:742). Sampling entails selecting of groups of people, events, items behaviours or other elements which can be included to conduct a study (Grove, et al. 2013:708). The sample frame included all the students who were registered under the R425 nursing programme on two campuses (“A” and “B”), and the list of students was obtained from the principal of the nursing college or via the student affairs department. A convenience sampling method was used in this study. This sampling method is used by researchers in situations where it is most convenient, and the available groups of participants can be reached (Grove, et al. 2013:263). In this study, the sample comprised of 229 (n=229) of the nursing students that were willing to participate in the study and are registered under (GG Regulation No. R425 of 22 February 1985, as amended) on a selected campus at a college of nursing in the Gauteng Provinces.

1.10.5 Sampling method

This sampling method is used by researchers in situations where it is most convenient, and the available groups of participants can be reached (Grove, et al. 2013:263).

1.10.6 Inclusion and criteria

Inclusion criteria included students who were registered for the R425 nursing programme at a public nursing college in Gauteng Province, on the selected campuses, these students had to be registered with the college, and be in the first- to fourth-year of their study. The exclusion criteria focused on eliminating students who

were not registered for the R425 nursing programme, and students from other campuses that do not offer this programme – R425.

1.11 DATA COLLECTION

Data were collected by means of questionnaires. This implied administering the questionnaire to the participants so that their written responses were obtained. The questionnaire was explained to the participants prior to completion.

1.12 DISCUSSION OF QUESTIONNAIRE

The questionnaire is divided into three sections: Section A = biographical data (participant's age, gender, level of study, distance travelled to campus, and method of transport used). Section B = questions on factors influencing student nurses' absenteeism from class or practical settings. Section C = questions relating to the absenteeism of lectures and practical supervisors. Section D = questions relating to recommendations to manage absenteeism. The 42 questions in the questionnaire could be completed in approximately 20-30 minutes. Each questionnaire had a scale where the students rated questions according to a Likert scale (see Appendix E). Permission to use this questionnaire was granted by the author (see Appendix A).

1.13 DATA COLLECTION METHOD

Data collection involves obtaining information from the respondents by asking them to respond to the questions asked by the researcher (Polit & Beck, 2017:324). The collected data addresses the research problem (Polit & Beck, 2017:725). In this study, a questionnaire was used to collect data. The respondents were also informed that by completing the questionnaire, they would be giving their consent and that they could terminate participation at any time.

1.14 DATA ANALYSIS

The purpose of data analysis is to give meaning to the collected information. In quantitative studies, data analysis includes techniques to describe the demographic and study variables (Grove, et al. 2013:46). In analysing the data, the researcher consulted the University of Johannesburg Statistical Consultation Services. The latest statistical software, IBM Statistical Package for Social Sciences (SPSS) version 25.0, was used to capture and analyse the data.

1.14.1 Distribution of data

The distribution of data for the dependent and independent variables of the study was analysed using a special analysis called Kolmogorov-Smirnov and Shapiro-Wilk tests.

The results relating to this analysis are discussed further in Chapter 4.

1.14.2 Publication of results

At the time when the research study was explained, the respondents were informed that the research findings would be published without linking the findings to individual respondents, and that no individual identifiers would be used in any publication resulting from this study. Only the team of researchers will work with the shared information.

1.15 RESEARCH RIGOUR: VALIDITY AND RELIABILITY

According to Grove, et al. (2017:43), rigour is when a researcher strives for excellence in their study by paying detailed attention to all events, being scrupulous and maintaining strict discipline and accuracy. The researcher adhered to rigour in this study by ensuring that validity and reliability were adhered to.

1.15.1 Validity

The degree to which the instrument measures what it is supposed to is called 'validity' (Politt & Beck, 2017:336). The content-related validity of the instrument was closely monitored. Grove, et al. (2017:376) state that content validity is an assurance that the instrument measures all elements of construct, while construct measures relationships between operational and conceptual definitions. Questions in the instrument are valid and address the missing gap in knowledge (Fayombo, et al. 2012:124). The questionnaire that was used in this study has been used before in other studies and has been tested before (Baloyi, 2014:66).

1.15.2 Reliability

Reliability refers to the consistency of the questionnaire to measure the target attribute, as well as the ability of the instrument to reflect the scores properly (Polit & Beck, 2017:331). The reliability of the questionnaire has been determined by the original designer of the questionnaire. The Cronbach's alpha reliability coefficients of 0.79 and 0.87 were obtained when the questionnaire was tested in previous studies (Fayombo, et al. 2012:125).

1.16 PILOT STUDY - QUESTIONNAIRE TESTING

A pilot study of the questionnaire was conducted to evaluate its accuracy, reliability and validity so that amendments could be made if necessary. This helped the researcher to get quality data and to eliminate any faults that may have been present in the questionnaire. Five students from each level of study were selected to test the questionnaire, making a total of 20 student nurses.

1.17 ETHICAL PRINCIPLES

Permission to conduct the study was obtained from the Research Ethics Committee at the University of Johannesburg (see Appendix B), the Gauteng Department of Health Policies and Research Section, and the principal of the nursing college (see

Appendix D). The population for this study were student nurses registered for the R425 nursing programme. They are considered a vulnerable population and the following ethical principles were thus adhered to: autonomy, beneficence, non-maleficence and justice (Dhai & McQuoid-Mason, 2011:13-14).

1.17.1 Principle of autonomy

This principle focuses on ensuring that people's rights are respected at all times. Participants were gathered in one venue, and they were given an information letter to read through and understand so that they participated without any influence. All their questions and concerns were answered. Participants also received an informed consent form to sign. Once participants signed the consent form (Appendix G), they still had a free will as autonomous agents who could make a sound decision whether or not to participate.

Dhai and McQuoid-Mason (2011:13) express the opinion that participants must be given the opportunity to make their own choices and decisions while respecting their confidentiality. The purpose, objectives, risk-benefits ratio, right to privacy, confidentiality and anonymity were explained to the participants. Grove, et al. (2017:164) state that the participants should be given the freedom to withdraw from the study without any penalty being imposed on them, thus ensuring their right to self-determination. When participants completed the questionnaire (Appendix E), they indicated their willingness to participate in the study. When they did not complete the questionnaire, they indicated their refusal to participate in the study.

1.17.2 Principle of beneficence

This principle refers to the fact that the researcher should not expose or conduct activities that will potentially harm the participants, but they must seek to benefit participants by practising good (Grove, et al. 2013:165). Dhai and McQuoid-Mason (2011:14) agree that participants' interests and welfare should be prioritised. The researcher intended to promote and maximise good towards student nurses, however, this study has no direct benefits to the participants. There might have been

an indirect benefit to students where they could learn to identify factors that influence their absenteeism and reflect on how this impact on their studies.

1.17.3 Principle of non-maleficence

This principle addresses the issue of doing no harm to the participants and avoiding to expose them to potential danger (Dhai & McQuoid-Mason, 2011:14). The participants were not exposed to any invasive procedure or dangerous activities, other than to complete the questions (1-42) on the questionnaire form (Section A, B, C and D). The questions that were asked were scrutinised to identify if they did not cause any anxious feelings or harm to the participants. When the risks are high in a research study, the researcher must make all efforts to reduce those risks and maximise the benefits (Grove, et al. 2017:176).

1.17.4 Principle of justice

With the principle of justice, the researcher undertakes to be fair at all times during the process of the study. Grove, et al. (2017:173) indicate that the participant must be included in the study only when they have a significant contribution in achieving the objectives of the proposed study. The researcher selected participants who met the selection criteria, and for reasons directly related to the research problem; not because they were favoured or could easily be manipulated (Dhai & McQuoid-Mason, 2011:14). The researcher was fair by informing all the participants of their rights during the study and obtaining their consent. The participants will be informed about the results of the study, and one copy will be donated to the library of the nursing college and campuses where the study was conducted for easy access to the student nurses.

These ethical measures and principles are discussed in greater detail in Chapter 3 of this study.

1.18 RESEARCH HYPOTHESES

The research hypothesis usually states that there is a relationship between two or more variables. Hypotheses can be simple or complex, directional or non-directional, associative or casual (Grove, Burns & Sutherland, 2017:51).

In order for the researcher to meet the second objective of this study, the following hypothesis was tested:

a) To determine the relationship or correlation that exists between various factors influencing student nurses' absenteeism, namely student-centred factors, home related factors, school-related factors and social factors, lectures and practical settings.

Tests were conducted to test the following hypotheses:

Ho1: A relationship exists between home-related factors and social factors.

Ha1: There is no relationship that exists between home-related factors and social factors.

Ho2: A relationship exists between student-centred factors and social factors.

Ha2: There is no relationship that exists between student-centred factors and social factors.

Ho3: A relationship exists between student-centred factors and home-related factors.

Ha3: There is no relationship that exists between student-centred factors and homerelated factors.

Ho4: A relationship exists between school-related factors and social factors.

Ha4: There is no relationship that exists between school-related factors and social factors.

Ho5: A relationship exists between lectures and other factors.

Ha5: There is no relationship that exists between lectures and other factors.

Ho6: A relationship exists between practical factors and lectures.

Ha6: There is no relationship that exists between practical factors and lectures.

1.19 OUTLINE OF THE DISSERTATION

The chapters of this dissertation are organised as follow:

Chapter 1: Orientation and overview of the study

Chapter 2: Conceptual framework on factors influencing absenteeism amongst student nurses

Chapter 3: Research design and method

Chapter 4: Research results and data analysis

Chapter 5: Discussions, limitations, recommendations and conclusion

1.20 SUMMARY

In this chapter, an introduction, rationale and overview of the study were presented. The research problem was also described. The research purpose and objectives of the study were discussed, along with the research methods and design. Key concepts were defined, followed by the paradigmatic perspective of the study. In Chapter 2 of this study, the researcher describes the conceptual framework that guided this research.

CHAPTER 2: CONCEPTUAL FRAMEWORK ON FACTORS INFLUENCING ABSENTEEISM AMONGST STUDENT NURSES

2.1 INTRODUCTION

In Chapter 1, an orientation and overview of the study were presented. In this chapter, the researcher focuses on presenting the conceptual framework that directed and guided this study. The first part of the chapter defines and highlights the classification of absenteeism. This study was guided by the modified conceptual framework “Predictors of Nurse Absenteeism” of Taunton, et al. (1995). The framework was arranged in a manner that explored, described and determined the relationship between student-centred factors, home-related factors, school-related factors and social factors that influence absenteeism amongst student nurses in a public nursing college.

2.2 INFORMATION AND LITERATURE SEARCH PROCESS

To obtain relevant literature for this study, the researcher used different information sources. The following search engines were used to identify relevant data that fit well with this study: Nursing and Allied Health Sources, PubMed, CINAHL Plus, Google Scholarly, Sage, Science direct Science direct ebook, Government Acts & SANC Acts and regulations, South African theses, Pro-Quest, Ebsco-Host, Health Sources (Nursing or Academic Editions), SAe Publication, and Medline. The keywords that were used to search for the relevant online literature included ‘absenteeism’, ‘causes or effects of absenteeism’, ‘student nurse’, ‘nursing’ and ‘college’. The search of information focused on literature not older than five years, from 2012 to 2017. The literature search was guided by the chosen conceptual framework of Taunton, et al. (1995). This model was seen to be appropriate because student nurses form part of the working force because of their dual-status in the South African context.

2.3 DEFINITION OF ABSENTEEISM

The concept 'absenteeism' can be difficult to define. This is because sometimes absenteeism is defined in terms of aspects such as type of absenteeism, classification and the length thereof. 'Absenteeism' is broadly defined as "the non-attendance of an employee when scheduled to work" (Booyens & Bezuidenhout, 2013:247). According to Allen (1993:1), absenteeism refers to frequently being away from work or school, especially without a valid reason. This can also be associated with low job motivation. According to the South African Labour Guide Manual (Act 66:1995:1), absenteeism does not only mean not being at work, but you are deemed absent if you are not physically on duty or you perform other non-work related duties during the official hours of work.

2.4 TYPES OF ABSENTEEISM

Absenteeism can be classified in three broad categories, namely absence because of illness, authorised absence, and unauthorised or unexcused absence (Singh, 2012:13). Absence due to illness is categorised as being absent when one is sick or ill. Authorised absence is when the employer grants an employee permission to be absent, like in case of study leave or attending union meetings. Unauthorised or unexcused absences exist in circumstances where there is no permission given, or the absence does not meet sickness criteria.

2.5 CLASSIFICATION OF ABSENTEEISM

Berlita, Mbindyo and English (2013:1) focus on classifying 'absenteeism' on the basis of whether it was planned, unplanned, voluntary or involuntary absence that made an employee or a student stay away from school or work. According to Baloyi (2014:28), various authors classify 'absenteeism' differently, depending on the duration and how it happened. It can be classified as authorised or unauthorised, partial or full absenteeism, lesson or school refusal absence, simple truancy absence, student-motivated absenteeism, non-student-motivated absenteeism, or short-term

absenteeism. Chronic absenteeism has detrimental effects as it easily leads to termination of contracts or prolonged years of study.

Booyens and Bezuidenhout (2013:247) clarify that the classification of 'absenteeism' can differ from one academic institution to another; however, classifications and types of absenteeism tend to have more similar meaning and are used interchangeably.

2.6 CONCEPTUAL FRAMEWORK

This section of the literature review commences with a brief overview of the conceptual framework of nurse absenteeism by Taunton, et al. This study was guided by a conceptual framework adapted from Taunton, et al. (1995:218) which identifies the "Predictors of Nurse Absenteeism". This framework focuses on four main constructs: The student nurse, nurse manager, work and organisation or instructional, and the characteristics of an employee being absent from work. The student nurse characteristics include age, gender, family responsibilities, transport problems, income or stipend, physical illness, commitment to work or motivation, and the qualifications an individual possess. Nurse manager characteristics include the type of leadership style that is used in a unit or ward. The nurse manager leadership style is also important to be identified. Work characteristics include teamwork, togetherness, and support for each other or from managers, team cohesion and routine work. Instructional characteristics include staffing (human resource), incentives or recognition awards, promotion opportunities, absenteeism policies, career development and infrastructure (material resources) like equipment (Taunton, et al. 1995:218).

2.6.1 Modified version of Taunton, et al's. Predictors of Nurse Absenteeism conceptual framework

The researcher arranged the framework of Taunton, et al. (1995) in a manner that identified student-centred factors, home-related factors, school-related factors and social factors that may have influenced the student nurse to be absent. These factors

were put together with their characteristics. The framework focuses on how motivated individuals are to accomplish the task or duty at hand or achieve the set goals.

The other aspect that the framework focuses on are the elements that contribute to job satisfaction at the workplace. In South Africa, student nurses have a dual-status, that of being a student learner and that of being employees in a clinical area. They take care of patients and therefore share some characteristics with the employees as per Taunton, et al's. (1995:218) conceptual framework, hence the arrangement of the framework to qualify and make it relevant to this study. The framework depicts the causes of absenteeism in different major categories and characteristics as illustrated in Figure 2.1. It is used in relation to the questionnaire that was administered in this study to collect data (FIAQ – Appendix E). The questionnaire is divided into three sections: Section A = biographical data (participant's age, gender, level of study, distance travelled to campus, and method of transport used). Section B = questions on factors influencing student nurses' absenteeism from class or practical settings. Section C = questions relating to the absenteeism of lectures and practical supervisors. Section D = questions relating to recommendations to manage absenteeism.

2.7 APPLICATION OF THE CONCEPTUAL FRAMEWORK TO THE STUDY

This study focuses on all the relevant constructs of the framework together with their characteristics as illustrated in Figure 2.1. The literature was reviewed and the discussions of the study focused on the questionnaire that was used to collect data along with the parameters of this framework to describe the factors that influence student nurses' absenteeism.

Several factors may contribute to student absenteeism. Farquharson, Allan, Johnston, Choudary and Jones (2012:1625) reported in a recent literature review that stressful aspects of nursing as a career choice included demanding work accompanied by poor support, rapidly changing circumstances, lack of resources (including human resources), and dealing with difficult patients and death. Donovan, Doody and Lyons (2013:969-970) agreed in their study when they examined the effect of stress on

health and its implications for nursing that stress can have a significant impact on individual nurses and their ability to accomplish tasks. Stress, as one of several factors, can directly contribute towards absenteeism, decreased work performance. Student nurses are also faced with these types of scenarios on a daily basis when they are attending classes and in their practice clinical areas, which could be a reason for high absenteeism and attrition rates. The researcher reviewed the literature that explored and described the factors that influence absenteeism amongst student nurses.

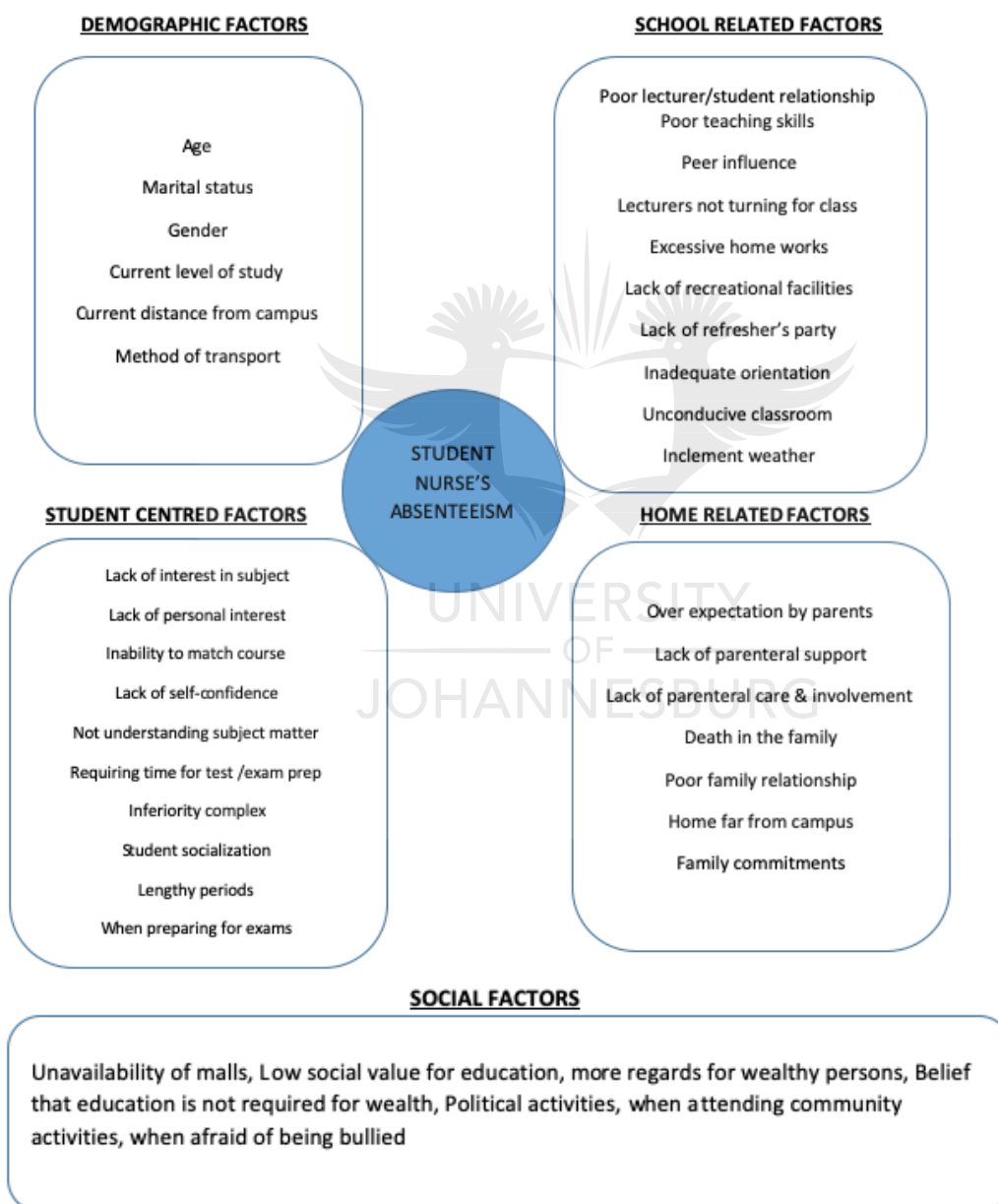


Figure 2.1: Conceptual framework of “Predictors of Nurse Absenteeism” (Modified version of Taunton, et al. 1995)

2.8 FACTORS INFLUENCING ABSENTEEISM AMONGST STUDENT NURSES

According to Farquharson, et al. (2012:1625), there are many factors and variables that contribute to student nurses' absenteeism. These factors may range from elements of stressful events, lack of support, human resource issues, lack of resources in the institutions, dealing with difficult patients, and poor management processes by government officials. These factors affect student nurses directly or indirectly, and when students are faced with these circumstances, they opt to be absent from class or clinical areas using absenteeism as a coping mechanism. They do not seem to understand how absenteeism impacts on their studies and on patient care. Student nurses become so desperate to absent themselves, especially in clinical areas, that they fraudulently sign the next day's clinical attendance register and the off-duty register for those who they know are not planning on attending (Department of Health, 2009).

2.8.1 Student's demographic factors as factors influencing absenteeism

Student nurses' absenteeism is affected by variables such as age, gender and marital status. Interestingly, a higher rate of absenteeism was found in younger nurses (Mahmoud, Muhammad, Ali & Ferial-Ahmed, 2014:80).

2.8.1.1 Age

There is a significant relationship between age and absenteeism. Evidence suggests that the majority of younger student nurses become absent from work because senior officials do not want to give them days off as they have requested, while at the college the lecturers implement unequal and unfair methods of discipline (Simelane, 2013:143). Hakim (2014:85) also maintains that younger student nurses are more frequently absent from the workplace and from school.

On the contrary, a study done by Singh (2012:55), revealed no relationship between age and absenteeism. However, Paton (2015:7) argues that middle-aged workers between the ages of 30 to 49 took more sick leave than any other age group. The

researcher was interested in investigating if age as a variable has an influence on absenteeism amongst student nurses.

2.8.1.2 Marital status

Marital status can be difficult to explore and describe in terms of whether it has an influence on absenteeism amongst student nurses, as most students in the nursing college that was studied were not married (College Human Resource Statistics, 2017). Students are generally absent from class and from clinical work areas because of family matters, such as attending to a sick child, husband, wife or parent (Simelane, 2013:60). In a study that was conducted by Currie, McCallum, Murray, Scott, Strachan, Yates and Wright (2013:743), one respondent indicated that she was absent because her son was ill and therefore it was an unavoidable situation. Student nurses comprised of both males and females, married and single, and some were breadwinners in their homes; taking care of their families is a priority. The researcher was thus interested in investigating if marital status as a variable has an influence on absenteeism amongst student nurses.

2.8.1.3 Gender

Singh (2012:15) found no significant relationship between gender and absenteeism, this study found no particular relationship between gender and absenteeism as absenteeism was present throughout. However, Deane and Murphy (2013:2287) and Wadesango and Machingambi (2011:91) found that male students were more frequently absent than their female counterparts. Desalegn et al. (2014:6) and Simelane (2013:144) on the other hand, found no relationship between absenteeism and gender.

2.8.1.4 Current level of study

According to Singh (2012:18), absenteeism amongst student nurses occurs in all levels of training, even though it may not be clear whether it increases or decreases with the level of studies or with the experience gained. Simelane (2013:144) claim that

absenteeism reduces with experience. The researcher was interested in investigating if the current level of study as a variable has an influence on absenteeism amongst student nurses.

2.8.1.5 Current distance from campus

Balfanz and Byrnes (2012:26) agree that students who use more than one mode of public transport to get to school, are often absent or arrive late. When they arrive after the lessons have started and feel embarrassed about being late, they will stay absent. Students who rely on public transport to come to school are more likely to be absent than those students who walk or drive themselves to school (Bati, Mandiracioglu & Orgum, 2013:598). The researcher was interested in investigating if the distance from the campus as a variable has an influence on absenteeism amongst student nurses.

2.8.1.6 Method of transport

Maluleke, et al. (2014:401) affirm that student nurses and staff who use taxis normally come late and when they are already late for work, they decide not to go to work or school at all. Those students who owned cars would similarly decide not to show up for work or school if they experienced problems with their car. Students report that transportation problems are a source of class absenteeism since they do not get transport on time (Bati, et al. 2013:598). Singh (2012:51) indicates that nurses living in the nurses' residence are absent less frequently compared to those who use public transport or those who walk to work or school. It can be expected that the method that student nurses use to get to class can influence absenteeism by determining their attendance. According to Merghani, Eldirin Haroun and Elmubarak (2013:325), a low socioeconomic status leads to a failure to pay for the students' transport to school, which can cause school absence. The researcher was interested to investigate if method of transport as a variable has an influence on absenteeism amongst student nurses.

2.8.2 Student-centred factors that influence absenteeism

In Hakim's (2014:22) study on midwifery students, the results showed that one group of students who were enrolled in one of the university campuses had a higher absenteeism rate, while the other group of students who were in another campus had an average absenteeism rate. The second group expressed satisfaction with the study environment and their opted field of study.

Student-centred factors that influence absenteeism include the student's lack of interest in the course or subject, lack of personal interest in the studies, a student's inability to match the opted course or programme, lack of self-confidence amongst other students, not understanding the subject, requiring time to prepare for tests or exams, inferiority complex, lengthy classes, and too much socialisation amongst students (FIAQ SC1-SC10, see Appendix E). These student-centred factors are discussed next.

2.8.2.1 Students' lack of interest in course or subject

The researcher was interested in this study to determine if there is a relationship between a student's lack of interest in the course and absenteeism. Thekedam (2013:1028) indicates that if a student becomes uninterested in their course or subject, especially if this subject is being taught by lecturers who do not make it interesting, then students easily become absent from class. Bati, et al. (2013:597) also concur that students who display low self-motivation become easily absent from class. These students include those who get bored, either by the lecturer or the lecture. Suhid, Rahman and Kamal (2012:348) support that students who are normally absent are those who feel tired and bored by certain subjects.

There is definitely a need for students to get more information about courses they want to pursue and they should change their negative attitude about institutional courses. Employee dissatisfaction and demotivation has also been linked to excessive levels of stress, resulting in turnover amongst nurses (Kuo, Lin & Li,

2014:225). It was expected in this study that a lack of interest in the course or subject might influence absenteeism.

2.8.2.2 Lack of personal interest in the studies

The researcher was interested in this study to determine if the lack of personal interest in studies influences absenteeism. A study conducted by Thekedam (2013:1028) showed that when a student is not stimulated or lacks interest in the course or subject and lessons being taught by lecturers, it causes the students to dislike the lesson which leads to absenteeism or dropout. Bradshaw and Lowenstein (2014:35) state that the responsibility for learning lies with the learner, but feelings of anxiety and isolation can cause stress that affects the learning process and may affect graduation rates and successful entrance into the profession. It was expected in this study that lack of personal interest in studies might influence absenteeism.

2.8.2.3 Inability of students to match the opted course or programme

In this study, the researcher was interested in determining if inability to match opted courses influence student nurses' absenteeism. There are students who do not match the standard of their course in terms of cognitive ability; the so-called cognitive intelligence. When these students underperform academically, they become frustrated. They then start to feel that the lesson or subject is irrelevant to their lives, and as a result, they absent themselves from class (Gupta & Lata, 2014:14). On the days when test results or assignment results are published, they will be absent, escaping from the embarrassment of being seen by other students as achieving low marks (Gupta & Lata, 2014:12). It was expected in this study that the inability of student to match the chosen course might influence absenteeism.

2.8.2.4 Lack of self-confidence amongst other students

The researcher was interested in determining if lack of self-confidence does really influence the absenteeism of student nurses in this study. If a student comes from a family with a negative cultural-educational perception, then the student might feel

socially unaccepted at school or feel disliked by other students (Patel, Cook, Cook & Amendola, 2013:14). Patel, et al. (2013:13) further indicate that poor academic performance leads to the development of low self-esteem, which is a common cause of student absenteeism. Desalegn, Berhan and Berhan (2014:2) claim that absenteeism has been shown to be an indicator of low levels of motivation for learning. It was expected in this study that lack of self-confidence amongst other students might influence absenteeism.

2.8.2.5 Not understanding the subject

The researcher was interested in determining if not understanding the subject can cause student nurses' absenteeism. In a study that was conducted by Baloyi (2014:72), a lot of students disagreed that they would stay absent from classes when they do not understand the subject. Thobokgale et al.'s (2013:77) research results similarly indicated that students do not stay absent because they do not understand the subject matter. It was expected in this study that not understanding the subject may influence absenteeism.

2.8.2.6 Requiring time to prepare for tests or exams

The researcher was interested in this study to determine if requiring more time to prepare for a test can be a variable that causes student nurses' absenteeism. Students become absent from school when they need to prepare for a pending test or exam. This includes having to work on an assignment that is due (Kumar & Rao, 2013:512). According to Desalegn, et al. (2014:82), students verbalised that when they need to prepare for examinations, they stay absent from class, so this is seen as a factor that contributes towards absenteeism. In addition, students with low academic performance absent themselves with the intention of getting enough time to study so that they can boost their marks (Ramlah & Ahmad, 2013:6). It was expected in this study that when students want to prepare for tests or exams, it may influence their absenteeism.

2.8.2.7 Inferiority complex among the students

The researcher was interested in this study to determine if there is a relationship between inferiority complex and absenteeism amongst student nurses. Inferiority complex is a major issue amongst student nurses. Students tease each other at school, especially those who are not performing well. A significant number of participants agreed that inferiority complex does cause a student not to come to school (Baloyi, 2014:72). It was expected in this study that students with an inferiority complex might stay absent from class.

2.8.2.8 Lengthy classes

In this study, the researcher was interested in determining if lengthy classes cause absenteeism amongst student nurses. Suhid, et al. (2012:347) mention that if classes are too long, especially when they are organised by school management, it becomes a significant source of absenteeism. Some lecturers become so passionate about what they teach, and they explain a concept for a long time, taking up students' time without paying it back, which causes absenteeism (Mergani, et al. 2013:325). As a result, students become frustrated because lectures that were meant to be short end up being long; to avoid them being robbed of their time, they will then choose not to attend such classes at all (Kumar & Rao, 2013:512). It was expected in this study that lengthy classes could be a factor influencing students to stay absent.

2.8.2.9 Too much socialisation amongst students

The researcher was interested in this study to determine if too much socialisation amongst students result in student nurses' absenteeism. There are students who are reported to be absent most frequently when they are in the company of those who abuse drugs and alcohol; this habit of drinking alcohol has increased amongst students (Hixson, 2012:28). Desalegn, et al. (2013:16) state that social drug use is strongly associated with being absent from lectures. Previous studies have shown that substance abuse and alcohol consumption are risk factors for prevalent and

unexcused absence from lectures. It was thus expected in this study that too much socialisation could be a factor influencing students' attendance.

2.8.2.10 Requiring time to prepare for examinations

The researcher was interested in this study to determine if requiring more time to prepare for examinations can be a variable that causes student nurses' absenteeism. This variable has been discussed above along with the absenteeism when preparing for the test (please refer to 2.8.2.6).

2.8.3 Home-related factors that influence absenteeism

Home-related factors that influence absenteeism include an over-expectation by parents, lack of parenteral support, lack of parenteral care and involvement in children's activities, death of a family member, poor family relationships, home being too far from the campus, and family responsibility and commitments (FIAQ HR01-HR07, see Appendix E). These home-related factors are discussed in this section.

2.8.3.1 An over-expectation by parents

The researcher was interested in this study to determine if there is a relationship between over-expectation by parents and absenteeism amongst student nurses. A study that was conducted by Abdelrahman and Abdelkader (2017:64) revealed that when there is over-expectation from parents to see their children succeed or complete the course with high marks, it could cause absenteeism. Students see this over-expectation as being unreasonable, and the relationship between them and their parents becomes worse. It was expected in this study that over-expectation and demands from parents can be a factor influencing students' absenteeism.

2.8.3.2 Lack of parental support

In this study, the researcher was interested in determining if a lack of parental support can result in absenteeism amongst student nurses. According to the study conducted

in one of the universities from the article 'Minority Staff Nurse' (2013:2), students entering nursing programmes often have no role model. This can cause a big change in their lives especially in their first year of study. Parents have no idea of the challenges that their children are about to face as they embark on their nursing programme. It therefore helps for parents to show a little support by attending orientation events that are organised by academic institutions. Other institutions offer programmes to parents to encourage them to be supportive of their children (Nursing Educational Opportunity Fund Program, 2013:2). It was expected in this study that lack of parental support could be a factor influencing students to stay absent.

2.8.3.3 Lack of parental care and involvement in children's academic activities

The researcher was interested in this study to determine if a lack of parental care is a variable causing absenteeism amongst student nurses. Parents, especially fathers, have a significant role to play, particularly with regards to their involvement in their children's health and care during the period while they are studying (De Montigny, 2011:1). Fathers' involvement benefit children; it has major effects on their cognitive, intellectual and socio-emotional development, on their social competence and their sexual identity. In turn, they do well at school. It was expected in this study that lack of parental care and involvement in academic activities could be a factor influencing students' attendance.

2.8.3.4 Death of a family member

Stressful events, such as the death of a family member, influence student nurses' absenteeism; this is seen as multi-facet issues with more linked factors to it (Singh, 2015:10). The author further says there are students who had to stay absent from school because they were faced with family responsibility, such as attending a family member's funeral. Community activities, such as funerals, are essential commitments that result in school absence (Baltimore Community, 2012:7). It was expected in this study that the death of a family member could be a factor influencing students' absenteeism.

2.8.3.5 Poor family relationships

The researcher was interested in this study to determine if a poor family relationship can lead to student nurses' absenteeism. According to a study conducted by Baloyi (2014:74-75), some students verbalised that they become absent when there is dysfunction in their family or poor family relationships. It was expected in this study that poor family relationships and dysfunction in the family could be a factor influencing students to stay absent.

2.8.3.6 Home being too far from the campus

The researcher was interested in this study to determine if the home being too far from the campus can cause absenteeism amongst student nurses. Students who do not have accommodation tend to suffer as they have to travel vast distances to school. These students generally become absent because they often do not have transport money when they live far from school (Singh, 2012:51). Student nurses' academic performances are also negatively affected when they live far from the campus (Shoukat, Haider, Khan & Ahmed, 2013:285). Merghani, et al. (2013:325) concur that low socioeconomic status leads to failure to afford transport costs, which causes absence from school. Singh (2012:51) indicates that nurses living in the nurses' residence are absent less frequently compared to those who use public transport or those who walk to work or school. It was expected in this study that being too far from the campus can be a factor influencing students to stay absent.

2.8.3.7 Family responsibility and commitment

According to Suhid, et al. (2012:346), the family is regarded as the primary institution that causes student absenteeism in most situations. The findings of Malik's (2012:448) research, the illness of a family member prevents children from attending classes. Student absenteeism occurs mostly during the last semester due to family commitments, such as families going on holiday (Queensland Department of Education, 2013:10). The Paradise Unified School Parent-Student Handbook (2014:5) claims there is substantial evidence that the death of a family member

causes students to be absent from school. In addition, Balfanz and Byrnes (2012:27) say that as children enter early adolescence, family responsibilities can keep them from school. Balfanz and Byrnes (2012:68) add that there is growing evidence of even young adolescents taking on elder-care responsibilities in single parent, multi-generational households. It was expected in this study that family commitments could be a factor influencing students to stay absent.

A small percentage of students agreed that family problems were the reason for absenting themselves, as they needed time to address these challenges. Bradshaw and Lowenstein (2014:35) state that family responsibilities can also interfere with a student's ability to carry out their required work. The researcher determined that it would be very interesting in this study to establish whether having too much family responsibility can result in absenteeism.

2.8.4 School-related factors that influence absenteeism

School-related factors that influence absenteeism include poor lecturer-student relationship, poor teaching skills of lecturers, negative peer influence on lectures, lecturers not turning up for scheduled lectures, excessive homework for students, lack of recreational and allied activities like sport programmes, lack of parties, inadequate orientation about hours of training, unsuitable environment for conducive learning, poor infrastructural facilities in school, and inclement weather (FIAQ SR01-SR11, see Appendix E).

2.8.4.1 Poor lecturer - student relationship

The researcher was interested in this study to determine if there is an association between poor lecturer-student relationships and absenteeism. Certain students choose not to come to class simply because they do not get along with the lecturers who teach at a particular institution; this is one of the major reason students will not come to class (Gupta & Lata, 2014:13). In support, Bati, et al. (2013:597) also indicate that when students do not have a good relationship with their lecturers, they often feel

demotivated and show this by being absent. It was expected in this study that poor student-lecturer relationships can be a factor influencing students' attendance.

2.8.4.2 Poor teaching skills of lecturers leading to boring lectures

Teachers who have good teaching skills deliver lectures that are organised and structured. Good communication skills attract students and show higher attendance rates (Sharmin, Azim, Choudhury & Kamrun, 2016:61). One of the factors that influence absenteeism is the manner in which lecturers present the lessons; sometimes, lecturers go to class unprepared (Bati, et al. 2013:597). Bradshaw and Lowenstein (2014:10) state that as students advance in their education, their established, comfortable ways of thinking and reflection are challenged. This is especially true in the health professions, where students explore value systems that differ from their own and identify ethical dilemmas in practice or circumstances in which there is more than one right answer, or no clear choice. Therefore, if students are not taught to manage these situations effectively, it could result in absenteeism. It was expected in this study that poor teaching skills can be a factor influencing students to stay absent.

2.8.4.3 Negative peer influence on lectures

There are students who come to class even though they are not happy and when they are in a bad relationship with their lecturers, they intentionally disrupt the class by making noise or influencing others to make noise (Hildergaurd, Vink & Adejumo, 2014:172). In addition, it was revealed that students who are having personal differences with lecturers, influence their peers not to attend classes as a way of fighting back (Gupta & Lata, 2014:13). Other students miss classes in order to accompany their friends, indicating peer influence (Wadesango & Machingambi, 2011:93). It was expected in this study that negative peer influence could be a factor influencing students' absenteeism.

2.8.4.4 Lecturers not turning up for scheduled lectures

The researcher was interested in this study to determine if lecturers who do not turn up for scheduled classes directly influence absenteeism amongst student nurses. Thedekam (2013:1028) states that one of the academic-related reasons for student absenteeism includes lecturers not coming to class for scheduled lectures. It is expected that lecturers will come to class and be on time, because they are supposed to be role models to the students they teach. It was expected in this study that lecturers not turning up for scheduled lectures can be a factor influencing students to stay absent.

2.8.4.5 Excessive homework and projects for students

The researcher was interested in this study to determine if giving excessive homework to student nurses will lead to absenteeism. A study conducted by Fayombo, et al. (2012:127) revealed that when students are overloaded with excessive homework and assignments, they sometimes stay absent trying to complete the assignments they were given. An excess of homework, and sometimes fear of examination, keep students from school/college. Wadesango and Machingambi (2011:15) indicate that many students do not attend core learning sessions due to other pressing study related activities they are busy with. The authors mentioned several activities that have a bearing on students' non-attendance of lectures; chief amongst them, the need to work on assignments, completing assigned projects, researching in the library, preparing for presentations, and studying for pending tests. It was expected in this study that giving students excessive homework could be a factor influencing student nurses' absenteeism.

2.8.4.6 Lack of recreational and allied activities like sports programmes

Students like to play and distract themselves from the normal routine of studies. In an institution where there are poor sports programmes and allied activities, the absenteeism rate increases, so it works better if there are extracurricular activities at college so that students feel enthusiastic about college (Jaura, 2013: 38-39). It was

expected in this study that a lack of recreational activities could be a factor influencing absenteeism amongst student nurses.

2.8.4.7 Lack of refresher's or farewell parties

The researcher was interested in this study to determine if lack of refresher and farewell parties can lead to absenteeism amongst student nurses. Lack of allied activities also causes absenteeism, including no sports programmes, no parties, and no annual day celebrations. These are some of the reasons that keep students from class (Berlita, et al. 2013:38). Juara (2013:38-39) also concurs that lack of farewell parties at the end of each year contributes to absenteeism as students do not feel recognised for their achievement of advancing to another level of study. It was expected in this study that a lack of parties could be a factor influencing absenteeism and causing nursing students to stay absent.

2.8.4.8 Inadequate orientation about the hours of training

The researcher was interested in this study to determine if inadequate orientation about the hours of training is a variable that influences absenteeism amongst student nurses. In Nigeria, it is mandatory for students to attend 75% of their lectures before they are allowed to write their final examination. Therefore, attendance policies have been formulated and applied (Fayombo, et al. 2012:122). Most institutions' attendance and absenteeism policies are not clear, and they are not well communicated to students. In a study conducted by Baloyi (2014:85), an average of 50% of students was absent due to a lack of understanding the policies.

As per the SANC guidelines and regulations, students are placed in clinical areas to complete their hours in the level of training to learn nursing skills (SANC, 1992:9). These guidelines must be explained to students thoroughly, and the students must understand them. The SANC is also responsible for ensuring that all nursing colleges and schools have an absenteeism policy that everyone will adhere to. SANC allows only 20% absence for nursing students per annum (SANC, R425). It was expected in

this study that inadequate orientation and unclear policies could be a factor influencing absenteeism and causing nursing students to stay absent.

2.8.4.9 Unsuitable environment for conducive learning

The researcher was interested in this study to investigate if an unsuitable environment for conducive learning can cause student nurses' absenteeism. Gupta and Lata (2014:13) indicate that an unfavourable learning environment contributes towards school absenteeism. Some institutions have no library, or if there is a library, it is very small. A study conducted by Bati, et al. (2013:597) revealed difficulty amongst students in adapting to college or university environments that lack basic teaching resources, and this causes student absenteeism. Bati, et al. (2013:598) maintain that small lecture halls utilised for large groups of students create absenteeism amongst the students due to overcrowding. In addition, large numbers of students in one classroom predispose students to absenteeism (Bati, et al. 2013:596).

West (2012:9) agrees with Gupta and Lata (2014:13), explaining that most students reported that a poor classroom environment leads to high rates of school absenteeism, especially during cold and hot days. Lecturers and students should strive to create a civil educational environment to meet learning outcomes that promote safe patient care (Ruth-Sahd & Schneider, 2014:164-165). It was expected in this study that unsuitable school environments that are not conducive to learning can be a factor influencing absenteeism and causing nursing students to stay absent.

2.8.4.10 Poor infrastructural facilities in schools

The researcher was interested in this study to investigate if poor infrastructural facilities in school can lead to student nurses' absenteeism. Bati, et al. (2013:598) maintain that small lecture halls utilised for large groups of students create absenteeism amongst the students due to overcrowding and it becomes difficult to monitor the students. In addition, large numbers of students in one classroom predispose students to absenteeism (Bati, et al. 2013:596). It was expected in this

study that poor infrastructure facilities in schools can be a factor influencing absenteeism amongst student nurses.

2.8.4.11 Inclement weather

The researcher was interested in this study to determine if there is a relationship between inclement weather and absenteeism amongst student nurses. During very cold days, students easily become absent from class especially when they know that their classrooms are not warm enough and there are no heaters; on hot days, it is too warm with no proper ventilation (Gupta & Lata, 2014:13). About 80% of school absences are due to legitimate reasons, which include bad weather conditions such as snow (Balfanz & Byrnes, 2012:4). Simelane (2013:57) agrees that when lecture rooms are too cold or too hot, students do not come to class. It was expected in this study that inclement weather can be a factor influencing absenteeism and causing nursing students to stay absent.

2.8.5 Social factors that influence absenteeism

Social factors that influence absenteeism include the unavailability of opportunities for entertainment, like malls or movies around the campus, low social value for education, more regard for wealthy persons than educated persons, political activities such as rallies and riots, attending community activities, and being bullied at school (FIAQ SF01-SF08, see Appendix E). These social factors that influence absenteeism are discussed in the section that follows.

2.8.5.1 Unavailability of opportunities for entertainment like malls or movies around the campus

The researcher was interested in determining if the unavailability of opportunities for entertainment could lead to absenteeism amongst student nurses. The study that was conducted by Baloyi (2014:76) indicate that students disagree that they would stay absent from class or clinical areas due unavailability of shopping malls and other entertainment places. When students have earned their stipend, they become absent

from class and do not attend some lectures to go and withdraw money. However, some of the nursing schools do not have ATM machines, and it is advisable to install them since this could reduce absenteeism rates in both the classroom and clinical areas (Thobokgale, et al. 2013:83). It was expected in this study that unavailability of shopping malls could be a factor influencing absenteeism amongst student nurses.

2.8.5.2 Low social value for education

In this study, the researcher aimed to determine if a low social value for education leads to absenteeism. A number of student nurses still believe there is high value in becoming educated. Students perceive education as an important aspect in our society; yet some students have more regard for wealthy persons than educated persons. There is still a belief that a lot of education is required in our society for success and economic growth (Baloyi, 2014:76).

2.8.5.3 More regard of wealthy persons than educated persons

The researcher was interested in determining if there is a relationship between more regard for wealthy persons than educated persons, and absenteeism amongst student nurses. However, nursing students strongly disagreed that they would be absent from school because they have more regard for wealthy people than educated people (Baloyi, 2014:76).

2.8.5.4 Belief that much education is not required for success and business

According to the research study that was conducted by Bandura (2009:504) absenteeism is influenced by the belief that there is no connection between education and better life opportunities in the creation of personal wealth. The value of college education is debated; there are a number of entrepreneurs around the world who never graduated from college or university, yet they found success in their respective fields (Smale, 2017:3). The author further argues that many will point to these examples and conclude, "See, you don't need a college degree to be successful!"

2.8.5.5 Political activities such as rallies and riots

The researcher was interested in this study to determine if political activities like rallies and riots have a direct influence on student nurses' absenteeism. Political activities have a significant influence on determining student nurses' absenteeism. Some of these students are union representatives, others serve in the Student Representative Council (SRC) structure and engage college management through political activities (College-Campus Statistics, 2017). Many students are absent from class due to attending political conferences (Kousalya, Racinndranath & Vizavakumar, 2006:5). Most students view political activities as helpful in resolving school-related problems (Longo & Meyer, 2006:2). Students who show interest in politics usually have a family political background (Hillygus, 2005:34). Although political activities are allowed and taken as a democratic right (Virginia Department of Education Policy, 2005:58), they contribute to student absenteeism.

2.8.5.6 Transportation problems

The researcher was interested in this study to determine if experiencing transport problems can result into absenteeism of student nurses. Maluleke, Thopola, and Lekhuleni (2014 :401) affirmed that staff and students who use taxis normally come late and when they were late already for work they would decide not to go at all, and those students that owned cars if it had a problem with ignition then they would just decide not to show up at work or school. Students report that transportation problems are a source of class absenteeism, since they do not get transport on time (Bati et al., 2013:598). Sighn (2012:51) indicates that nurses living in the nurse's residence have less absenteeism compared to those who use a public transport or those who walk to work or school. Merghani et al. (2013:325) indicated that a low socio-economic status leads to the failure to pay for the students' transport to school and causes school absence.

2.8.5.7 Attending community activities

The researcher was interested in this study to determine if attending community activities is a reason for absenteeism amongst student nurses. There is a small number of students who confessed and agreed that they are often absent from school or class when they are supposed to attend community activities (35.1%), however, others disagreed completely with this factor (56.1%) (Thobokgale, et al. 2013:83). Abdelrahman and Abdelkader (2017:63) concur that most students disagreed with being absent because they must attend community activities.

2.8.5.8 Afraid of bullying students at school

The researcher was interested in this study to determine whether student nurses would be absent from class due to being bullied by other students. There is a lot of bullying that takes place in schools; students are also known to absent themselves when they are afraid of other students laughing at them when they are unable to answer a lecturer's question (Suhid, et al. 2012:348).

2.9 SUMMARY

In this chapter, the researcher reviewed literature relevant to the research purpose and objectives of this study. The modified version of Taunton, et al's. (1995) framework was used as a guiding framework for this study. The independent variables, associated characteristics and relationship between student-centred factors, homerelated factors, school-related factors, social factors, and some of the clinical factors that influence absenteeism, were examined.

In Chapter 3, the researcher describes the research design and methods of this study in detail.

CHAPTER 3: RESEARCH DESIGN AND METHOD

3.1 INTRODUCTION

In this chapter, the researcher describes the research design and the method used in this study. The details of the paradigm underpinning the study are provided. The population, study setting, sampling and sampling procedure, inclusion and exclusion criteria, the data collection method, data analysis and pilot study of the questionnaire are discussed. Moreover, in this chapter, the steps and methods that were implemented to ensure adherence to validity and reliability during the study, as well as of the questionnaire, are highlighted and illustrated in detail. All ethical considerations applied in this study are also described.

It is clear from Chapter 2, where the literature was reviewed, that there are a number of factors that influence absenteeism amongst student nurses. With this chapter, the researcher thus aimed to describe the research design and method that was followed to investigate and describe these variables as factors that influence absenteeism. The factors include student-centred factors, home-related factors, school-related factors, and social factors.

3.2 RESEARCH DESIGN AND METHOD

The research design and the method of the study are discussed next.

3.2.1 Research design

Burns, Grove and Gray (2013:236) view the research design as a blueprint for conducting a research study that maximises control over aspects that could interfere with the validity of the findings. In this study, a quantitative and descriptive research design was used. This design was appropriate for the study as it allowed the analysis of numerical data that were obtained from the questionnaire that was analysed and described (Appendix E).

3.2.1.1 Quantitative research

A quantitative research design is a form of study process to describe test relationships in a study (Burns, et al. 2013:706). In quantitative research, the researcher believes all human behaviour is objective, purposeful and measurable. The quantitative design is also seen as an objective and systematic process that is precise in the measurement and qualification of data (Burns, et al. 2013:24). By using a qualitative design, it allowed the researcher to assess relationships that exist between different variables. These variables could either be dependent or independent variables (Ingham-Broomfield & Becky, 2015:20). This design entails objectively finding the truth without allowing values and personal feelings to form part of the measurement of reality (Burns, et al. 2013:24).

Creswell (2009:233) states that numerical data are carefully collected and therefore analysed during the statistical procedure. The data are then analysed and described in the form of descriptive data analysis, and hypotheses are tested. In this study, the researcher collected all the relevant data related to factors influencing student nurses' absenteeism in a nursing college in the Gauteng Province. A post-positivist philosophy of science was maintained (Grove, et al. 2013:24).

Post-positivism

Post-positivism recognises that the way scientists think and work, and the way they think in everyday life are not distinctly different. Scientific reasoning and commonsense reasoning are essentially the same processes (Creswell, 2013:67). There is no difference in kind between the two, only a difference in degree. Post-positivism recognises that all observation is fallible and have errors, and all theory is revisable. Where the positivists believe that the goal of science is to uncover the truth, the post positivists believe that the goal of science is to hold steadily to the goal of getting it right about the reality, even though we can never achieve that goal. According to Tappen (2011:42), post-positivism deals with the objects themselves as they exist or with separate phenomena. This phenomenon has to be in line with the research study. The researcher was interested in finding out the truth about whether the identified factors in Chapter 2, for example, student-centred factors, home-related

factors, school-related factors and social factors, influenced absenteeism amongst student nurses.

3.2.1.2 Descriptive research

A descriptive study aims to provide information about the prevalence of the variables or characteristics in a data set (Grove, et al. 2017:672). Polit and Beck (2017:226), concur that the main purpose of a descriptive research design is to observe, describe and document all the aspects of a situation as it would occur in a natural situation or setting. The descriptive and inferential approach was followed in this study. By using the descriptive research design, the researcher was able to accurately portray the characteristics of the student nurses who were being studied, while the inferential statistics helped to make inferences of whether the results obtained from the sample are likely to occur in other parts of the country by applying the generalisation principle (Polit & Beck, 2017:227). The dependent and independent variables were assessed and explained by the researcher using this design in terms of their relationship and how they influence each other (Ingham-Broomfield, 2015:22). In this study, the researcher described the factors influencing absenteeism of student nurses in the first to fourth level of their training programme (R425) in a public nursing college in Gauteng Province, in detail. The researcher believes that this design was well-suited and appropriate to the study because it allowed a numerical analysis of data obtained from the questionnaire through a rating scale.

3.2.2 Research method

According to Burns and Grove (2017:719) research method is described as the process or plan for conducting the specific steps of the study. The research method is used to structure a study and to gather and analyse information in a systematic fashion (Polit & Beck, 2017:727). The research method includes the population, sampling, data collection and data analysis techniques. These are discussed in the following paragraphs.

3.2.2.1 Population and sample

Next, the population and sample of the study are discussed.

3.2.2.2 Population

A population is defined as a group of people, documents, events or specimens from whom the researcher has shown interest in collecting information or data (Moule & Goodman, 2014:461). Grove, et al. (2017:44) agree that the population are all the elements, individuals, objects or substances that meet the set criteria in a research study. The population in this study included all the student nurses registered for the Nursing Diploma Comprehensive Course (R425 programme) in a public nursing college in Gauteng Province. In this study, the target population was student nurses at all levels of training from the first year to the fourth year of the nursing programme at one particular public nursing college. These student nurses were enrolled for the 2017 academic year in one of the nursing colleges that has three campuses, but only two campuses were included in the study since they were the only ones with student nurses registered for the R425 nursing programme.

3.2.2.3 Research setting of the study

The setting is the place where the study is conducted (Grove, et al. 2017:722). According to Polit and Beck (2017:743), the research setting is seen as the physical location and conditions under which data collection takes place in a study. There are different settings for nursing research, and they can range from total naturalistic environments to formally controlled laboratories (Polit & Beck, 2017:49). In this study, the researcher, together with mediators, collected the data in a setting where there was no manipulation or change in the environment (Grove, et al. 2017:362). This study was conducted in Gauteng Province at two campuses of the nursing college that offer the R425 nursing programme from level 1 to level 4. The campuses where the research study was conducted are nursing institutions regulated by the Gauteng Department of Health regulations and policies, fully accredited by the SANC to offer nursing programmes.

In both campuses, absenteeism at the time of conducting the study was high (College Statistics, 2017). The researcher does not work at any of the campuses where the research was conducted, which helped to eliminate bias from this study.

3.2.2.4 Accessible population of the study

The accessible population is the aggregate cases that conform to designated criteria and that are accessible to the researcher (Polit & Beck, 2017:273).

Campus A – Level 1 (1st years): 372 student nurses

Campus B – Level 2 (2nd years): 342 student nurses

Campus B – Level 3 (3rd years):137 student nurses Campus

B – Level 4 (4th years):120 student nurses.

Total of 971 student nurses (College Human Resource Statistic, 2017).

3.2.2.5 Sample and sampling method

A subset of the population that is selected to participate in the research study is called a sample (Polit & Beck, 2017:742). A sample has to be a true reflection and representative of the population (Bezuidenhout, Davis & du Plooy-Cilliers, 2015:135). The researcher is a lecturer in one of the Gauteng colleges which offers the R425 and R212 nursing programme. In order to avoid coercion and bias, this campus (R212 programme) where the researcher worked was not included in the sample. The sample frame in this study included all students who were registered under the R425 nursing programme at two campuses (“A” and “B”), and the list of student nurses from different levels was obtained from the student affairs department with the principal’s permission. The total population size of these two campuses where research was conducted was 971 students. In terms of sampling the respondents, the sampling frame consisted of a list of all students who were registered for the R425 programme and this list was obtained from the principal.

A convenience sampling method was used in this study. This method of sampling entails making a judgment about the population to be studied (Grove, et al. 2017:365). The sampling enabled the researcher to acquire critical information that made it easy to understand the factors that influence absenteeism amongst student nurses. According to Grove, et al. (2017:353), a representative sample should be one that represents the target population in as many ways as possible. Collected demographic data – like age, gender, marital status, level of study and distance – described the sample in detail and ensured that there was proper representativeness in this study. When representativeness is maintained in a research study, the external validity of the findings is strengthened (Grove, et al. 2017:202). The sample size was 480 (n=480) nursing students from different levels (1st - 4th year level). The mediator distributed 480 questionnaires to the nursing students. Of the 480 nursing students, 311 (n=311) respondents completed and returned the questionnaire. Therefore, the actual sample size was 229 (n=229) after eliminating questionnaires that had errors.

3.2.2.6 Inclusion and exclusion criteria

Specific inclusion and exclusion criteria were used in this study. Inclusion criteria included student nurses registered for the R425 nursing programme at a public nursing college in Gauteng Province, at the selected campuses “A” and “B”. For these student nurses to be included in the study, they had to be registered with the college and be either at level 1 to 4 in their programme. The exclusion criteria focused on eliminating student nurses who were not registered for the R425 nursing programme and students from the other campus that did not offer this programme. These were students who attend campus “C”, where the R212 nursing programme is offered. Student nurses who were part of the pilot study were also excluded. The status of being a repeating student was not used to exclude the participants in this study.

3.2.2.7 Sample size

A total of 971 student nurses were made aware of the study to be conducted at the nursing college and were invited to participate. These student nurses were from all levels of the nursing programme: The sample size was more than the target sample

size of 50% of the target population suggested by the University of Johannesburg statistician.

All levels were issued with 120 questionnaires

- Level 1 issued 120, valid = 45
- Level 2 issued 120, valid = 64
- Level 3 issued 120, valid = 68
- Level 4 issued 120, valid = 52

These responses to the questionnaire formed the data and were then analysed. The analysis of data is discussed in Chapter 4.

3.3 DATA COLLECTION

Data collection is defined as a precise, systematic method of gathering information for the purpose of arriving at conclusions in view of the research questions (Grove, et al. 2017:45). The collected data address the research problem of the study (Polit & Beck, 2017:725). Data collection involves obtaining information from the respondents by asking them to respond to the questions asked by the researcher (Polit & Beck, 2017:324). The collected data addresses the research problem (Polit & Beck, 2017: 725). In this study, a questionnaire was used to collect data. A questionnaire is designed to gather data about the prevalence, distribution and interrelations of phenomena within a population (Polit and Beck, 2017:323). A discussion of questionnaire used and the data collection method follows in the next paragraph.

3.4 DISCUSSION OF THE QUESTIONNAIRE

A structured self-administered questionnaire was chosen by the researcher for the collection of data. The questionnaire that was used to obtain data from the participants was an existing questionnaire – the FIAQ – and there was thus no need to develop a new one (Fayombo, et al. 2012:125). The questionnaire was employed after the researcher obtained permission from the original author who developed it (Appendix E). Amendments to the questionnaire were based on recommendations from the statistical analysis department. Sections C and D were added so that the

questionnaire was able to measure all the variables and address all the objectives of this study. Section C specifically measures the rate of absenteeism as participants were asked to indicate how often they had been absent in the past three months. Section D of the questionnaire asked the participants to suggest programmes that could be used to reduce student nurse absenteeism.

The questionnaire was an appropriate tool since data were collected from a large group of participants. It also allowed the participants to write their responses while expressing their views without any intimidation or pressure from the researcher (Grove, et al. 2017: 424). Polit and Beck (2017:297) agree that when a questionnaire is used, the participants are requested to respond to the same questions and in the same order with the same sets of response options.

The structured self-administered questionnaire used in this study was divided into four sections (A, B, C & D) and can be viewed in Appendix E.

3.4.1 Section A: Demographic data

This section of the questionnaire focused on recording the respondents' demographic data. The questions for this section ranged from 1 to 5. Student nurses had to tick the appropriate answer. The reason for including the participants' demographic data such as age, gender, level of study, distance travelled from home to school, distance from home to the nursing campus, and the mode of transport the nursing students used, were related to the reasons for student absenteeism. In this section, the researcher, with the assistance of the study supervisors and the statistician, included the method of transport and the distance the students travel from their homes to the campus.

3.4.2 Section B: Reasons student nurses are absent

In this section, the researcher explored the reasons students absent themselves from class. This section of the questionnaire consisted of 36 questions. The reasons were categorised into four sub-themes, namely: student-centred factors, home-related factors, school-related factors, and social factors. With the help of the study

supervisors and the statistician, changes were made to the questionnaire and effected before data collection commenced. In Section B, the heading which read, "According to your opinion, what are the causes of students' absenteeism", was rephrased as follows: "In my opinion students are absent from class due to the following".

Participants were asked to tick their response in the appropriate box next to the correct answer, thereby choosing the most appropriate answer.

3.4.3 Section C: Measuring Rate of Absenteeism (absenteeism during lectures and from practical areas)

This section was added to the questionnaire with the intention of measuring the rate of absenteeism and it had six questions, three for lectures and three for practical areas. Participants were supposed to indicate in terms of percentages, how often they have been absent from the lectures or practical areas. The rating scale for this section was as follows: "None of them", "Less than 25%", "26% - 50%", "51% - 75%", "76% - 99%", or "All of them". The type of questions that were asked to the participants included:

- How many lectures were you expected to attend in the past month?
- How many lectures did you attend in the past month?
- How many lectures have you missed this past semester?

Three questions were posed to the participants for both missing lectures and for being absent from the practical area.

3.4.4 Section D: Suggested programmes and those in existence

The section focused on the programmes that were available and those that are needed to reduce student absenteeism. Participants were asked to write down and suggest programmes that should be in place at the nursing college to help reduce absenteeism. The other part of the question in this section asked participants to write

down which programmes are already in existence in their nursing colleges or campuses.

3.4.5 Rating scale

Participants were supposed to rate each question honestly, without influence, by giving a response with the objective of assessing the factors that influence absenteeism amongst student nurses. A Likert scale was used with 4 ratings. Student nurses had to rate from 1 - strongly disagree, 2 - disagree, 3 - agree, and 4 - strongly agree. Four sections contained a total of 42 questions. It was only in Section D where the student nurses had to write their answers without ticking an appropriate answer box.

3.4.6 Data collection method

In adhering to ethical principles, before the data collection began the researcher made sure that all relevant permission was obtained from relevant authorities. During the planning phases of this study, one of the requirements was to obtain permission to conduct the study from the Faculty of Health Sciences, Academic Ethics Committee of the University of Johannesburg (Ethical clearance number: REC-01-41-2017, see Appendix B.) The principal of the nursing college where the research was conducted also gave the researcher permission to conduct the study, but before that, the Research Committee of the Nursing College had to look into the study. The Gauteng Department of Health offered its permission for the researcher to conduct the study (Protocol/Proposal Number: GP 2017RP 59 98, see Appendix H).

On receipt of the relevant approval and permission, arrangements were made with the Head of Departments from different level departments so that the researcher could meet the participants and explain the study to them. The researcher made further arrangements and collected the data from the participants between August, September and October 2017. Eligible participants were student nurses registered under Regulation No. R425 of 22 February 1985, as amended, at a nursing college in Gauteng Province.

Participants were informed in writing about the purpose of the research, and the collection method by means of an information letter (see Appendix F). Data collection was done by the researcher who followed the same principles and procedures in all different levels at the selected nursing campuses. There were mediators who availed themselves to assist in the collection of data. These mediators were guided as to how the data had to be collected. The researcher was available when the students completed the questionnaires. The researcher explained the research study to the student nurses in great detail. The student nurses were assured that their names would not be disclosed or used in the study, and their responses would be kept confidential. This was done with the purpose of obtaining a high completion rate.

Most student nurses took 15 to 30 minutes to complete the questionnaire. Participants were advised not to influence each other by talking to one another while completing the questionnaire. They were asked to place their completed questionnaire in a sealed box that was provided for this purpose. The consent forms were handed over separately as well. The researcher then collected the boxes after about 45 minutes when everyone was done. This process was repeated at different campuses to maintain consistency. After each data collection session was finished, the mediator sealed the submitted questionnaires in a box. The researcher then sent the questionnaires to a statistician at the University of Johannesburg for data capturing and analysis.

3.5 DATA ANALYSIS

The purpose of data analysis is to give meaning to the collected information. In quantitative studies, data analysis includes all the techniques used to describe the demographic and study variables (Grove, et al. 2017:46). Demographic variables, like gender, age, marital status and others, are analysed for a specific reason. When analysing the data, it is important to do it in phases so the research question can be answered (Polit & Beck, 2017:725).

After the questionnaires were returned, each questionnaire was scrutinised for obvious errors and to identify those that were spoiled or incomplete; the response rate

was also analysed. As mentioned, in analysing the collected data, the researcher consulted the University of Johannesburg Statistical Consultation Services. The IBM SPSS version 25.0 was used to capture and analyse the data. The researcher made time to meet the statistician to practically demonstrate how to code the questionnaires and how to capture the data. The data were also personally captured by the researcher. Multiple regression data analyses and various other methods were used to focus on the relationship of the factors influencing absenteeism amongst student nurses (Burns, et al. 2013:560).

3.5.1 Descriptive statistics

Descriptive statistics summarise a data set and enable the researcher to present the results of the study in a more comprehensive manner (Botma, Greeff, Mulaudzi & Wright, 2010:148). The descriptive demographic analysis is used to gain a better understanding of the collected data (Runeson & Host, 2009:12).

3.5.2 Inferential statistics

Inferential statistics, as an area of data analysis concerned with drawing conclusions from the characteristics of populations, use sample data to make inferences about the population. It includes the statistical significance and is based on the laws of probability. They tend to draw conclusions about the population provided by data from the sample (Polit & Beck, 2017:405). A detailed discussion of the data analysis follows in Chapter 4.

3.5.2.1 Distribution of data

The distribution of data for the dependent and independent variables of the study was analysed using a special analysis called Kolmogorov-Smirnov and Shapiro- Wilk tests.

The results relating to this analysis are discussed further in Chapter 4.

3.5.2.2 Publication of results

At the time when the research study was explained, the respondents were informed that the research findings would be published without linking the findings to individual respondents, and that no individual identifiers would be used in any publication resulting from this study. Only the team of researchers will work with the shared information

3.6 RESEARCH RIGOUR: VALIDITY AND RELIABILITY

The rigour of the study is now discussed.

According to Grove, et al. (2017:708), rigour is when a researcher strives for excellence in the research study by paying detailed attention to all events, being scrupulous and maintaining strict discipline and accuracy at all times. The researcher adhered to rigour in this study (Grove, et al. 2017:708) by ensuring that validity and reliability were adhered to and followed.

3.6.1 Validity

Validity is the degree to which the instrument measures what it is supposed to (Polit & Beck, 2017:336).

3.6.1.1 Content validity

The questionnaire's content-related validity was closely monitored. Grove, et al. (2017:334) state that content validity is an assurance that the instrument measures all elements of construct, while construct measures relationships between operational and conceptual definitions. All 42 questions on the instrument were analysed for their validity, and to determine whether they addressed the missing gap in knowledge (Fayombo, et al. 2012:124). The questionnaire that was used in this study has been used before in other studies and has thus been tested before (Baloyi, 2014:66). The content validity has to do with the representativeness of the content in the

questionnaire, and this was established by the original developer of the tool and confirmed by the statistician (Fayombo, et al. 2012).

3.6.1.2 Internal validity

According to Polit and Beck (2017:244), internal validity refers to the extent to which it is possible to make an inference about the independent variable, rather than any other factor causing variation in the dependent variable. The researcher ensured internal validity in this study by making sure that all 20 student nurses who participated in the pilot study were excluded during the data collection of the main study. This helped to eliminate the testing effect which, according to Polit and Beck (2017:246) and Grove, et al. (2017:199), might influence the participants to change their attitude between tests.

The researcher was fair in the selection process of the participants, and no bias applied. The participants were given an equal chance of participating and ethical principles were thus adhered to during this study (Dhai & McQuoid-Mason, 2011:1314).

3.6.1.3 External validity

The external validity is concerned with whether the findings could be generalised beyond the sample that is used in the study. In this study, the significance of the research sometimes depends on the number of individuals and situations to which the findings could be applied (Grove, et al. 2017:202 & 353).

The researcher minimised threats in this study by:

- a) ensuring that the inclusion and exclusion criteria for the participants were the same for all the participants in different levels of study. This could help to generalise the findings of the study (Grove, et al. 2017:202 & 353).

b) ensuring that the setting where the data was collected was similar to the setting in which the target population could be found. The researcher collected sufficient data from the participants with regard to age, gender, and marital status, which allowed the researcher to be familiar with these characteristics and to compare them with similar characteristics in the target population (Grove, et al. 2017:202).

3.6.2 Reliability

The reliability of the questionnaire used in this study will now be discussed.

3.6.2.1 Reliability testing

Reliability refers to the consistency of an instrument to measure the target attribute as well as the ability of the instrument to reflect the scores properly (Polit & Beck, 2017:331). Reliability was tested using Cronbach's alpha. The results are discussed in detail in Chapter 4.

The reliability of the questionnaire used in this study was assessed by the original designer of the questionnaire. The Cronbach's alpha reliability coefficients of .79 and .87 was obtained when the questionnaire was tested in previous studies (Fayombo, et al, 2012:125). The reliability and the internal consistency of the questionnaire used in this study refer to the degree to which each item in the scale measures the same type of trait (Polit & Beck, 2017:333).

3.7 RESEARCH HYPOTHESIS

The research hypothesis usually states that there is a relationship, or there is no relationship between two or more variables. Hypotheses can be simple or complex, directional or non-directional, associative or casual (Grove, et al. 2017:24). In order for the researcher to meet the objectives of this study, the following hypotheses had to be tested:

In order for the researcher to meet the second objective of this study, the following hypothesis was tested:

- a) To determine the relationship or correlation that exists between various factors influencing student nurses' absenteeism, namely student-centred factors, home related factors, school-related factors and social factors, lectures and practical settings.

Tests were conducted to test the following hypotheses:

a) Student-centred factors and social factors

Ho2: A relationship exists between student-centred factors and social factors.

Ha2: There is no relationship that exists between student-centred factors and social factors.

b) Home – related factors and social factors

Ho1: A relationship exists between home-related factors and social factors.

Ha1: There is no relationship that exists between home-related factors and social factors.

c) Student-centred factors and home- related factors

Ho3: A relationship exists between student-centred factors and home-related factors.

Ha3: There is no relationship that exists between student-centred factors and home-related factors.

d) School related factors and social factors

Ho4: A relationship exists between school-related factors and social factors.

Ha4: There is no relationship that exists between school-related factors and social factors.

e) Lecturers and other factors

Ho5: A relationship exists between lectures and other factors.

Ha5: There is no relationship that exists between lectures and other factors.

f) Practical factors and lectures

Ho6: A relationship exists between practical factors and lectures.

Ha6: There is no relationship that exists between practical factors and lectures.

3.7.1 Testing of hypothesis

The specific hypotheses of the study were tested to identify statistical significance as well as substantial variables that influenced the absenteeism of student nurses. Due to a large sample being analysed, both parametric and non-parametric data analysis were conducted to test the hypotheses of this study. Non-parametric data analysis was conducted due to a large abnormal distribution of the data for the variables (Polit & Beck, 2017:411). All hypotheses were tested, and the results are discussed in detail in Chapter 4.

3.8 SUMMARY

In this chapter, the researcher focused on explaining the appropriate research design that was selected to meet the research purpose, goal and objectives of the study. The research method and a description of the questionnaire that was used to collect data were presented. The data collection, data collection method, data analysis, research validity and reliability of the instrument were also discussed. The statistical analysis of the collected data, and the results are presented in Chapter 4.

CHAPTER 4: RESEARCH RESULTS AND DATA ANALYSIS

4.1 INTRODUCTION

In the previous chapter, the researcher discussed the research design and method used for the study, namely a descriptive and quantitative design. In this chapter, the researcher provides the research results and analysis based on the data collected using the structured and pre-coded questionnaire in order to meet the research questions and objectives of the study (see Appendix E). The questionnaire used in this study consisted of four sections. Section A: demographics, Section B: factors influencing absenteeism, Section C: measuring rate of absenteeism, and Section D: ways to reduce absenteeism, which was an open-ended question. There were 47 questions in total. The analysis presented in this chapter includes frequency tables, custom tables, exploratory factor analysis, reliability analysis and correlation analysis. IBM SPSS version 25.0 was used for analysing the research data.

4.2 THE SAMPLE

The response rate in a sample represents number of people who responded to the survey compared to number of people who were contacted (Weedmark, 2019:11). A total of 480 questionnaires were distributed to respondents on two nursing campuses at different levels of study. Of those, 311 questionnaires were returned, giving a total response rate of 64.7%. Of the 311 returned questionnaires, only 229 were found valid for analysis, giving a valid response rate of 73.63%. The response rate is the percentage of the total returned questionnaires ($311/480 \times 100 = 64.7\%$), while the valid rate is the percentage of valid questionnaires used in this study ($229/311 \times 100 = 73.63\%$). The other 82 questionnaires were not used due to either incompleteness or missing answers. The 229 questionnaires were captured and analysed. Table 4.1 outlines the response rate of the respondents according to different levels.

Table 4.1: Response rate of respondents

Respondent's level	Distributed	Returned	Valid	Response rate	Valid Response Rate
Level 1	120	65	45	54.1 %	69.2 %
Level 2	120	90	64	75.0 %	71.1 5
Level 3	120	76	68	63.3 %	89.4 %
Level 4	120	80	52	66.6 %	65.0 %
Total	480	311	229	64.7%	73.6%

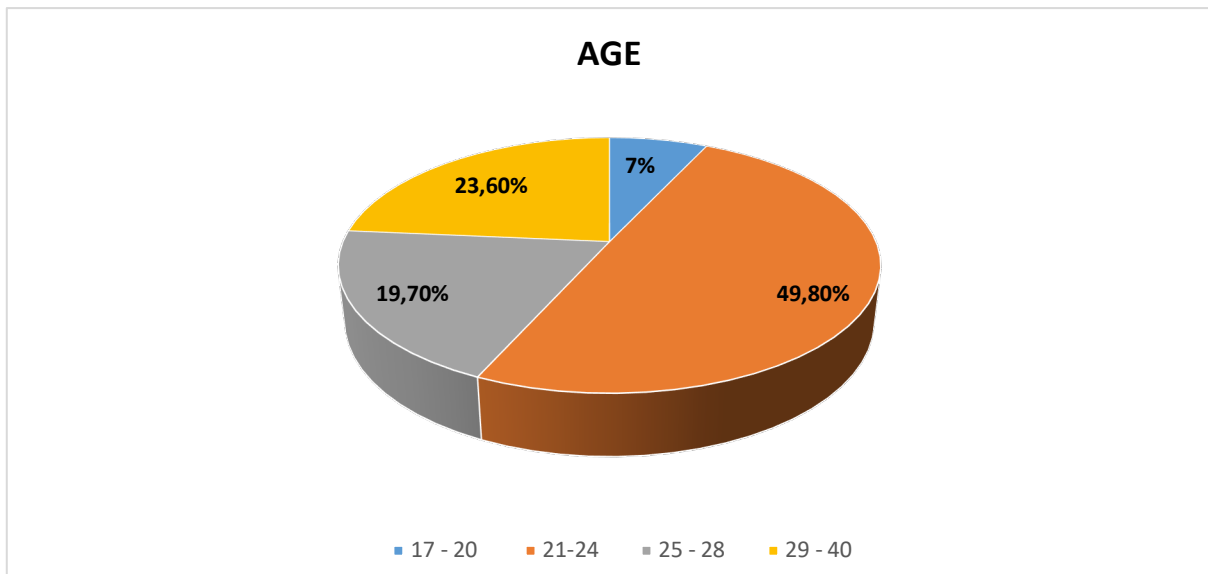
As shown in Table 4.1, the highest response rate was from level 2 (n=90, 75%), while level 1 had the lowest (n=65, 54.1%) response rate. The results from Table 4.1 further illustrate that level 3 had the highest valid response rate (n=68, 89.4%), while level 4 had the lowest (n=52, 65.0%). The response rate in this study was sufficient and accepted to eliminate any possible forms of a biased sample. The results show that a significant number of level 3 student nurses accurately completed the questionnaire in this study.

4.3 DESCRIPTIVE ANALYSIS OF DEMOGRAPHIC DATA

Descriptive analysis was used to gain a better understanding of the collected data (Runeson & Host, 2009:48). This section presents the statistical sample distribution with regard to demographic variables such as age, marital status, current level of study, distance from the campus, and method of transportation used.

4.3.1 Age

Pie chart 4.1 illustrates the age distribution of respondents. The results indicate that the respondents' ages in this study ranged from 17-40 years. The largest proportion of the respondents were in the age group between 21-24 years (n=114, 49.8%), while the smallest proportion of respondents were in the age group between 17-20 years (n=16, 7%). The statistics signify that different age groups were considered during the study.



Pie Chart 4.1: Age distribution of respondents

4.3.2 Marital status

As can be seen from the Table 4.2, the results obtained from the statistical analysis confirmed that the largest proportion of the respondents (n=196, 85.6%) were single, indicating that most student nurses who participated in this study were single (unmarried); respondents who were married formed only 12.7% (n=29). Respondents who were widows/widowers formed 1.3% (n=3), while the respondents who were divorced formed 0.4% (n=1). These study findings revealed that most student nurses were single.

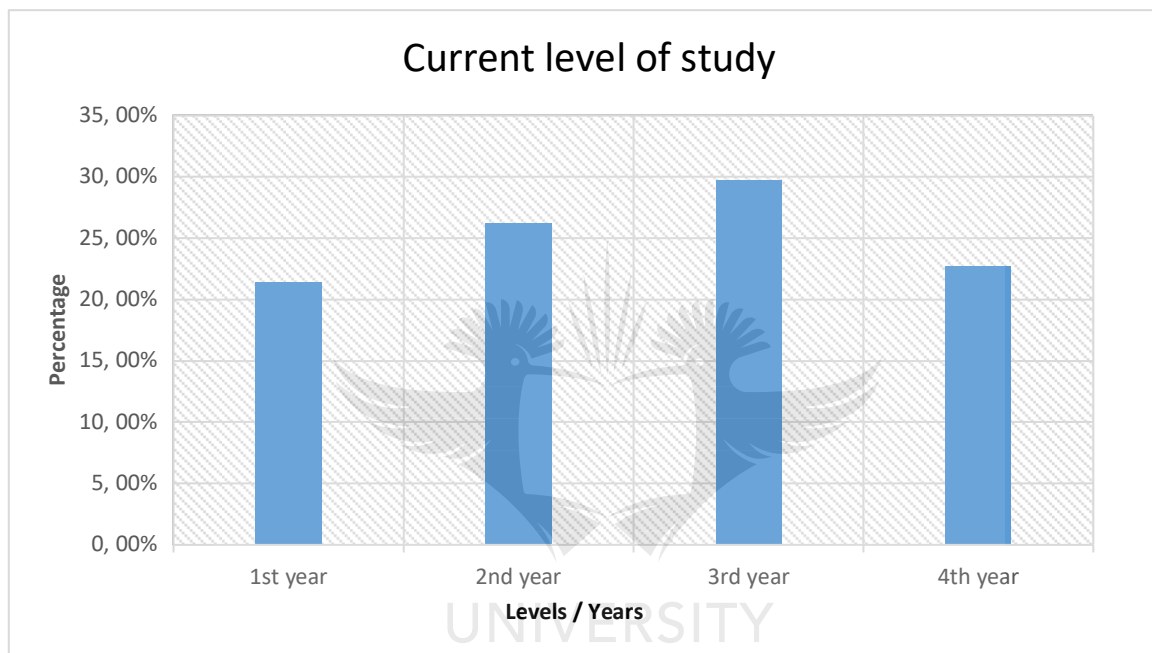
Table 4.2: Marital status of respondents

Marital status	Frequency	Percentage
Married	29	12.7%
Single/unmarried	196	85.6%
Divorced	1	0.4%
Widow/widower	3	1.3%
Total	229	100%

4.3.3 Current level of study

As seen from the data in Table 4.3, most respondents who participated in the study were in level 3 (n=68, 29.7%), while the smallest proportion was from the 1st years, forming only 21.4% (n=49). The second-largest proportion was from the 2nd years, forming 26.2% (n= 60), and the 4th years formed 22.7% (n=52).

Table 4.3: Current level of study of the respondents



4.3.4 Current distance from campus

From Table 4.4, it is clear that the majority of respondents travelled 0 – 5 kilometres (km) (n=114, 49.8%) to the campus. The least proportion of student nurses travelled 6 – 10 km (n=26, 11.4%) to the campus. This implies that a larger number of student nurses who participated in this study lived close to their nursing campuses or travelled a short distance from the campus to their home or residence.

Table 4.4: Current Distance from Campus

Distance from campus	Frequency	Percentage
0 – 5 km	114	49.8 %
6 – 10 km	26	11,4 %
11 – 15 km	33	14.4 %
15 km / more	56	24.5 %
Total	229	100%

4.3.5 Method of transport

Table 4.5 presents the results obtained from the analysis of the method of transport used by the respondents. A large proportion of respondents were without transport and had to walk (n=115, 50.2%). Respondents who used public transport formed 42.4% (n= 97), while student nurses who used their own transport (car or bicycles or even motorbike) constituted only 7.4% (n=17). These findings indicate that most student nurses do not have their own transport; they walked to the nursing college.

Table 4.5: Method of transport

Method of transport	Frequency	Percentage
Own car / bicycle /motorbike	17	7.4 %
Public	97	42.4 %
None – have to walk	115	50.2 %
Total	229	100%

4.4 RESPONSES TO QUESTIONS RELATED TO FACTORS INFLUENCING ABSENTEEISM

In this section, the researcher presented the descriptive statistics related to the items of the subscales of the FIAQ (see Appendix E). The reasons for student nurses' absenteeism were divided into the following subscales: student-centred factors, home-related factors, school-related factors, and social factors. The statistics related to variable factors influencing student nurses' absenteeism are described next.

4.4.1 Descriptive analysis statistics of subscale variables

Section B of the questionnaire comprised questions that required respondents to indicate factors that influence their absenteeism from class. The researcher presented descriptive statistics related to the items of the subscales of the questionnaire. The responses were measured on a 4-point Likert scale, rating from strongly disagree, disagree, agree and strongly agree. Table 4.6 to Table 4.9 present the frequency count and percentage responses for each item measuring student nurses' absenteeism.

4.4.1.1 Student-centred factors

Student-centred factors included ten items that respondents needed to answer, SC01 – SC10 (Fayombo, et al. 2012:125). Table 4.6 shows detailed descriptive statistics of these variable items.

Table 4.6: Student-centred factors

Student-centred factor Items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
SC01: Students' lack of interest in school subjects or courses.	Count	111	71	37	10	229
	Row N %	48.5%	31.0%	16.1%	4.4%	100.0%
SC02: Lack of personal interest in studies.	Count	98	78	41	12	229
	Row N %	42.8%	34.1%	17.9%	5.2%	100.0%
SC03: Inability of students to match the course or courses opted for.	Count	71	72	64	22	229
	Row N %	31.0%	31.4%	27.9%	9.7%	100.0%
SC04: Lack of selfconfidence amongst the students.	Count	71	79	53	26	229
	Row N %	31.0%	34.5%	23.1%	11.4%	100.0%
	Count	69	90	60	10	229

Student-centred factor Items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
SC05: I don't understand the subject/s.	Row N %	30.1%	39.3%	26.2%	4.4%	100.0%
SC06: When I want to prepare for the test.	Count	35	38	78	78	229
	Row N %	15.2%	16.6%	34.1%	34.1%	100.0%
SC07: Inferiority complex amongst the students.	Count	69	91	53	16	229
	Row N %	30.1%	39.7%	23.1%	7.1%	100.0%
SC08: Length of periods.	Count	32	50	74	73	229
	Row N %	14.0%	21.8%	32.3%	31.9%	100.0%
SC09: Too much socialisation amongst students.	Count	84	81	48	16	229
	Row N %	36.7%	35.3%	21.0%	7.0%	100.0%
SC10: When I am preparing for examinations.	Count	25	34	64	106	229
	Row N %	10.9%	14.8%	27.9%	46.3%	100.0%

Table 4.6 provides summary statistics of student-centred factors. The results from n=111 (48.5%) respondents indicated that they strongly disagreed that students' lack of interest in school subjects or courses caused absenteeism; only a small proportion (n=10, 4.4%) strongly agreed on this item. Most respondents (n=78, 34.1%) agreed and strongly agreed in equal numbers that they become absent from class when they want to prepare for a test, while only n=38 (16.6%) disagreed, and n=35 (15.2%) strongly disagreed. Evidence gleaned from the analysis suggests that most respondents (n=74, 32.3%) agreed and n=73 (31.9%) strongly agreed that lengthy classes influence absenteeism. Finally, a majority of respondents (n=170, 74.2%) agreed and strongly agreed that they became absent when they were preparing to write exams.

4.4.1.2 Home-related factors

Home-related factors included seven items, from HR01 – HR07 (Fayombo, et al. 2012:125). Table 4.7 presents detailed descriptive statistics of variable items.

Table 4.7: Home-related factors

Home-related factor Items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
HR01: Over- expectation by parents.	Count	58	86	63	22	229
	Row N %	25.3%	37.6%	27.5%	9.6%	100.0%
HR02: Lack of parental support.	Count	57	77	65	30	229
	Row N %	24.9%	33.6%	28.4%	13.1%	100.0%
HR03: Lack of parental care and involvement in their children's academic activities.	Count	43	83	71	32	229
	Row N %	18.8%	36.2%	31.0%	14.0%	100.0%
HR04: Death of a family member.	Count	14	21	73	121	229
	Row N %	6.1%	9.2%	31.9%	52.8%	100.0%
HR05: Poor family relationships.	Count	50	73	78	28	229
	Row N %	21.8%	31.9%	34.1%	12.2%	100.0%
HR06: My home is too far from the campus.	Count	64	79	49	37	229
	Row N %	27.9%	34.5%	21.4%	16.2%	100.0%
HR07: Family commitments.	Count	29	35	94	71	229
	Row N %	12.7%	15.3%	41.0%	31.0%	100.0%

It is evident from the analysis presented in Table 4.7 that only 2 out of 7 observed variables had more positive responses, thus the findings confirmed that a large number of respondents (n=73, 31.9%) agreed and n=121 (52.8%) strongly agreed that they absented themselves from class when a family member had died. Research results further indicated that more respondents (n=94, 41%) agreed and n=71 (31%) strongly agreed that they became absent when they have family commitments. It was,

however, surprising that a lot of respondents (n=143, 62.4%) disagreed and strongly disagreed that when their home is too far from the nursing school, they are likely to be absent from class.

4.4.1.3 School-related factors

School-related factors included 11 items which respondents were required to answer, from SR01 – SR11 (Fayombo, et al. 2012:125). Table 4.8 offers detailed descriptive statistics of variable items.

Table 4.8: School-related factors

School-related factor Items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
SR01: Poor lecturer student relationship.	Count	29	65	84	51	229
	Row N %	12.7%	28.4%	36.7%	22.2%	100.0%
SR02: Poor teaching skills of lecturers leading to boring lectures.	Count	23	87	76	42	228
	Row N %	10.1%	38.2%	33.3%	18.4%	100.0%
SR03: Negative peer influence on lectured.	Count	43	97	68	21	229
	Row N %	18.8%	42.4%	29.7%	9.1%	100.0%
SR04: Lecturers not turning up for scheduled lectures.	Count	113	84	23	8	228
	Row N %	49.6%	36.8%	10.1%	3.5%	100.0%
SR05: Excessive homework and project work for students.	Count	33	57	74	65	229
	Row N %	14.4%	24.9%	32.3%	28.4%	100.0%
SR06: Lack of recreational and allied activities like sports programs.	Count	45	72	54	58	229
	Row N %	19.7%	31.4%	23.6%	25.3%	100.0%

School-related factor Items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
SR07: Lack of fresher's or farewell parties.	Count	89	87	23	29	228
	Row N %	39.0%	38.2%	10.1%	12.7%	100.0%
SR08: Inadequate orientation about hours of training.	Count	59	98	44	28	229
	Row N %	25.8%	42.8%	19.2%	12.2%	100.0%
SR09: Classroom environment not conducive for learning.	Count	39	68	65	57	229
	Row N %	17.0%	29.7%	28.4%	24.9%	100.0%
SR10: Poor infrastructural facilities in school e.g. inadequate space in the library, lack of necessary equipment.	Count	32	70	64	63	229
	Row N %	14.0%	30.6%	27.9%	27.5%	100.0%
SR11: Inclement weather such as when it is cold or hot.	Count	41	80	69	39	229
	Row N %	17.9%	34.9%	30.1%	17.1%	100.0%

It is apparent from Table 4.8 that the largest proportion of the respondents (n=84, 36.7%) agreed and n=51 (23.1%) strongly agreed that a poor lecturer-student relationship was a reason for the student nurses' absenteeism. The statistics showed that n=113 (49.65%) respondents strongly disagreed and n=84 (36.8%) disagreed that lecturers not turning up for scheduled lectures influence student nurses to be absent from class. Research results further illustrated that n=74 (32.3%) respondents agreed and n=65 (28.4%) strongly agreed that they were absent due to excessive homework and project work. A significant proportion of respondents (n=89, 39%) strongly disagreed and n=87 (98%) disagreed that lack of refresher or farewell parties influenced absenteeism. Table 4.8 shows that n=59 (25.8%) respondents strongly disagreed and n=98 (42.8%) disagreed that inadequate orientation on their hours of training is a factor that causes absenteeism.

4.4.1.4 Social factors

The last part of Section B in the questionnaire asked respondents to answer questions related to social factors affecting absenteeism. The social factors consisted of 8 items, from SF01 – SF08 (Fayombo, et al. 2012:125). Table 4.9 shows detailed descriptive statistics of variable items.

Table 4.9: Social factors

Social factor items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
SF01: Unavailability of opportunities for entertainment like malls or movies around the campus.	Count	90	94	28	17	229
	Row N %	39.3%	41.0%	12.2%	7.5%	100.0%
SF02: Low social value for education.	Count	65	94	62	8	229
	Row N %	28.4%	41.0%	27.1%	3.5%	100.0%
SF03: More regard for wealthy persons than educated persons.	Count	70	105	39	15	229
	Row N %	30.6%	45.9%	17.0%	6.5%	100.0%
SF04: Beliefs that much education is not required for success and business.	Count	86	91	35	17	229
	Row N %	37.6%	39.7%	15.3%	7.4%	100.0%
SF05: Political activities such as rallies.	Count	72	86	52	19	229
	Row N %	31.4%	37.6%	22.7%	8.3%	100.0%
SF06: Transportation problems.	Count	26	28	96	79	229
	Row N %	11.4%	12.2%	41.9%	34.5%	100.0%

Social factor items		Strongly Disagree	Disagree	Agree	Strongly Agree	Total
SF07: When I want to attend community activities.	Count	89	100	31	9	229
	Row N %	38.9%	43.7%	13.5%	3.9%	100.0%
SF08: When I am afraid of bullying students.	Count	103	72	29	25	229
	Row N %	45.0%	31.4%	12.7%	10.9%	100.0%

It is evident from the statistical analysis in Table 4.9 that only 1 out of 8 item variables that were analysed had a positive response; a large proportion of respondents (n=96, 41.9%) agreed, and n=79 (34.5%) strongly agreed that transportation problems influenced absenteeism amongst student nurses. Respondents had negative opinions on all other items; they disagreed and strongly disagreed that these items influenced absenteeism.

4.5 RESPONSES RELATED TO ABSENTEEISM DURING LECTURES AND PRACTICALS

In this section, the researcher presented the descriptive statistics of lectures and practical areas as variables that influence absenteeism amongst student nurses (see Appendix E). The items under these variables will now be discussed.

4.5.1 Absenteeism on lectures and practical

Section C of the questionnaire asked respondents to indicate the percentages as to how often they have been absent from class or the practical (see Appendix E). Table 4.10 summarises respondents' answers regarding the attendance of lectures, while Table 4.11 shows their responses regarding the attendance of practical areas.

Table 4.10: Absenteeism from lectures

Lectures		None of them	Less than 25%	26%-50%	51% - 75%	76% - 99%	All of them	Total
L01 How many lectures were you expected to attend in the past month?	Count	0	0	0	0	0	229	229
	Row N %	0.0%	0.0%	0.0%	0.0%	0.0%	100.0%	100.0%
L02 How many lectures did you attend in the past month?	Count	0	0	5	8	50	166	229
	Row N %	0.0%	0.0%	2.2%	3.5%	21.8%	72.5%	100.0%
L03 (How many lectures have you missed this past semester?)	Count	166	50	8	5	0	0	229
	Row N %	72.5%	21.8%	3.5%	2.2%	0.0%	0.0%	100.0%

With regard to item code: L01 (How many lectures were you expected to attend in the past month?), n=229 (100%) respondents indicated that they were supposed to attend all the lectures in the past month as per their issued timetable. For item code: L02 (How many lectures did you attend in the past month?), the largest number of respondents (n=166, 72.5%) indicated that they attended all the lectures, while n=50 (21.8%) indicated that they attended 76 - 99% of lectures. With item code: L03 (How many lectures have you missed this past semester?), the largest number of respondents (n=166, 72.5%) revealed that they did not miss any lecture in the past semester, while n=50 (21.8%) indicated that they missed fewer than 25% of lectures. According to Table 4.10, student nurses had a low absenteeism rate in class.

Table 4.11: Absenteeism from practical areas

Practical		None of them	Less than 25%	26% - 50%	51% 75%	76% 99%	All of them	Total
P01 How many practical were you expected to attend in the past month?	Count	0	0	0	0	1	228	229
	Row N %	0.0%	0.0%	0.0%	0.0%	0.4%	99.6%	100.0%
P02 How many practical did you attend in the past month?	Count	0	0	4	6	41	178	229
	Row N %	0.0%	0.0%	1.7%	2.6%	17.9%	77.7%	100.0%
P03 How many practical have you missed this past semester?	Count	177	42	6	4	0	0	229
	Row N %	77.3%	18.3%	2.6%	1.7%	0.0%	0.0%	100.0%

The findings from item code P01: (How many practical were you expected to attend in the past month?) revealed that n=228 (99.6%) respondents were supposed to attend the entire practical period in the past month as per their block allocation programme, and only n=1 (0.4%) of student nurses indicated that they were supposed to have attended 76-99%. Item code P02: (How many practical did you attend in the past month?) showed the largest number of respondents (n=178, 77.7%) indicated that they attended all the practical periods, while n=41 (17.9%) indicated that they attended 76-99% of practical periods. For item code P03: (How many practical have you missed this past semester?), the largest number of respondents (n=177, 77.3%) indicated that they did not miss any practical periods in the past semester, while n=42

(18.3%) indicated that they missed fewer than 25% of practical periods. According to Table 4.11, student nurses had low absenteeism rates in the practical setting.

4.6 RESPONSES TO WAYS OR METHODS TO REDUCE STUDENT NURSES' ABSENTEEISM

Section D1 of the questionnaire required respondents to suggest ways or strategies that could be implemented to reduce absenteeism (Appendix E). Respondents were asked to indicate the type of programme they would like to see on the campus. Based on the results from this study, the suggested ways and strategies formed part of the recommendations, and are thus presented in Chapter 5.

4.7 RESPONSES ON PROGRAMMES THAT ARE ALREADY IN EXISTENCE AT THE NURSING COLLEGE

Section D2 of the questionnaire required respondents to mention programmes that were already in existence in their nursing college (Appendix E). A discussion of the results regarding the programmes that were already in existence follows.

4.7.1 Extra classes

The statistical results of the study revealed that respondents (n=20) agreed that extra classes were already in existence at the nursing campus. This programme is referred to as 'make up time' or 'extra tutorials'. Respondents indicated that these classes sometimes took place on Saturdays.

4.7.2 Counselling programme

Respondents (n=30) indicated that there was a counselling programme at the nursing campus. The student counselling department offered the programme.

4.7.3 Consultation programme

Research results showed that the nursing campuses where the research was conducted had some form of consultation programme in place. This response came from n=4 respondents. There were procedures in place that student nurses should follow when consulting, like making an appointment to see the lecturer.

4.7.4 Disciplinary procedure

Respondents (n=4) indicated that corrective measures were implemented when a student transgressed a certain rule or violated policy.

4.7.5 Programmes for library visits

According to the results, n=4 respondents mentioned that they were sometimes given time to go to the library to search for information related to a particular subject, or to study and complete their assignments.

4.7.6 Peer group teaching

Some respondents indicated that there was peer group tutoring that took place in the nursing college (n=9).

4.7.7 No response or no programme

Results showed that there were some respondents (n=47) who were neutral in answering this question; their response was “None I can’t think of”. Other respondents (n=23) mentioned that the nursing college had no existing programme at all.

4.8 FACTOR ANALYSIS

Factor analysis focuses on examining the inter-relationships amongst large numbers of variables and disentangles those relationships to identify the cluster of variables

that are closely linked to each other (Grove, et al. 2017:484). The researcher discusses the factor analysis in the next section of the study.

4.8.1 Exploratory factor analysis

Exploratory factor analysis (EFA) is commonly used by researchers when developing a scale (a *scale* is a collection of questions used to measure a particular research topic) and it serves to identify a set of latent constructs and a battery of measured variables (Grove, et al. 2017:484). According to Polit and Beck (2017:363), EFA deals with the hypothesis that was formulated about the dimensionality of a set of items. The Kaizer-Meyer-Olkin (KMO) values that are between 0.5 - 0.7 are seen as mediocre, between 0.7 and 0.8 are considered good, and values between 0.7 and >0.9 are considered superb (Field, 2009:659).

4.8.1.1 Analysis of sample

As shown in Table 4.12, the results of the factor analysis pertaining to the sample were adequate and accepted since it is above 0.7.

Table 4.12: Sampling exploratory factor analysis

KMO and Bartlett's Test		
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.717
Bartlett's Test of Sphericity	Approx. Chi-Square	1637.6
	Df	41
	Sig.	210
		.000

4.8.1.2 Analysis of commonalities

It can be noticed in Table 4.13 that some variables were grouped together; this means that respondents see these two variables as similar and in commonality. In other

words, it referred to the amount of information that a given variable shares with other factors that are greater than 0.50 each.

Table 4.13: Commonalities

Commonalities		
	Initial	Extraction
SC03	1.000	.593
SC04	1.000	.662
SC05	1.000	.530
SC07	1.000	.536
HR01	1.000	.478
HR02	1.000	.746
HR03	1.000	.701
HR05	1.000	.632
SR02	1.000	.351
SR09	1.000	.730
SR10	1.000	.777
SR11	1.000	.426
SF02	1.000	.585
SF03	1.000	.716
SF04	1.000	.683
SF05	1.000	.420
SF08	1.000	.333
L01	1.000	.860
L02	1.000	.803
P01	1.000	.769
P02	1.000	.837
Extraction Method: Principal Component Analysis		

4.8.1.3 Variance analysis

Factor analysis was conducted using the Varimax method with Kaiser normalisation on 21 statements. As shown in Table 4.14, 6 items were selected from the analysis,

namely SC03 (Inability of students to match the course or courses opted for), SC04 (Lack of self-confidence amongst the students), SC05 (I don't understand the subject/s), SC07 (Inferiority complex amongst the students), HR01 (Over-expectation by parents), and HR02 (Lack of parental support). These factors achieved 62.7% of the total variance, as seen in Table 4.14, and this is considered normal.

Table 4.14: Total variance explained

Component	Initial Eigenvalues			Extraction Sums of Squared Loadings			Rotation Sums of Squared Loadings		
	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %	Total	% of Variance	Cumulative %
1	4.757	22.652	22.652	4.757	22.652	22.652	2.714	12.926	12.926
2	2.401	11.435	34.087	2.401	11.435	34.087	2.541	12.098	25.024
3	2.002	9.532	43.619	2.002	9.532	43.619	2.341	11.146	36.171
4	1.752	8.344	51.963	1.752	8.344	51.963	2.189	10.425	46.596
5	1.228	5.849	57.812	1.228	5.849	57.812	1.700	8.093	54.689
6	1.028	4.895	62.707	1.028	4.895	62.707	1.684	8.019	62.707
7	.878	4.182	66.889						
8	.841	4.005	70.895						
9	.803	3.823	74.718						
10	.746	3.553	78.271						
11	.656	3.125	81.396						
12	.616	2.934	84.329						
13	.529	2.521	86.850						
14	.510	2.431	89.281						
15	.466	2.218	91.498						
16	.408	1.944	93.442						
17	.387	1.844	95.286						
18	.340	1.619	96.905						
19	.274	1.303	98.208						
20	.226	1.077	99.285						
21	.150	.715	100.000						
Extraction Method: Principal Component Analysis.									

4.9 RELIABILITY ANALYSIS

The reliability coefficients (Cronbach's alpha coefficient) of the variables were analysed and computed to determine the internal consistency of each subscale (Grove, et al. 2017:392). All variable items with a reliable coefficient above .7 were considered and accepted for this study (Grove, et al. 2017:392). All variable subscales excluding the demographic variables were tested for consistency reliability by using Cronbach's alpha (α), which indicated that the questionnaire's variables were correlated and address the research problems.

When an instrument is internally consistent or has the same features or items, it indicates the extent to which it measures the same traits (Polit & Beck, 2017:333). According to Polit and Beck (2017:724), the Cronbach's alpha coefficient remains the most commonly used measure of reliability. The Cronbach's alpha coefficients for the subscales of the FIAQ are presented in Table 4.15, of which these items were satisfactory in terms reliability; only 2 items were below 0.7 but with only a small margin. The entire mean-inter correlations above 0.2 were considered to be acceptable (Pallant, 2010:95).

Table 4.15: Reliability analysis of FIAQ

No	Construct Variable	Cronbach's alpha (α) coefficient	Mean inter-item correlation	Number of Items measured
1	Student-centred factor	0.766	0.251	10
2	Home-related factor	0.768	0.322	7
3	School-related factor	0.788	0.251	11
4	Social factor	0.749	0.276	8
5	Lecture	0.807	0.678	2
6	Practical	0.778	0.645	2

4.9.1 Student-centred factors

The student-centred factors consisted of 10 variables that were analysed. The results were acceptable. As illustrated in Table 4.15, Cronbach's alpha = 0.766 and Cronbach's alpha based on standardised items measured at 0.770. The item total statistics ranged between 07.27 (SC03 = Inability of students to match the course or courses opted for) to 0.767 (SC09 = Too much socialization amongst students). The results were considered normal.

4.9.2 Home-related factors

The home-related factors consisted of 7 items that were analysed. The results obtained were acceptable. Table 4.15 summarised Cronbach's alpha = 0.768 analysis and Cronbach's alpha based on standardised items at 0.69. The analysis of the total item ranges was between 0.721 (HR02 = Lack of parental support) to 0.767 (HR06 = my home is too far from the campus). The mean-inter correlation was .322 and was considered normal.

4.9.3 School-related factors

The results presented in Table 4.15 were accepted. School-related factors consisted of 11 items that were analysed. Cronbach's alpha was 0.788, while analysis based on standardised items was 0.786. Total item analysis ranged between 0.758 (SR09 = Classroom environment not conducive for learning) to 0.786 (SR04 = Lecturers not turning up for scheduled lectures).

4.9.4 Social factors

As shown in Table 4.15, the results on social factors were accepted and consisted of 8 items. Cronbach's alpha was 0.749, while Cronbach's alpha based on standardised items was 0.753. The lowest measured items were SF02 (at 0.699) and SF03 (at 0.694), respectively.

4.9.5 Summary of reliability testing

- The reliability of the total subscale of FIAQ (Appendix E) was satisfactory and accepted.
- All items for the subscale were included for analysis.
- The lowest measured Cronbach's alpha efficiency was on items under the social factor, namely SF02 at 0.699 and SF03 at 0.694, respectively. These items were not excluded nor deleted because they were not too low.
- Based on the reliability testing, it was concluded that the FIAQ subscale was reliable and consistent.

4.10 CORRELATIONAL ANALYSIS

The second objective of this study was to determine and examine the relationship that existed between student-centred factors, home-related factors, school-related factors and social factors that influenced student nurses' absenteeism (Polit & Beck, 2017:724). The correlation coefficient (cc) refers to a measure of the degree of the relationship between two sets of scores that can range between -1.00 to +1.00. The value of -1.00 represents a perfect negative correlation, while a value of +1.00 represents a perfect positive correlation. A value of 0.00 represents a lack of correlation (Jackson, 2009:417). The linear correlation presents Pearson's correlation (r) between variables used in the questionnaire, using 5% significance to support the questionnaire. A Pearson's correlation was conducted to investigate and determine the direction and magnitude of the relationship of main variables, and to test the hypothesis (Grove, et al. 2017:561).

Different authors have suggested different methods with regard to interpreting values between 0 and 1. Cohen (1988:79-81) suggests the following guidelines: small (weak) $r = 0.10$ to 0.29 , medium (moderate) $r = 0.30$ to 0.49 and large (strong) $r = 0.50$ to 1.0 .

Table 4.16 provides a summary of the relationships between the factors of the study.

Table 4.16: Pearson's Correlation of Relationship between Variables

Correlations							
Variable Construct	Pearson Correlation	SF	HR	SC	SR	LO	PO
Social Factors	Pearson Correlation	1					
	Sig. (2-tailed)						
	N	229					
Home-related factors	Pearson Correlation	.376**	1				
	Sig. (2-tailed)	.000					
	N	229	229				
Student-centred factors	Pearson Correlation	.383**	.464**	1			
	Sig. (2-tailed)	.000	.000				
	N	229	229	229			
School-related factors	Pearson Correlation	.224**	.151*	.287**	1		
	Sig. (2-tailed)	.001	.022	.000			
	N	229	229	229	229		
Lectures	Pearson Correlation	-.049	.030	-.089	-.045	1	
	Sig. (2-tailed)	.460	.648	.177	.498		
	N	229	229	229	229	229	
Practical	Pearson Correlation	.022	.033	-.025	-.102	.461**	1
	Sig. (2-tailed)	.741	.625	.702	.123	.000	
	N	229	229	229	229	229	229
**. Correlation is significant at the 0.01 level (2-tailed).							
*. Correlation is significant at the 0.05 level (2-tailed).							

4.10.1 Interpretation

The Pearson's rank correlation coefficient (cc) between variables was used to test direction, magnitude and the relationship. The correlational relationship that exists between these variable constructs will now be discussed.

4.10.1.1 Home-related factors

As seen from the correlation Table 4.16, there was a statistically significant (p-value =0.00) relationship with a moderate positive correlation ($r= 0.376^{**}$) between homerelated factors and social factors, indicating that these factors are related to each other.

4.10.1.2 Student-centred factors

The results also showed a statistical significance with p-value = 0.00 and moderate positive correlation ($r= 0.383^{**}$) between student-centred factors and social factors. When student-centred factors were correlated with home-related factors, there was a statistically significant (p =0.00) and moderate positive correlation ($r=0.464^{**}$).

4.10.1.3 School-related factors

The results of the test between school-related factors and social factors demonstrated a weak positive correlation ($r=.224^{**}$) with a p-value= 0.001, indicating that student nurses who experienced school-related challenges, may have also been absent from class due to social factors. Furthermore, school-related factor and home-related factor results indicated a weak positively correlated ($r= 0.151^{*}$); the p-value was at p= 0.022. Another statistical significance with a p-value of 0.00 and a weak positive Pearson's rank correlation of 0.287^{**} was identified between the school-related factors and student-centred factors.

4.10.1.4 Lectures

No statistical significance was found when lecture absenteeism rate was correlated with other factors. Pearson's correlation showed a negative correlation between lectures and social factors, student-centred factors and school-related factors.

4.10.1.5 Practicals

Table 4.16 illustrates that there was a moderate positive correlation ($r= 0.461^{**}$) between practicals and lectures. There was a statistical significance (sig 2-tailed $p=000$), which might imply that student nurses who became absent during practicals were most likely to be absent during lectures.

Summary of reliability results

In short, the correlation analysis results indicated that five out of six construct variables that were analysed had a statistically significant relationship to each other. Most of these variables had a moderate positive correlation to other factors.

4.11 HYPOTHESES TESTING

In order for the researcher to meet the second objective of this study, the following hypotheses had to be tested. The objective was:

- a) To determine the correlational relationship that exists between various factors influencing student nurses' absenteeism, namely student-centred factors, home-related factors, school-related factors, social factors, lectures and practicals.
- b) To determine the correlational relationship that exists between various factors influencing student nurses' absenteeism, namely student-centred factors, home-related factors, school-related factors and social factors, lectures and practical settings.

Tests were conducted to test the following hypotheses:

Ho1: A relationship exists between home-related factors and social factors.

Ha1: There is no relationship that exists between home-related factors and social factors.

Ho2: A relationship exists between student-centred factors and social factors.

Ha2: There is no relationship that exists between student-centred factors and social factors.

Ho3: A relationship exists between student-centred factors and home-related factors.

Ha3: There is no relationship that exists between student-centred factors and home-related factors.

Ho4: A relationship exists between school-related factors and social factors.

Ha4: There is no relationship that exists between school-related factors and social factors.

Ho5: A relationship exists between lectures and other factors.

Ha5: There is no relationship that exists between lectures and other factors.

Ho6: A relationship exists between practical factors and lectures.

Ha6: There is no relationship that exists between practical factors and lectures.

A p-value of 0.05 or less was considered a significant difference on the 5% level significance in this study. The effect size was interpreted according to Cohen's criteria as follows: 0.1=small effect, 0.3=medium effect, and 0.5=large effect (Cohen, in Pallant, 2010:422). The effect size estimated how wrong the null hypothesis is; that is, how strong the relationship between the independent variables and the dependent variables is in a population (Polit & Beck, 2017:422). Table 4.17 is a summary of the results of the tested hypotheses.

Table 4.17: Hypotheses results

HYPOTHESES		RESULTS
Ho1	There is a moderate positive correlational relationship that exist between home-related factors and social factors.	Supported (p value =0.00) (r= 0.376**)
Ho2	There is a moderate positive correlational relationship that exist between student-centred factors and social factors.	Supported (p value =0.00) (r= 0.383**)
Ho3	There is a moderate correlational relationship that exists between student-centred factors and home-related factors.	Supported (p value =0.00) (r= 0.464**)
Ho4	There is a weak positive correlational relationship that exist between school-related factors and social factors, demonstrated a weak positive correlation (r=.224**) with a p-value= 0.001	Supported (p value =0.001) (r= 0.224**)
Ho4.1	There is a weak positive correlational relationship that exist between school-related factors and home-related factors.	Supported (p value =0.022) (r= 0.151*)
Ho4.1	There is a weak positive correlational relationship that exists between school-related factors and student-centred factors.	Supported (p value =0.00) (r= 0.287**)
Ha5	There is no relationship that exists between lectures and other factors.	Rejected
Ho6	There is a moderate positive correlational relationship that exists between practicals and lectures.	Supported (p value =0.00) (r= 0.461**)

4.12 CONCLUSION

In Chapter 4, the researcher presented the results of the study. The results from the FIAQ were analysed and described. The results revealed both positive and negative responses on factors influencing absenteeism amongst student nurses at a public nursing college in Gauteng Province. In some instances, student nurses agreed or disagreed that certain variables influence their class attendance. The FIAQ was reliable and consistent to measure absenteeism. The Pearson's rank correlation coefficient (cc) analysis between variable constructs indicated more positive relationships existed between these factors. In Chapter 5, the researcher presents a discussion of the results, limitations, recommendations, a summary and final conclusion of the study.



CHAPTER 5: DISCUSSIONS, LIMITATIONS, RECOMMENDATIONS AND CONCLUSION

5.1 INTRODUCTION

In Chapter 4, the results of the statistical analysis of the data were presented. In this chapter, the researcher discusses the implications of the results and draws conclusions from the main findings which were presented in Chapter 4. The limitations encountered during the study are reviewed, followed by specific and general recommendations. The chapter concludes with the conclusion and summary.

5.2 EVALUATION OF THE STUDY

In this section, the researcher evaluates the study with regard to its objectives. The following objectives were set:

- To investigate and describe factors influencing absenteeism amongst nursing students in a public nursing college in Gauteng Province.
- To determine the relationship that exists between student-centred factors, home-related factors, school-related factors and social factors that influence absenteeism amongst student nurses.
- To make recommendations to manage student nurses' absenteeism in a public nursing college in Gauteng Province.

Chapter 1 of this study focused on the orientation and overview, background and rationale of the study. In Chapter 2, a conceptual framework was described to understand the literature that supported the study. Chapter 3 consisted of the research design and method, and in Chapter 4 the statistical data analysis of the FIAQ (Fayombo, et al. 2012) was presented in various custom tables. The findings are discussed in relation to the research objectives, the theoretical framework used, as well as other studies on absenteeism.

5.3 DISCUSSION OF THE FINDINGS RELATED TO THE FACTORS INFLUENCING STUDENT NURSES ABSENTEEISM

The problem of student nurses' absenteeism from lectures is becoming the concern of every member of society because of its grievous consequences on the individual, in particular, and the society in general. This study investigated and described the student-centred factors, home-related factors, school-related factors and social factors as variables that influence absenteeism amongst student nurses at a public nursing college in Gauteng Province.

5.3.1 Demographic data

The results indicate that the respondents' ages in this study ranged from 17 to 40 years. The largest proportion of the respondents were in the age group of between 21-24 years. The statistics signify that different age groups were considered during the study. These findings were similar to Baloyi's (2014:9-68) study on absenteeism.

According to the SANC's age analyses, the age of student nurses enrolled for the R425 programme ranges from 17-53 years (SANC, 2014). The age group of student nurses is generally considered as it could signify maturity, responsibility, and accountability (Thobakgale, et al. 2013:70).

Research results showed that most student nurses who participated in this study were single (unmarried); very few respondents were married. Thus, there was a noticeable difference between married and unmarried respondents. Findings demonstrated that most respondents who participated in the study were in level 3, and Simelane (2013:144) found the same results. Findings further revealed that the majority of respondents travelled 0 – 5 km to the college. It was discovered that a large proportion of respondents were without transport, having to walk to attend classes (n=115, 50.2%). Research findings from a study conducted by Bati, et al. (2013:598) confirmed similar results.

5.3.2 Factors influencing absenteeism

With regard to objective number one of the study, which was to investigate and describe factors influencing absenteeism amongst student nurses, results indicated that student nurses absent themselves from class due to student-centred factors, home-related factors, school-related factors and social factors (See Tables 4.6 – 4.9). In the sections that follow, only significant factors will be discussed.

5.3.2.1 Student-centred factors

Table 4.6 indicated that student nurses absented themselves from class when they wanted to prepare for tests and examinations. These results were consistent with the findings of studies conducted by Shahzada, Ghazi, Nawaz and Khan (2011:296), and Kumar and Rao (2013:512). Evidence gleaned from the statistical analysis suggested that most student nurses became absent from class due to lengthy classes. These results were supported by the findings of the study that was conducted by Baloyi (2014:71). These results were further supported by the findings of the study by Williard-Grace (2014:23) that found student nurses and other healthcare workers absent themselves due to excessive workload, poor leadership, lack of support and lack of opportunity for skills development.

5.3.2.2 Home-related factors

It was quite evident from the analysis presented in Table 4.7, that student nurses were absent from class when there was a death in their family. Balfanz and Byrnes (2012:4), Cooperkline (2009:34) and Baloyi (2014:73) obtained similar results. Research results further indicated that student nurses became absent when they had family commitments.

5.3.2.3 School-related factors

Table 4.8 confirmed that poor lecturer-student relationships were a reason for the student nurses' absenteeism. It was further found that when student nurses were

given excessive homework and projects, they would be absent from class. A study conducted by Fayombo, et al. (2012:127) had similar results. Another variable item that was found to have an influence on student nurses' absenteeism was poor infrastructure, such as inadequate space in the library and a lack of equipment. Research by Gupta and Lata (2014:14) and Bati, et al. (2012:596) revealed the same findings. According to Table 4.8, some student nurses (n=118) agreed that they become absent if the lecturer has boring teaching skills (Chaudhry & Iqbal, 2019:45). In a study conducted on medical students, the results indicated that some students would be absent from class due to improper and boring teaching methods (Chaudhry & Iqbal, 2019:45).

5.3.2.4 Social factors

It was quite evident that the findings presented in Table 4.9 showed that transportation problems influenced absenteeism amongst student nurses. The results of Maluleke, et al. (2014:401) support these findings.

Hypotheses results

With regard to objective 2 and research question 2 which states

Second research question

Is there a relationship or correlation between absenteeism and student-centred factors, home-related factors, school-related factors, and social factors?

Second research objective

To determine the relationship between student-centred, home-related, school related and social factors that influence absenteeism amongst student nurses.

Ho1: There is a moderate positive correlational relationship that exist between home-related factors and social factors, the p value was supported in this case.

Ho2: There is a moderate positive correlational relationship that exist between student-centred factors and social factors, p value was also supported.

Ho3: There is a weak positive correlational relationship that exist between school-related factors and social factors, demonstrated a weak positive correlation ($r=.224^{**}$) with a p-value= 0.001 – supported.

Ho4: There is a weak positive correlational relationship that exist between school-related factors and social factors, demonstrated a weak positive correlation ($r=.224^{**}$) with a p-value= 0.001, supported.

Ho4.1: There is a weak positive correlational relationship that exist between school-related factors and home-related factors, supported.

Ho4.1: There is a weak positive correlational relationship that exists between school-related factors and student-centred factors.

Ha5: There is no relationship that exists between lectures and other factors, p value rejected.

Ho6: There is a moderate positive correlational relationship that exists between practicals and lectures, p value supported.

From the information above it is evident that all the variable factors had a correlational relationship to each other p value being supported. Its only lectures as a factor that was rejected when tested against other factors.

5.4 LIMITATIONS

This study demonstrated some limitations.

- One of the lessons learnt in this study was that there was extensive consultation and reading that needed to be done to complete the research study.
- The focus was on student nurses registered for a four-year diploma programme, and the bridging students were excluded.

- Furthermore, the student nurses who were not part of the block during the time when data were collected were not included. The campuses had a staggered block system during the time of data collection.
- A convenient sample was used in collecting data on two campuses from level 1 to 4 student nurses. This restricted direct transferability of the findings to other nursing colleges and other provinces.
- The questionnaire's Likert rating scale started with negatives (disagree and strongly disagree) and this could have influenced the manner in which respondents answered questions.
- There could be a challenge in applying an inferential system on the results, therefore the results could not be generalised to other nursing colleges in South Africa.

However, in spite of the limitations, the study provided important information on the factors that influence absenteeism amongst student nurses. The identified factors were helpful in the development of specific recommendations that could be implemented to reduce absenteeism amongst student nurses.

5.5 SPECIFIC RECOMMENDATIONS

The third objective of the study was to make recommendations to manage student nurses' absenteeism in a public nursing college in Gauteng Province. According to the results of the study that was conducted in Australian College of Mental Health Nurses (Johnson, Hall & Berzins, 2018:3), there is higher absenteeism amongst student nurses that is caused by too much work load and when the recommendations are implemented, interventions are effective but effect sizes are small. In order to solve the problem of student nurses' absenteeism, all four facets of the causes should be addressed. The researcher thus makes the following recommendations as presented in Table 5.1.

Table 5.1: Specific recommendations

FACTORS	SPECIFIC RECOMMENDATIONS
<p>Student-centred factors</p>	<ul style="list-style-type: none"> • Give students a day off before writing a test • Offer a study week for exams • Keep classes short and interesting • Train nurse educators on innovative teaching strategies • Nurse educators must stimulate student nurses to want to learn
<p>Home-related factors</p>	<ul style="list-style-type: none"> • Establish a student counselling department • Wellness programmes should be established for student nurses at the nursing college • Parents and lecturers must be role models to student nurses
<p>School-related factors</p>	<ul style="list-style-type: none"> • Recommend a change of attitude by lecturers • Nurse educators should give assignments in time and space it accordingly • Nurse educators should try to avoid giving too much homework at once • Nurse educators should encourage students to start early with their assignments and projects
<p>Social factors</p>	<ul style="list-style-type: none"> • Nursing campuses must provide transport for student nurses • There must be a collaborative effort from all people of society to try to curb student nurses' absenteeism

5.5.1 Student-centred factors

- Since the student nurses were absent before they wrote a test, exam or submitted an assignment, it is recommended that they be given a day off before writing a test or submitting an assignment. A study week and revision block are also recommended. Student nurses should also have some days off in between examination papers.
- To prevent absenteeism due to lengthy classes, nurse educators should keep to the scheduled time and cut lectures short, at the same time creating library times, it is recommended that more scientific guidance is given to student nurses according to the level of study at the same time adhere to guidance on instructional time determination.
- In-service training and workshops should be conducted for nurse educators on time management and the utilisation of innovative teaching strategies that will enable them to finish the content on time and provide enough time for students to prepare for the examination.
- There is a popular adage that “you can drag a horse to water but you cannot force it to drink unless it is thirsty”. It is when the students are thirsty for knowledge that they attend lectures. Lecturers should open the door, but the students must enter by themselves and learn.

5.5.2 Home-related factors

- There are student nurses who become absent due to family commitments and death in the family. It is therefore recommended that nursing institutions should have an established counselling department to assist with grieving and to provide the required support.
- College management must consider offering wellness programmes at the nursing campus.

5.5.3 School-related factors

- Student nurses raised a concern about the attitude of some nurse educators. It is therefore recommended that a change in attitude is needed to improve poor lecturer-student relationships and this will make nurse educators to be more approachable and there will be collaborative working together between the students and lecturers. Thus, lecturers should see the students as co-partners in business whose efforts are also necessary for the teaching-learning process to be effective.
- To prevent absenteeism that is caused by excessive homework and projects given to student nurses, it is recommended that nurse educators should give assignments in time and space it accordingly. This can also be managed by avoiding giving homework that students will not cope with.
- Nurse educators should ensure adequate planning and coordination of the programme.
- Lecturers should ensure that specific time is allocated for classes during the designing and implementation phase of the curriculum.
- Incorporation of total notational hours per module, year level and programme will also assist the student nurses not to be over loaded with school work.
- A student guide should be available with all assignment submission dates illustrated clearly so that student nurses can start early with their projects.

5.5.4 Social factors

- Regarding the transportation problems that cause absenteeism, it is advisable and recommended that nursing campuses that can afford to provide transport for student nurses should do so. Based on the results, most of the respondents disagreed with items such as “When I am afraid of bullying students” as a cause of absenteeism, thus other social factor items were not the cause of student nurses’ absenteeism.
- It is also recommended that everyone in society, psychologists, educators, school guidance counsellors, policymakers in the government, and religious leaders, should all come together to combat the problem of student nurses’ absenteeism

from lectures by advising the students at various levels of education on the importance of attending lectures and how absenteeism will impact on their academic achievement and their future application skills.

5.6 GENERAL RECOMMENDATIONS

The researcher developed the following general recommendations in terms of nursing education, policy development, and further nursing research.

5.6.1 Recommendations for nursing education

The nursing education management at various nursing institutions should be encouraged to provide professional development, and conducive practice environments that empower student nurses, nursing educators and clinical instructors (Meyer, Nel & Downing, 2016:104).

- It is recommended that the college management should ensure that the year programmes allow the student nurses at least one week for revision before they start with the examination; this will allow them to consult with their lecturers as well.
- The college management should ensure that in-service training is conducted for the nurse educators, which will include topics such as classroom management, promotion of the student-lecturer relationships, and the provision of moral support to the students.
- It is recommended that student nurses must be given a day off before writing a test or submitting an assignment.
- In-service training and workshops should be conducted for nurse educators on time management and the utilisation of innovative teaching strategies that will enable them to finish the content on time and provide enough time for students to prepare for the examination.
- The researcher recommends regular support services, emphasising the importance of academic achievements, to reduce students' absenteeism.

- The establishment of a student counselling and support service, which could be an intervention to nursing students coping with traumatic events, while focusing on their education is recommended.
- The college management should motivate and focus on the improvement of the infrastructure, such as well-equipped libraries and laboratories, for knowledge and skill development amongst the student nurses.

5.6.2 Recommendations for policy development

A recent study among medical students reported that attendance policy is associated with better academic performance. The author concurs that reducing absenteeism may contribute to improvement of academic performance (Yusoff & Saiful, 2014:41).

- There is a need for the Gauteng Department of Health to develop a policy that will address student nurses' absenteeism in all colleges of nursing, and these must be monitored systematically.
- This policy should clearly outline the selection criteria and offer prizes in order to motivate students not to absent themselves from class.
- The college management should develop an orientation programme policy that will address the consequences of class absenteeism and adhere to it by instituting a performance management strategy.

It is hoped by the researcher that these suggestions and recommendations will make a difference as some come directly from student nurses themselves.

5.6.3 Recommendations for further nursing research

Based on the findings of this study, respondents felt that problems in the nursing schools caused their absenteeism; therefore, further studies on these problems and possible solutions could be conducted in order to improve student nurses' attendance.

There is a need for further research to be conducted on the following topics:

- Replication of the same study on different nursing campuses to compare the findings and to determine whether different findings can be obtained, as the nursing education environment varies. The research can also be extended to clinical hospitals.
- It is advisable to conduct a study to explore and describe the impact of students' absenteeism on their academic performance.
- There is a need to conduct research, using a qualitative approach to explore and describe the experienced factors that influence student nurses' absenteeism in more depth to obtain richer data.
- There is a need for research into educating qualified personnel on the identification of students at risk for absenteeism so that proper support can be given to student nurses early in their training.
- The methods used by lecturers and nursing service managers to monitor student nurse absenteeism could be researched in order to improve the management of student nurses' absenteeism.

5.7 CONCLUSIONS

This research study endeavoured to meet the objectives that were set in this study, namely:

- to investigate and describe factors influencing absenteeism amongst student nurses in a public nursing college in Gauteng Province;
- to determine the relationship between student-centred, home-related, school related and social factors that influence absenteeism amongst student nurses; and
- to make recommendations to manage student nurses' absenteeism in a public nursing college in Gauteng Province.

The FAIQ (2012) used in this study was found to be a reliable measure of student nurses' absenteeism. In this study, the researcher also found that student nurses absent themselves from class due to student-centred factors, home-related factors, school-related factors and social factors.

The correlational relationship that exists between these factors was found to be mostly positive and moderate.

Recommendations were made based on the findings of the study.

5.8 SUMMARY

The main aim of Chapter 5, as the final chapter of this study, was to provide a comprehensive discussion, limitations, recommendations and conclusion through reflecting on the objectives and the purpose of the study.



REFERENCES

Abdelrahman, S.M. & Abdelkader, A.M. (2017). The influencing factors of absenteeism amongst nursing students, *Journal of Nursing Education and Practice*, 7(10):64-69.

Allen, R.E. (Ed). (1993). *The Concise Oxford Dictionary of Current English*. Oxford: Oxford University Press.

Bandura, A. (2009). Social cognitive theory goes global. *Psychologist*, 22(6):504-506. 2020 American Psychological Association. 750 First street N, Washington, DC 20002-4242.

Basic Conditions of Employment Act 75, (1997). South African Department of Labour.

Balfanz, R. & Byrnes, V. (2012). The Importance of Being in School: A Report on Absenteeism in the Nation's Public Schools. [Online]. Accessed July 10, 2017. <http://new.every1graduates.org/the-importance-of-being-in-school/>.

Baloyi, P.D. (2014). Absenteeism amongst nursing students in a Limpopo college of nursing. Dissertation submitted in partial fulfilment of the requirement for the Degree of Magister Curations in Health Science Education at Potchefstroom Campus of the North-West University.

Baltimore Community. (2012). State of Chronic Absenteeism and School Health. A preliminary review for the Baltimore Community. Baltimore, Md.

Bati, A.H., Mandiracioglu, A. & Orgum, F. (2013). Why do students miss lecture? A study of lecture attendance amongst students of health science. *Nurse Education Today*, 33:596-601.

Berlita, A., Mbindyo, P. & English, M. (2013). Absenteeism amongst health workers – developing a typology to support empiric work in low-income countries and characterizing reported associations. *Human Resources for Health*, 11(3):1-10.

Bezuidenhout, R., Davis, C. & du Plooy-Cilliers, F. (2015). *Research Matters*. Cape Town: Juta.

Black, S., Curzio, J. & Terry, L. (2014). Failing a student: a new horizon of moral courage. *Nursing Ethics*, 21(2):224-238.

Booyens, S. & Bezuidenhout, M. (2013). *Dimensions of healthcare management*. 3rd edition. Cape Town: Juta.

Botma, Y., Greeff, M., Mulaudzi, F & Wright, S.C.D. (2010). *Research in Health Sciences*. Cape Town: Pearson Education South Africa (Pty) Ltd.

Bradshaw, M.J. & Lowenstein, A.J. (2014). *Innovative teaching strategies*. 6th edition. Burlington: Jones & Bartlett Learning.

Burns, N., Grove, S.K. & Gray, J.R. (2013). *The practice of nursing research appraisal, synthesis, and generation of evidence*. 6th edition. Elsevier, Saunders, St Louis, MO.

Chaudhry, S. & Iqbal, J. (2019). Absenteeism of medical students from subspecialty clinical rotations: a qualitative study. *J Coll Physicians Surg Pak*, 29(1):45-60.

Chris Hani Baragwanath Nursing College Statistic (2017). *Human Resource Management's Report* (Unpublished).

Cohen-Cohen in Pallant, J. (1988). *Statistical power analysis for the behavioural sciences*. 2nd edition. New Jersey. Lawrence Erlbaum.

Cooperkline, J. (2009). *School absenteeism, disruptive classroom behavior and disruptive family process in a sample of court-involved youth*. Columbus, Oh: Ohio State University. (Dissertation - Hons BS.).

Creswell, J.W. (2009). *Research design: quantitative and mixed-method approaches*. 3rd edition. Thousand Oaks, California: Sage.

Creswell, J.W. (2013). *Research design: quantitative and mixed-method approaches*. 4th edition. Thousand Oaks, California: Sage.

Currie, K., McCallum, J., Murray, J., Scott, J., Strachan, E., Yates, L. & Wright, M. (2013). Developing a national computerised absence monitoring and management system to reduce student attrition. *Nurse Education Today*, 34(5):738-743.

Deane, R.P & Murphy, D.J. (2013). Student attendance and academic performance in undergraduate obstetrics / gynecology clinical rotations, *Journal of the American Medical Association*, 310(21):2282-2288.

Department of Health (2009). Lonsdale clinic: quarterly report, Limpopo Province.

Desalegn, A.S., Berhan, A. & Berhan, Y. (2014). Absenteeism among medical and health science undergraduate students at Hawassa University, Ethiopia. *BMC Medical Education*, 14(1):81-91.

De Montigny, G. (2011) Beyond Anti-Oppressive Practice: Investigating Reflexive Social Relations. *Journal of Progressive Human Services*, 22(1):8-30. DOI: 10.1080/10428232.2011.564982

Dhai, A. & McQuoid-Mason, D. (2011). *Bioethics, Human Rights and Health Law: Principles and Practice*. Cape Town: Juta.

Donovan, R.O., Doody, O. & Lyons, R. (2013). The effect of stress on health and its implications for nursing. *British Journal of Nursing*, 22(16):969-973.

Farquharson, B., Allan, J., Johnston, M., Choudhary, C. & Jones, M. (2012). Stress amongst nurses working in a healthcare telephone-advice service: relationship with

job satisfaction and intention to leave, sickness absence, and performance. *Journal of Advanced Nursing*, 68(7):1624-1635.

Fayombo, G.A., Ogunkola, B.J. & Olaleye, Y.L. (2012). Cross-Institutional Study of the Causes of Absenteeism among University Students in Barbados and Nigeria. *South African Journal of Educational and Developmental Psychology*, (2):122-136.

Field, A. (2009). *Discovering statistics using SPSS*. 3rd edition. London: Sage.

Grove, S.K., Burns, N. & Gray, J.R. (2013). *Practice of Nursing Research*. 7th edition. Missouri: Elsevier Saunders.

Grove, S.K., Burns, N. & Sutherland (2017). *The practice of nursing research. Appraisal, synthesis and generation of evidence*. 8th edition. St Louis: Elsevier Saunders.

Gupta, M. & Lata, P. (2014). Absenteeism in schools: a chronic problem in the present time. *Education confab*, 3(1):11-14.

Hakim, A. (2014). Nursing student's satisfaction about their field of study. *Journal of Advances in Medical Education and Professionalism*, (2):7-88.

Hildergaard, P., Vink, M. & Adejumo, (2014). Incivility in Pre-registration Nursing Education: A Phenomenological Exploration of the Experiences of Student Nurses, Nurse Tutors and Nurse Mentors in a UK Higher Education Institution.

Hillygus, D.S. (2005). The missing link: exploring the relationship between higher education and political engagement. *Political Behavior*, 27(1):5-47.

Hixson, J.T. (2012). The relationship of student family structure and absence type to reading achievement. Lynchburg, Va.: Liberty University. (Thesis - DEd.).

IBM SPSS Statistics Version 25 (2018), Release 25.0.0, Copyright IBM Corporation and its licensors. <http://www-01.ibm.com/software/analytics/spss/> Date of access: 12 August 2018.

Ingham-Broomfed, I. & Becky, R. (2015). A nurses' guide to Qualitative Research. *The Australian journal of advanced nursing: a quarterly publication of the Royal Australian Nursing Federation*, 32(3):34.

Jackson, M. (2009). *Personnel*. 2nd edition. London: Heinemann Publishers.

Johnson, J., Hall, L.H. & Berzins, K. (2018). Mental healthcare staff well-being and burnout: A - narrative review of trends, causes, implications, and recommendations for future interventions. *International Journal of Mental Health Nursing*, 27(1):20-32. ISSN 1445-8330 <https://doi.org/10.1111/inm.12416>.

Juara, T.Y. (2013). The effect of student's attendance on academic performance: a case study at simad university mogadishu. Academic Research International. November 2013.

Kousalya, P., Ravinndranath, V. & Vizayakumar, K. (2006). Student absenteeism in engineering colleges: evaluation of alternatives using AHP. *Journal of Applied Mathematics and Decision Sciences*, 2006:1-26.

Kumar, K.P. & Rao, K.S. (2013). A study on causes and structural effects of students' absenteeism with reference to Vignan University Andhra Pradesh, India. *Journal of Applied Research*, 3(12):511-512.

Kuo, H.T., Lin, K. & Li, I. (2014). The mediating effects of job satisfaction on turnover intention for long-term care nurses in Taiwan. *Journal of Nursing Management*, 22(2):225-233.

Labour Relations Act Manual Guide (Act 66 of, 1995).<https://www.wipo.int/edocs/lexdocs/laws/> Date of access: 16 September 2017.

Longo, N.V. & Meyer, R.P. (2006). College students and politics: a literature review. Revisiting and reviewing the literature. Maryland: Center for Information & Research on Civic Learning & Engagement. (Circle working paper 46.)

Lipscomb, M. & Snelling, P.C. 2010. Student nurse absenteeism in higher education: an argument against enforced attendance. *Journal for nurse education today*, 30:573-578.

Mahmoud, A., Muhammad, D., Ali, S. & Ferial-Ahmed, H. (2014). Predicting nurses' turnover intentions by demographic characteristics, perception of health, quality of work attitudes. *International Journal of Nursing*, 20(1):79-88.

Maluleke, D., Thopola, M.K. & Lekhuleni, M.E. (2014). Factors contributing to absenteeism of staff nurses at a tertiary military hospital in Gauteng Province, South Africa. *African Journal for Physical, Health Education, Recreation and Dance* (Supplement 1:2):395-412.

Malik, S.K. (2012). Parents Involvement in female secondary schools. *International Journal of Social Sciences and Education*, 2(1):447-458.

Merghani, T.H., Eldirin Haroun, B. & Elmubarak, I. (2013). Self-report of voluntary absenteeism from didactic lectures by medical students. *Universal Journal of Education and General Studies*, 2(10):324-328.

Meyer, G.M., Nel, E. & Downing, C. (2016). Basic student nurse perceptions about clinical instructor caring. *Health SA*, 21:444-452.

Moule, P. & Goodman, M. (2014). *Nursing Research an Introduction*. 2nd edition. Los Angeles: Sage Publishers.

National Strategic Plan for Nurse Education, Training and Practice. (2012 /13 – 2016 /17).

Nursing Educational Opportunity Fund Program (2013). <https://doi.org/10.1377/hlthaff.25.1.268>. Date of access: 20 June 2016.

Pallant, J. (2010). *SPSS survival manual: A step-by-step guide to data analysis using the SPSS program*. 4th edition. New York: Mc Graw

Paradise Unified School Parent-Student Handbook. (2014). California Department of Education.

Patel, D., Cook, T., Cook, T. & Amendola, M. (2013). Attendance: analysis and recommendations. Danbury, Conn.: Danbury High School. School Governance Council.

Paton, N. (2015). Middle-aged workers take the most sick days and feel “older”. *Occupational Health*, 67(3):7.

Polit, DF. & Beck, CT. (2017). *Nursing Research: Generating and Assessing Evidence for Nursing Practice*. 9th edition. Philadelphia: Lippincott, Williams & Wilkins.

Queensland. Department of Education. (2013). Training and employment: Queensland State School. Queensland: Department of Education.

Ramlah, J. & Ahmad, A. (2013). Literacy and psychosocial problems among aboriginal students in primary school in Cameron Highlands (Malaysia). *International Journal of Education and Research*, 1(9):1-7.

Runeson, P. & Höst, M. (2009). Guidelines for conducting and reporting case study research in software engineering. *Empirical Software Engineering*, 14(2), 131-164. <https://doi.org/10.1007/s10664-008-9102-8>.

Ruth-Sahd, L.A. & Schneider, M.A. (2014). Student perceptions about attendance policies in Baccalaureate nursing programmes. *Nursing Education Perspectives*, 35(3):162-166.

Shahzada, G., Ghazi, S.R., Nawaz, H. & Khan, A. (2011). Causes of absenteeism from schools at secondary level. *Mediterranean Journal of Social Sciences*, 2(2):291298.

Sharmin, T., Azim, E., Choudhury, S. & Kamrun, S. (2016). Reasons of absenteeism among undergraduate medical students: A review. *AKMMC Journal* 8(1):60-66. <https://doi.org/10.3329/akmmcj.v8i1.31660>.

Shoukat, A., Haider, Z., Khan, H., Khan, H & Ahmed, A. (2013). Factors contributing to the students' academic performance: A Case Study of Islamia University Sub-Campus. *American Journal of Educational Research*, 1(8):283-289. doi: 10.12691/education.1.8.3.

Smale, T. (2017). Opinions expressed by Entrepreneur contributors are their own. <https://www.entrepreneur.com/article/293676>. Date of access: 03 February 2020.

Simelane, N.D. (2013). Investigating factors that may contribute to absenteeism among bursary students at a selected nursing campus in Kwa Zulu-Natal. Master's degree in Nursing Management. Durban: University of KwaZulu-Natal.

Simpson, J.A. & Weiner, E.S.C. (2017). *The Advanced Oxford English Dictionary*. Oxford, University Press.

Singh, R. (2012). Factors contributing to absenteeism of nurses in primary care centres in the EThekweni Municipal District of KwaZulu-Natal. Masters in Nursing Science, University of Stellenbosch.

Singh, P. (2015). Causes and effects of student nurse absenteeism at the Kwazulu-Natal College of Nursing. Durban University of Technology Open Scholar, May.

South African Nursing Council (SANC), (Act no 50, 1978, as amended). Pretoria: SANC.

South African Nursing Council (SANC, 1985), GG Regulation No. R425 of 22 February 1985, as amended.

South African Nursing Council (SANC, 1992). <http://www.sanc.Co.za/stats.htm> Date of access: 10 October 2014

South African Nursing Council (SANC). (2001). Regulations relating to the approval of the minimum requirements for the education and training of a nurse (general, psychiatric, community) and midwifery leading to registration R425, in terms of the Nursing Act, (Act no 50, 1978, as amended). Pretoria: SANC.

South African Nursing Council (SANC), (Act no 33, 2005, as amended). Pretoria: SANC.

South African Nursing Council (SANC). (2012). Regulation related to the scope of practice of persons who are registered or enrolled under the Nursing Act, 1978(Act no.50, 1978 as amended). Pretoria: SANC.

South African Nursing Council (SANC). (2014). <http://www.sanc.Co.za/stats.htm> Date of access: 10 October 2014.

South African Nursing Council. 1997. Minimum requirement for the education and training of pupils leading to enrolment as a nurse. Regulation R2175, as amended. Pretoria. SANC.

Stevenson, A. & Waite, M. (2011). Concise English Oxford Dictionary. 12th edition. Oxford University Press: New York.

Suhid, A., Rahman, A. & Kamal, N. (2012). Factors causing student absenteeism according to Peera. *International journal of arts and commerce*, 1(4):342-350. Ali

Tappen, R.M. (2011). *Advanced nursing research: from theory to practice*: Sudbury, MA: Jones & Bartlett Learning.

Taunton, R.L., Hope, K., Woods, C.K. & Bott, M.J. (1995). The Predictors of absenteeism among hospital staff nurses, *Nursing Economics*, 13(4):217-224.

Thekedam, J.S. (2013). Student absenteeism: interventions and programs to reduce chronic absenteeism and truancy St. Berchman's College, Changanacherry.

Thobakgale, E.M., Lekhuleni, M.E. & Kgole, J.C. (2013). Learner nurses absenteeism in the nursing schools at Capricorn District, Limpopo Province, South Africa. *African Journal for Physical, Health Education, Recreation and Dance*, 19(1):182-192.

University of Johannesburg. (2017). Department of Nursing Science Paradigm. Johannesburg. University of Johannesburg.

Virginia. Department of Education. (2005). *Improving guide for Virginia Schools: a resource guide for Virginia schools*. Richmond, Va.: Virginia Department of Education.

Wadesango, N. & Machingambi, S. (2011). Causes and structural effects of student absenteeism: a case study of three South African universities. *Journal for Social Science*, 26(2):89-97.

West, M.H. (2012). *Stepping up the pace: improving attendance: a "How to" mini-guide*. Richmond, Va.: M.H. West.

Weedmark, D. (2019). How to calculate Response rate. <http://www.Bizfluent.com>. Date of access: 25 January 2020.

Willard-Grace, R. (2014). Team structure and culture are associated with lower burnout in primary care. *The Journal of the American Board of Family Medicine*, 27:229-238.

World Health Organization. (2010). Preamble to the Constitution of the World Health Organization as adopted by the International Health Conference, New York, 19 June - 22 July 1946 by the representatives of 61 States. (Official of the World Health Organization, no.2.) <http://www.who.int/suggestions/fag/en> Date of access: 25 April 2017.

Yusoff, B. & Saiful, M. (2014). Association of academic performance and absenteeism among medical students. *Education in Medicine Journal*, 6(1):40-44.

Zerwekh, J. & Garneau, A.Z. (2012). *Nursing Today Transition and Trends*. 7th ed. Missouri: Elsevier Saunders.



APPENDIX A: REQUEST FOR PERMISSION TO USE QUESTIONNAIRE ON ABSENTEEISM

Permission to use questionnaire

Ntshingila, Nompumelelo

APPENDIX A

From: OGUNKOLA, Babalola <babalola.ogunkola@cavehill.uwi.edu>
Sent: 07 April 2017 08:21 AM
To: Ntshingila, Nompumelelo
Cc: Fayombo, Grace; yemisi1957@yahoo.co.uk
Subject: RE: Request for permission to use questionnaire on absenteeism

Dear Dr Ntshingila

Acknowledging receipt of your mail requesting for our permission to use our questionnaire. We are happy that you found our questionnaire useful for your research effort in the area of absenteeism. On behalf of my colleagues, I write to indicate that permission is granted to you and your student to use our questionnaire on absenteeism. However, it is necessary for you to acknowledge our work as required.

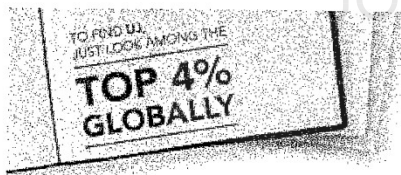
Regards,
Dr Babalola Ogunkola

From: Ntshingila, Nompumelelo [mpumin@uj.ac.za]
Sent: 07 April 2017 1:16
To: OGUNKOLA, Babalola; yemisi1957@yahoo.co.uk
Cc: Poggenpoel, Marie
Subject: Request for permission to use questionnaire on absenteeism

Good Morning

My name is Nompumelelo Ntshingila from the University of Johannesburg (South Africa). I and Professor Marie Poggenpoel are supervising Mr PL Gcaki who is currently registered with the university, and would like to conduct research on absenteeism at Nursing College. We have read your article titled "Cross Institutional Study of the Causes of Absenteeism amongst University students in Barbados and Nigeria".

The questionnaire that you have utilised in your study had high Cronbach Alpha coefficients and this is what has drawn us to your questionnaire. We intend using the questionnaire purely for this research study and not for commercial purposes. I have sent an email to your colleague Grace Fayombo however I have not succeeded in this regard. I am humbly requesting your permission to use the questionnaire.



Kind regards,

www.uj.ac.za

Mrs N. Ntshingila
Lecturer/Psychiatric and Mental Health Nursing
Health Sciences/Nursing Sciences
Tel +27 11 559 6491
Fax +27 11 559 2257

APPENDIX A.1: LETTER FROM THE STATISTICIAN THAT APPROVED THE QUESTIONNAIRE

APPENDIX: A.1



DEPARTMENT OF NURSING

RESEARCH STATISTICS

This serves to confirm that the following student has discussed the research methodology with me as supervisor, and as such may consult with STATKON regarding the statistical analysis of the research.

Research Title: ABSENTEEISM AMONGST STUDENT NURSES IN A NURSING COLLEGE IN GAUTENG PROVINCE

Student name: Philla Lucas Gcaki

Supervisor name: Mrs Nompumelelo Ntshingila

Co-Supervisor name: Prof. Marie Poggenpoel

Contact number: 011 5596491

Signed: *[Signature]*

Date: 26/04/2017

This serves to confirm that the above indicated student has discussed the relevant statistical analysis of the data that will be obtained in their trial, with STATKON.

Statistician name: *A G KUHUDZAI*

Signed: *[Signature]*

Date: *26/04/17*

APPENDIX B: ETHICAL CLEARANCE LETTER FROM THE UNIVERSITY OF JOHANNESBURG (REC)

APPENDIX B



FACULTY OF HEALTH SCIENCES

RESEARCH ETHICS COMMITTEE

NHREC Registration no: REC-241112-035

REC-01-41-2017

2 June 2017

TO WHOM IT MAY CONCERN:

STUDENT: GCAKI, PL
STUDENT NUMBER: 201037628

TITLE OF RESEARCH PROJECT: Factors Influencing Absenteeism amongst Student Nurses at a Public Nursing College in Gauteng Province

DEPARTMENT OR PROGRAMME: NURSING

SUPERVISOR: Mrs N Ntshingila CO-SUPERVISOR: Prof M Poggenpoel

The Faculty Academic Ethics Committee has scrutinised your research proposal and confirm that it complies with the approved ethical standards of the Faculty of Health Sciences; University of Johannesburg.

The REC would like to extend their best wishes to you with your postgraduate studies.

Yours sincerely,

Dr C Stein

Chair : Faculty of Health Sciences REC

Tel: 011 559 6564

Email: estein@uj.ac.za

APPENDIX B.1: HIGHER DEGREE COMMITTEE LETTER FROM UJ

APPENDIX: B.1



FACULTY OF HEALTH SCIENCES HIGHER DEGREES COMMITTEE

HDC-01-30 - 2017

2 June 2017

TO WHOM IT MAY CONCERN:

STUDENT: GCAKI, PL
STUDENT NUMBER: 201037628

TITLE OF RESEARCH PROJECT: Factors Influencing Absenteeism amongst Student Nurses at a Public Nursing College in Gauteng Province

DEPARTMENT OR PROGRAMME: NURSING

SUPERVISOR: Mrs N Ntshingila CO-SUPERVISOR: Prof M Poggenpoel

The Faculty Higher Degrees Committee has scrutinised your research proposal and concluded that it complies with the approved research standards of the Faculty of Health Sciences; University of Johannesburg.

The HDC would like to extend their best wishes to you with your postgraduate studies

Yours sincerely,



Prof BS Shaw

Chair: Faculty of Health Sciences HDC

Tel: 011 559 6891

Email: brandons@uj.ac.za

APPENDIX C: LETTER TO THE HEAD OF DEPT, REQUESTING TO CONDUCT THE STUDY

APPENDIX C



GAUTENG PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

CHRIS HANI BARAGWANATH NURSING COLLEGE
RAHIMA MOOSA CAMPUS
Private Bag X 116 Tel: (011) 247-3300/3
Melville Fax: (011) 247-3350

20 / Sept /2017

For Attention: Bonalesedi Vice Principal- Ms N. Gidimisana

From: Mr. PL Gcaki

**RE: REQUEST FOR A PERMISSION TO COLLECT DATA FROM NURSING
STUDENTS FOR A REASERCH STUDY:**

My name is Mr Philla Lucas Gcaki a lecturer at CHBNC - Rahima Moosa Nursing Campus. I hereby requesting a permission to collect data from students at the nursing campus that you are managing. The topic of the research study is: Factors influencing absenteeism amongst nursing students at a public nursing college in Gauteng Province. Other supporting documents that go with the research study have been submitted to the Head of the Dept.

Kind Regards

Mr Philla L Gcaki, Novice Researcher

APPENDIX D: PERMISSION TO CONDUCT A RESEARCH STUDY FROM THE ACADEMIC INSTITUTION CHBNC

APPENDIX D



CHRIS HANI BARAGWANATH NURSING COLLEGE

Private Bag X 05
Bertsham
2013

Tel: (011) 983-3000
Fax: (011) 983-3091

14 June 2017

For Attention: Mr L. Gcaki

RE – APPLICATION TO CONDUCT A RESEARCH PROJECT AT CHIRSI HANI
BARAGWANATH NURSING COLLEGE

Your letter dated 07 July 2017 refers.

Permission has been granted for you to conduct a research project titled:

**FACTORS INFLUENCING ABSENTEEISM AMONGST STUDENT NURSES AT A
PUBLIC NURSING COLLEGE IN GAUTENG PROVINCE**

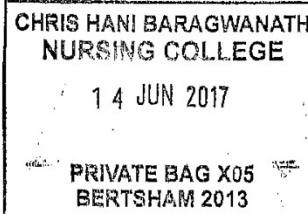
The conditions of the approval of your application are:

- You should participate in the College research days for the purpose of presenting the different stages of your research project.
- You are also requested to inform the College the name of the journal where the completed research will be published.
- The College will appreciate if you could donate a copy of the completed research project document to Chris Hani Baragwanath Nursing College Library.

Kind regards,

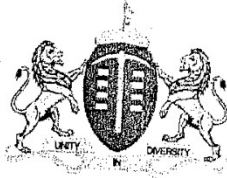
Ms. T. Makgopela
Chairperson of the Research Committee

Ms. N. Ntsele
College Principal



APPENDIX D.1: PERMISSION TO CONDUCT A RESEARCH STUDY FROM THE ACADEMIC INSTITUTION (BONALESEDI CAMPUS)

APPENDIX D.1



GAUTENG PROVINCE

HEALTH
REPUBLIC OF SOUTH AFRICA

CHRIS HANI BARAGWANATH NURSING COLLEGE
BONALESEDI NURSING COLLEGE

Private Bag X 05
Bertsham
2013

Tel: (011) 696 - 8400
Fax: (011) 696 - 8301

nozle.gidimisana@gmail.com
0832949184/0726042971
Date: 14 September, 2017

SUBJECT: PERMISSION TO COLLECT DATA
RESEARCH TOPIC: FACTORS INFLUENCING ABSENTEEISM AMONGST NURSING STUDENTS AT A
PUBLIC NURSING COLLEGE IN GAUTENG PROVINCE.
To: Mr. P.L. Gcaki

Good day Mr. P.L Gcaki

This is to grant you permission to come and collect data as requested from the
Bonalesedi Nursing College Lecturers.

Date: 18 September 2017

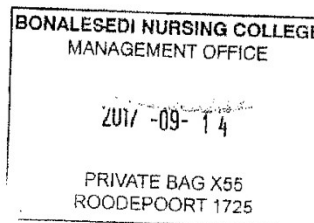
Time: 08h00

Venue for the briefing: Bonalesedi Nursing College Auditorium.

Kind regards

Mrs N. D. Gidimisana (Vice Principal)

N. D. Gidimisana



APPENDIX E: FACTORS INFLUENCING ABSENTEEISM QUESTIONNAIRE (FIAQ)

Dear Participant,

Please respond to all the items in this questionnaire as honestly and completely as possible.

SECTION A: DEMOGRAPHIC DATA

Tick your response in the appropriate box next to your answer.

1. Your age

17-20	1	<input type="checkbox"/>	D01
21-24	2	<input type="checkbox"/>	D02
25-28	3	<input type="checkbox"/>	D03
29-40	4	<input type="checkbox"/>	D04

2. Your marital status

Married	1	<input type="checkbox"/>	D05
Single	2	<input type="checkbox"/>	D06
Divorced	3	<input type="checkbox"/>	D07
Widow/Widower	4	<input type="checkbox"/>	D08

3 Your current level of study

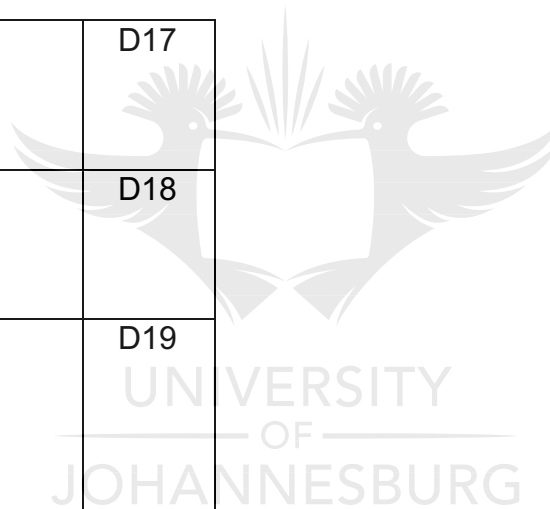
1 st year	1	<input type="checkbox"/>	D09
2 nd year	2	<input type="checkbox"/>	D10
3 rd year	3	<input type="checkbox"/>	D11
4 th year	4	<input type="checkbox"/>	D12

4. Your current distance from campus

0 – 5 km	1		D13
6 -10 km	2		D14
11 -15 km	3		D15
15 km or more	4		D16

5. Your method of transport

Own transport	1.		D17
Public transport	2.		D18
None (I have to walk)	3.		D19



SECTION B

IN MY OPINION STUDENTS ARE ABSENT FROM CLASS DUE TO THE FOLLOWING REASONS:

Tick [√] your response in the appropriate box next to the correct answer.

1- Strongly disagree, 2-Disagree, 3-Agree and 4-Strongly agree

Student –centered Factors	Strongly disagree 1	Disagree 2	Agree 3	Strongly Agree 4	
Students' lack of interest in school subjects or courses.					(SC01)
Lack of personal interest in studies.					(SC02)
Inability of students to match the course or courses opted for.					(SC03)
Lack of self-confidence among the students.					(SC04)
I don't understand the subject/s.					(SC05)
When I want to prepare for the test.					(SC06)
Inferiority complex among the students.					(SC07)
Length of periods.					(SC08)

Too much socialization among students.					(SC09)
When I am preparing for examinations.					(SC10)
Home related factors.	Strongly disagree 1	Disagree 2	Agree 3	Strongly Agree 4	
Over expectation by parents.					(HR01)
Lack of parental support.					(HR02)
Lack of parental care and involvement in their children's academic activities.					(HR03)
Death of a family member.					(HR04)
Poor family relationships.					(HR05)
My home is too far from the campus.					(HR06)
Family commitments.					(HR07)
School related factors	Strongly disagree 1	Disagree 2	Agree 3	Strongly Agree 4	

Poor lecturer-student relationship.					(SR01)
Poor teaching skills of lecturers leading to boring lectures.					(SR02)
Negative peer influence on lectured.					(SR03)
Lecturers not turning up for scheduled lectures.					(SR04)
Excessive homework and project work for students.					(SR05)
Lack of recreational and allied activities like sports programs.					(SR06)
Lack of fresher's or farewell parties.					(SR07)
Inadequate orientation about hours of training.					(SR08)
Classroom environment not conducive for learning.					(SR09)
Poor infrastructural facilities in school e.g. inadequate space in the					(SR10)

library, lack of necessary equipment.					
Inclement weather such as when it is cold or hot.					(SR11)
Social Factors	Strongly disagree 1	Disagree 2	Agree 3	Strongly Agree 4	
Unavailability of opportunities for entertainment like malls or movies around the campus.					(SR01)
Low social value for education.					(SR02)
More regard for wealthy persons than educated persons.					(SR03)
Beliefs that much education is not required for success and business.					(SR04)
Political activities such as rallies.					(SR05)
Transportation problems.					(SR06)

When I want to attend community activities.						(SR07)
When I am afraid of bullying students.						(SR08)

SECTION C

ABSENTEESIM OF LECTURES AND PRACTICALS

LECTURES	None of them	Less than 25%	26% - 50%	51%- 75%	76%- 99%	All of them	
How many lectures were you expected to attend in the past month?							(L01)
How many lectures did you attend in the past month?							(L02)
How many lectures have you missed this past semester?							(L03)

PRACTICALS	None of them	Less than 25%	26% - 50%	51%-75%	76%-99%	All of them	
How many practicals were you expected to attend in the past month?							(P0 1)
How many practicals did you attend in the past month?							(P0 2)
How many practicals have you missed this past semester?							(P0 3)



SECTION D

WAYS TO REDUCE ABSENTEEISM

INDICATE THE NEED FOR THE FOLLOWING TYPES OF PROGRAMS ON YOUR CAMPUS.

Tick [√] your response in the appropriate box of your choice.

Program	We already have programs like this?	If yes, answer the following question: We need to	If no, answer the following question: We need a

Thank you for your participation:



APPENDIX F: RESEARCH LETTER INFORMATION LETTER

Research information letter

APPENDIX F



DEPARTMENT OF NURSING RESEARCH STUDY INFORMATION LETTER

MAY 2017

Good Day

My name is Mr Philla Lucas Gcaki I **WOULD LIKE TO INVITE YOU TO PARTICIPATE** in a research study on "Absenteeism amongst nursing students in a nursing college in Gauteng Province".

Before you decide on whether to participate, I would like to explain to you why the research is being done and what it will involve for you. **I will go through the information letter with you and answer any questions you have.** This should take about 10 to 20 minutes. The study is part of a research project being completed as a requirement for a Master's Degree in Ethos & Professional Practice through the University of Johannesburg.

THE PURPOSE OF THIS STUDY is to investigate and describe the factors causing absenteeism by nursing students and to make recommendations to manage absenteeism by student nurses.

Below, I have compiled a set of questions and answers that I believe will assist you in understanding the relevant details of participation in this research study. Please read through these. If you have any further questions I will be happy to answer them for you.

DO I HAVE TO TAKE PART? No, you don't have to. It is up to you to decide to participate in the study. I will describe the study and go through this information sheet. If you agree to take part, I will then ask you to sign a consent form.

WHAT EXACTLY WILL I BE EXPECTED TO DO IF I AGREE TO PARTICIPATE? If you agree to participate you will be expected to answer about 42 questions on the questionnaire by making a tick on the boxes. The questionnaire is divided into Section A, B, C and D. It will take about 20 – 30 minutes to complete the questions.

WHAT WILL HAPPEN IF I WANT TO WITHDRAW FROM THE STUDY? If you decide to participate, you are free to withdraw your consent at any time without giving a reason and without any consequences. If you wish to withdraw your consent, you must inform me as soon as possible.

WHAT WILL HAPPEN IF I WANT TO WITHDRAW FROM THE STUDY? If you decide to participate, you are free to withdraw your consent at any time without giving a reason and without any consequences. If you wish to withdraw your consent, you must inform me as soon as possible.

IF I CHOOSE TO PARTICIPATE, WILL THERE BE ANY EXPENSES FOR ME, OR PAYMENT DUE TO ME: The study is not done for commercial purposes, it's academic orientated study. You will not be paid to participate in this study and you will not be responsible for any expenses.

RISKS INVOLVED IN PARTICIPATION: There are no risks associated with this study.

BENEFITS INVOLVED IN PARTICIPATION: There is no direct benefits of this study to the participants.

WILL MY PARTICIPATION IN THIS STUDY BE KEPT CONFIDENTIAL? Yes. No identifying data will be on the questionnaire/data sheets. All data and back-ups thereof will be kept in password protected folders and/or locked away as applicable. Only I or my research supervisor will be authorised to use and/or disclose your anonymised information in connection with this research study. Any other person wishing to work with you anonymised information as part of the research process (e.g. an independent data coder) will be required to sign a confidentiality agreement before being allowed to do so.

WILL MY TAKING PART IN THIS STUDY BE ANONYMOUS? Yes. Anonymous means that your personal details will not be recorded anywhere by me. As a result, it will not be possible for me or anyone else to identify your responses once these have been submitted.

WHAT WILL HAPPEN TO THE RESULTS OF THE RESEARCH STUDY? The results will be written into a research report that will be assessed. In some cases, results may also be published in a scientific journal. In either case, you will not be identifiable in any documents, reports or publications. You will be given access to the study results if you would like to see them, by contacting me.

WHO IS ORGANISING AND FUNDING THE STUDY? The study is being organised by me, under the guidance of my research supervisor at the Department of Nursing in the University of Johannesburg. The researcher has applied for a merit bursary at the University of Johannesburg and also the funds will come from supervisor's bursary.

WHO HAS REVIEWED AND APPROVED THIS STUDY? Before this study was allowed to start, it was reviewed in order to protect your interests. This review was done first by the Department of Gauteng Department of Health, and then secondly by the Faculty of Health Sciences Research Ethics Committee at the University of Johannesburg. In both cases, the study was approved.

WHAT IF THERE IS A PROBLEM? If you have any concerns or complaints about this research study, its procedures or risks and benefits, you should ask me. You should contact me at any time if you feel you have any concerns about being a part of this study. My contact details are:

Mr Philla Lucas Gcaki

Tel: +27 11 247 3300 or +27 8247 14057

Email: plgcaki@gmail.com

You may also contact my research supervisor:

Mrs Nompumelelo Ntshingila

Email: mpumln@uj.ac.za

If you feel that any questions or complaints regarding your participation in this study have not been dealt with adequately, you may contact the Chairperson of the Faculty of Health Sciences Research Ethics Committee at the University of Johannesburg:

Prof. Chris Stein

Tel: 011 559-6564

Email: cstein@uj.ac.za

FURTHER INFORMATION AND CONTACT DETAILS: Should you wish to have more specific information about this research project information, have any questions, concerns or complaints about this research study, its procedures, risks and benefits, you should communicate with me using any of the contact details given above.

Researcher:

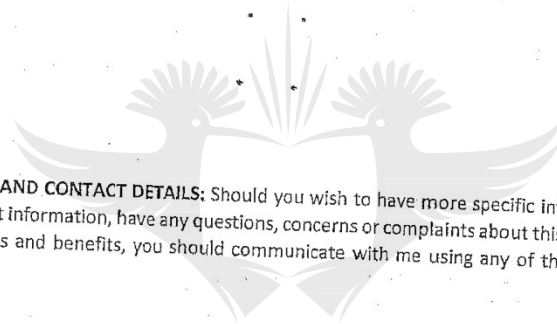
Mr Philla Lucas Gcaki

Mrs Nompumelelo Ntshingila

Supervisor

Prof Marie Poggenpoel

Co-supervisor



UNIVERSITY OF JOHANNESBURG

12/05/17

..... 12/05/17

12/05/17

APPENDIX G: CONSENT TO BE A RESEARCH PARTICIPANT

Consent Form

APPENDIX G



DEPARTMENT OF NURSING

RESEARCH CONSENT FORM FOR COMPLETING A QUESTIONNAIRE

"Factors influencing absenteeism amongst nursing students at a public nursing college in Gauteng Province"

Please initial each box below:

I confirm that I have read and understand the information letter dated: / / for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily.

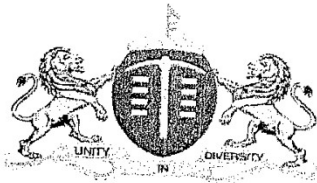
I understand that my participation is voluntary and that I am free to withdraw from this study at any time without giving any reason and without any consequences to me.

I agree to take part in the above study.

Name of Participant Signature of Participant Date

Name of Researcher Signature of Researcher Date

APPENDIX H: PERMISSION TO CONDUCT THE STUDY FROM DEPT OF HEALTH IN GAUTENG PROVINCE



APPENDIX H

GAUTENG PROVINCE

REPUBLIC OF SOUTH AFRICA

OUTCOME OF PROVINCIAL PROTOCOL REVIEW COMMITTEE (PPRC)

Researcher's Name (PI)	Mr Gcaki
Organization / Institution	University of Johannesburg
Research Title	Factors influencing absenteeism amongst student nurses at the Public Nursing College
Contact number	082 471 4057
Protocol number/Proposal number	GP 2017RP59 98
Sites	CHBNC & Bonalesedi

Your application to conduct the abovementioned research has been reviewed by the Province and permission has been granted.

We request that you submit a report after completion of your study and present your findings to the Gauteng Health Department.

YES Permission granted

 Permission denied

Recommended by

Ms Yvonne Skosana
Acting Chairperson:

Date: 10/11/2017

UNIVERSITY
OF
JOHANNESBURG

APPENDIX I: EDITING CERTIFICATE

Between lines editing

Leatitia Romero
Professional Copy-Editor, Translator and Proofreader
(BA HONS)

Cell: 083 236 4536
leatitiaromero@gmail.com
www.betweenlinesediting.co.za

11 October 2019

To whom it may concern:

I hereby confirm that I have edited the dissertation entitled: “FACTORS INFLUENCING ABSENTEEISM AMONGST STUDENT NURSES AT A PUBLIC NURSING COLLEGE IN GAUTENG PROVINCE”. Any amendments introduced by the author hereafter are not covered by this confirmation. The author ultimately decided whether to accept or decline any recommendations made by the editor, and it remains the author’s responsibility at all times to confirm the accuracy and originality of the completed work.

Leatitia Romero

UNIVERSITY
OF
JOHANNESBURG

Affiliations

PEG: Professional Editors Group (ROM001)
EASA: English Academy of South Africa
SATI: South African Translators’ Institute (1003002)
SfEP: Society for Editors and Proofreaders (15687)
REASA: Research Ethics Committee Association of Southern Africa (104)