

**THE IMPACT OF DIVORCE ON WORK PERFORMANCE OF PROFESSIONAL
NURSES IN THE TERTIARY HOSPITALS OF THE BUFFALO CITY MUNICIPALITY.**

BY

DAPHNE MURRAY

201013894

Submitted in fulfilment of the requirement for the degree of

Master of Nursing Science (Magister Curationis)

In the

Faculty of Science and Agriculture

University of Fort Hare

Supervisor: Mrs. Z. Peter

Co- supervisor: Dr. N. Tshotsho

January 2012

DECLARATION

I, Daphne Murray declare that, the research reported in this dissertation, except where otherwise indicated, and is my original work. This dissertation has not been submitted for any degree or examination at any university. This dissertation does not contain other person's data, writing, pictures, graphs or other information, unless specifically acknowledged as being sourced from other persons.

Signed.....

Date:.....

ABSTRACT

Divorce is a phenomenon that affects the emotional, physical and social wellbeing of the divorcees and those close to them. The situation becomes complicated if the affected person has a responsibility of providing caring and nurturing services to the sick, either as a manager or as a practitioner. The extent of how the impact of divorce affects the performance of professional nurses in their roles as carers and as managers was unknown. The nature and quality of services that they render to their patients, their coping strategies and the support systems were unknown.

The purpose of the study was to describe and explore the impact of divorce on work performance of professional nurses at the East London Hospital Complex with the aim of ensuring high quality patient care. The objectives of the study were to: explore and describe the lived experiences of female divorced professional nurses with regard to the impact of divorce on their work performance; identify their coping strategies and their support systems.

An exploratory descriptive and contextual qualitative research design was used. A phenomenological approach was used. The participants were twelve (12) divorced female professional nurses. The purposive and snowball sampling as non-probability sampling techniques were used. An interview guide was used to conduct the interviews. Audiotape was used for recording the data. Tesch's steps (1990) of analyzing qualitative data guided the data analysis process.

According to the lived experiences of the participants, divorce is traumatic and painful with emotional, physical, financial and social impact. It had a negative impact on the professional nurses' work performance. The coping strategies included acceptance of the reality, studying, involvement with club and church activities. Support was available from the families, church, friends, and colleagues. Recommendations are that: the employee assistance program be marketed more effectively by hospital management and be included in the hospital, departmental and unit orientation programmes; that a dedicated psychologist, as well as preventive intervention programs, be made available to employees dealing with divorce.

DEDICATION

I dedicate this study to my late mother who died 39 years ago who always believed in me. I would also like to express my gratitude to my loving husband Eric and all my children Alliston, Manwell, Ricardo, Tim and Amanda for their patience, Love, support and understanding. I love you all so dearly.

ACKNOWLEDGEMENTS

To God be the glory great things he has done to give me life and health each day and guide me towards obtaining my masters degree.

To my dearest husband, Eric who supported me unconditionally throughout and gave me encouragement whenever I wanted to quit. He slept very early at night to wake up in the early hours of the morning to make me a cup of tea and keep me company until 3am in the morning.

To my four sons Alliston, Manwell, Ricardo, Tim and my daughter Amanda.

For the support you kids gave me even if it was how small or how big but it meant a lot to me. A special thank you to Alliston for your contribution, you are a star.

To my research study supervisor Mrs. Zingiwe Peter thank you for believing in me. Thank you for sacrificing your time especially, after the students exams for going that extra mile for guiding and assisting me although it was not an easy road it was difficult but through the grace of the Lord it was possible.

To my co-Supervisor Dr. N. Tshotsho thank you very much for your guidance it was much appreciated.

To my co-coder Mrs. A.Mbatha thank you very much for your assistance, it was a pleasure working with you.

To Miss Nomboniso Ngqele thank you very much for your support. Whenever I needed you, you were available, may the Lord bless you in your new endeavors.

To my Minister of Religion Craig Miles and his wife Eileen thank you very much for your prayers and support.

My sincere thanks goes out to the East London Hospital Complex Management for giving me the opportunity to allow me to do my research at the Complex.

To the Nursing Service Managers who supported me so well at Frere and Cecilia Makiwane hospital, thank you very much it was much appreciated.

To the research participants from both hospitals, thank you very much it was not an easy topic, rather very emotional. Thanks for sharing your experience with me, may God bless you.

To my H.O.D. Dr. E. Seekoe thank you very much for your support and to all my colleagues who have supported me in the department, no matter how small or big the support was. Thank you very much.

To Penny Nhlumayo, thank you very much for all the typing you did for me, I have no words to express my gratitude. God bless.

TABLE OF CONTENTS

DECLARATION.....	i
ABSTRACT	ii
DEDICATION.....	iii
ACKNOWLEDGEMENTS.....	iv-v
TABLE OF CONTENT.....	vi-x
CHAPTER 1	1
1. INTRODUCTION	1
1.2 PROBLEM STATEMENT	3
1.3 PURPOSE.....	4
1.4 OBJECTIVES.....	4
1.5 RESEARCH QUESTION.....	5
1.6 SIGNIFICANCE OF THE STUDY.....	6
1.7 DEFINITION OF TERMS	6
1.7.1 Divorce	6
1.7.2 Professional Nurse	7
1.7.3 Work Performance	7
1.7.4 Impact	7
1.7.5 Care	7
1.8 RESEARCH METHODOLOGY	8

1.8.1	Research Approach And Research Design.....	8
1.8.2	Research Setting.....	8
1.8.3	Population.....	9
1.8.4	Sample And Sampling.....	9
1.8.5	Pilot Study.....	9
1.8.6	Data Collection.....	10
1.9	Ethical Considerations.....	10
1.10	DATA ANALYSIS.....	11
1.10.1	Trustworthiness Of The Study.....	11
1.11	SUMMARY.....	11
CHAPTER 2	12
2.	LITERATURE REVIEW.....	12
2.1	INTRODUCTION.....	12
2.2	DIVORCE.....	12
2.2.1	Definition Of Divorce.....	12
2.2.2	Origin Of Divorce.....	13
2.2.3	Trends Of Divorce.....	13
2.3	EFFECTS OF DIVORCE.....	14
2.3.1	Effects Of Divorce In Families.....	14
2.3.2	Children.....	16
2.3.4	Financial Effects.....	18

2.4	IMPACT OF DIVORCE ON WORK PERFORMANCE	18
2.5	NURSING AS A PROFESSION	20
2.6	SCOPE OF PRACTICE OF A PROFESSIONAL NURSE	21
2.7	SUPPORT PROGRAMS	23
2.8	COPING STRATEGIES	24
2.9	SUMMARY	26
CHAPTER 3	27
3.	RESEARCH METHODOLOGY	27
3.1	INTRODUCTION.....	27
3.2	RESEARCH APPROACH AND RESEARCH DESIGN	27
3.3	RESEARCH SETTING.....	28
3.4	POPULATION	29
3.5	SAMPLE AND SAMPLING.....	29
3.6	INCLUSION CRITERIA	31
3.7	EXCLUSSION CRITERIA	31
3.8	PILOT STUDY.....	31
3.9	RESEARCH INSTRUMENT	32
3.10	DATA COLLECTION.....	33
3.11	ETHICAL CONSIDERATIONS	34
3.12	DATA ANALYSIS	35
3.13	TRUSTWORTHINESS OF THE STUDY.....	37

3.13.1	Credibility (True-Value)	37
3.13.2	Transferability (Applicability).....	38
3.13.3	Dependability (Consistency).....	38
3.13.4	Confirmability (Neutrality).....	38
3.14	SUMMARY	39
CHAPTER 4	40
4.	RESULTS.....	40
4.1	INTRODUCTION.....	40
4.2	PARTICIPANTS' DEMOGRAPHIC DATA.....	40
4.3	THEMES THAT EMERGED FROM THE DATA ANALYSIS	40
4.3.1	Experiences Of Divorce Of Professional Nurses	43
4.3.2	Impact Of Divorce On Professional Roles And Work Performance	52
4.3.3	Coping Strategies.....	54
4.3.4	Support Systems In The Workplace	58
4.4	SUMMARY	62
CHAPTER 5	63
5.	DISCUSSION.....	63
5.1	INTRODUCTION.....	63
5.2	DISCUSSION.....	63
5.3	IMPLICATIONS FOR PRACTICE	76
5.4	IMPLICATIONS FOR RESEARCH.....	76

5.5	LIMITATIONS OF THE STUDY.....	76
5.6	CONCLUSION	77
5.7	RECOMMENDATIONS	78
6.	LIST OF REFERENCES	80
7.	ANNEXURE	85
7.1	ANNEXURE A: Certificate of approval from the University of Fort Hare Ethics Committee.....	85
7.2	ANNEXURE B: Letter of approval from the Eastern Cape Department of Health.	86
7.3	ANNEXURE C: Letter of approval from the East London Hospital Complex.....	87
7.4	ANNEXURE D: Participant Consent Form	88
7.5	ANNEXURE E: Interview Guide	89
7.6	ANNEXTURE F: Work Protocol.....	90
7.7	ANNEXURE G: Proof Reading Certificate.....	91

CHAPTER 1

INTRODUCTION

1.1 BACKGROUND OF THE STUDY

The actual divorce rate amongst female professional nurses is unknown. A study by Gabru (2004:2) revealed that the divorce rate in South Africa is generally high with 1 out of every 2 marriages ending in divorce, a legal dissolution of marriage. The factors which contribute and lead to the dissolution of a marriage are varied and diverse in nature.

Divorce is one of the most stressful and traumatic experiences that can occur in the life of any person. It has a ripple effect on all those around the people involved, including society in general. It affects not only the adults who make the choice, but the children as well. Its impact is generally felt socially, emotionally, economically and physically (Du Toit & Van Staden 2005:224).

The findings from research studies revealed that divorced individuals experience an increase in various pathologies, such as affective disorders, gambling and substance abuse (Jerskey, Lyons, Lynch, Hines, Ascher & Tsuang 2001:189). Those who are employed may experience difficulties at work, with a negative impact on their level of performance and their customers. The situation could have detrimental effects to customers who are made vulnerable by illness, like patients of divorced professional nurses.

Nurses are, by law, expected to render safe and quality nursing care to their patients (Nursing Act, 33 of 2005). A nurse is expected to be mentally stable, responsible and accountable for rendering high quality care of the patient.

Women constitute by far the largest group in the nursing profession. These nursing professionals experience the same problems that ordinary working women experience, as well as the tremendous physical and emotional burden any career entails. Such problems include the husband-wife relationship, since the husband has to accommodate her irregular working hours and night duty. The husband is also obliged to help with the children and household chores. The responsibility of managing a home remains largely with the wife. This frequently leads to stress. The husband may also feel burdened because he has to deal with tasks that do not form part of his traditional role (Du Toit & Van Staden 2005:222)

According to Searle (2002:250) Nursing is a risk-laden profession which should be practiced only by persons who have the insight, knowledge, skill and integrity to act responsibly so that the patient may, at all times, be safe in their hands.

The researcher, who has been a nursing service manager for a number of years at the East London Hospital Complex, was approached by divorced female professional nurses, for guidance and advice about problems related to their divorced status. They were often highly stressed, resentful, angry, and bitter, depressed and, at times, were guilt-laden and self-blaming. Their thoughts often centred around the impact of divorce on themselves and their children. In the researcher's capacity as a custodian of patients, she often wondered how their divorced status could affect their caring, nurturing and empathic role towards their patients and whether they were in a position to render quality care to the patients in the state in which they were.

This study intends to find out about the lived experiences of professional nurses who have been divorced for less than five (5) years, and the impact of divorce on their work performance, while pre-occupied with divorce. Based on their views, recommendations will be made to ensure quality care to patients.

In the East London Hospital Complex, support programs, such as the Employee Assistant Program, are in place. This program caters for all problems including marital problems. Divorce, however, is not reflected as a stand-alone problem. Support groups, emanating from the employee assistance program, are available, but there is no evidence of support groups for divorced staff members.

1.2 PROBLEM STATEMENT

A research problem is an area of concern where there is a gap in the knowledge base needed for nursing practice whereas a problem statement identifies the specific gap in the knowledge needed for practice (Burns & Grove 2009a:69).

Divorce is a phenomenon that negatively affects the emotional, physical and social wellbeing of the divorcees and those close to them. The situation becomes complicated if the affected person has a responsibility of providing caring and nurturing services to the sick either as a manager or as a practitioner. Such a situation is known to prevail at the East London Hospital Complex in the Buffalo City Municipality in East London amongst divorced female professional nurses. Most professional nurses are female; hence most professional nurses, who are divorced, are female. They are negatively affected by divorce and yet have to continue working while in that state of health and mind. The extent of how the impact of divorce affects their performance in their roles as carers and as managers, is unknown. The nature and quality of services rendered by the participants to patients is unknown. Furthermore, how they themselves cope with divorce, the support systems available for them and their effectiveness as carers towards the patients is also unknown.

The impact of divorce on work performance of divorcees has not been identified. The divorced female professional nurses are selected as informants as they have lived and experienced divorce.

In the Buffalo City Municipality, there is no evidence of any study ever carried out to investigate the impact of divorce on professional nurses' work performance. This study is therefore a realization of the need to investigate the impact of divorce on professional nurses' work performance in order to develop strategies to address the problem.

The researcher, who had also experienced working as a divorced professional nurse, has her own views on the impact of divorce on work performance, but will not allow her experiences to influence the outcome of this study.

The researcher is also aware that there are other factors which may have an impact on work performance other than divorce, but the focus of this study, is on divorce related impact.

1.3 PURPOSE

The research purpose is a clear, concise statement of the specific goal or aim of the study that is generated from the research problem (Burns & Grove 2009a:69).

The purpose of the study is to explore and describe the impact of divorce on work performance of professional nurses at the East London Hospital Complex with the aim of ensuring high quality patient care.

1.4 OBJECTIVES

Research objectives are clear, concise, declarative statements that are expressed to direct a study and are focused on identification and description of variables or determination of the relationships among variables, or both. (Burns & Grove 2009b:719).

The objectives of the study are to:

- Explore and describe the lived experiences of female divorced professional nurses at East London Hospital Complex with regard to the impact of divorce on their work performance.
- Identify the coping strategies used by the divorced professional nurses
- Describe the support systems available for the divorced professional nurses at the East London Hospital Complex.

1.5 RESEARCH QUESTION

A research question is a concise, interrogative statement that is worded in the present tense and includes one or more variables or concepts. (Burns & Grove 2005:167).

The research question for this study is:

What are the lived experiences of female professional nurses of the East London Hospital Complex with regard to the impact of divorce on their work performance?

1.6 SIGNIFICANCE OF THE STUDY

The results of the study will assist in making the Eastern Cape Department of Health and the Management of the East London Hospital Complex aware of the impact of divorce on the work performance of the professional nurses so as to develop relevant strategies to mitigate the effects of divorce on quality care of the patients.

Such strategies will also cater for other categories of nurses and other employees. It could also serve as a benchmark for nursing administration in the country.

As a result of these strategies, the support needs of the divorced professional nurses could be met and their physical and psychological health and work performance could improve.

The patients, as consumers of health care services, will be nursed by stable and committed professional nurses who are capable of rendering high level of quality care to the citizens of the country. Newly divorced professional nurses will be able to cope with divorce because there will be existing support systems in place.

1.7 DEFINITION OF TERMS

1.7.1 Divorce

Gabru (2004:2) defines divorce as a legal action between married people to terminate their marriage relationship. It can also be referred to as dissolution of a marriage contract and is basically, the legal action that ends the marriage before the death of either spouse.

1.7.2 Professional Nurse

In South Africa a professional nurse is a person registered with the South African Nursing Council who practices her profession for gain in any capacity that prescribes registration as a nurse as a pre-employment requirement. (Searle 2002:5). In this study, professional nurse refers to a divorced female professional nurse who is employed in the East London Hospital Complex.

1.7.3 Work Performance

Performance is a standard achieved by a person or group of people in carrying out a particular job or activity (Chambers & Macmillan 1996:711). In this study work performance refers to the duties and activities that are performed by professional nurses to render quality patient care.

1.7.4 Impact

Impact is something that occurs as a result of something or as a response to something (Chambers & Macmillan 1996: 485). In this study, impact of divorce on the work performance of divorced professional nurses means the effect that divorce has on their work performance

1.7.5 Care

Care is the activity of looking after someone or something, or the state of being looked after (Chambers & Macmillan 1996: 147). In this study, care refers to the activities rendered by the nursing professionals when looking after the patients.

1. 8 RESEARCH METHODOLOGY

1.8.1 Research Approach and Research Design

Polit and Beck (2008:765) define research design as the overall plan for addressing a research question, including specifications for enhancing the study's integrity.

A qualitative research paradigm which is explorative, descriptive and contextual was used to explore and describe the impact of divorce on professional nurses work performance.

Brink (2009:92) describes research design as the set of logical steps taken by the researcher to answer the research question. It forms the 'blue print' of the study and determines the methodology used by the researcher to obtain sources of information.

The researcher used the phenomenological approach of the qualitative paradigm. Phenomenology is defined as a science whose purpose is to describe particular phenomena or the appearance of things, as lived experiences (Streubert & Carpenter 2007:76). Burns and Grove (2005:55) also state that the purpose of phenomenological research is to describe and capture the experiences as they are lived. It is this lived experience that gives meaning to each individual's perception of a particular phenomenon and is influenced by everything internal and external to the individual.

1.8.2 Research Setting

The research was conducted in the East London Hospital Complex, which comprises Frere Hospital and Cecilia Makiwane Hospital. Cecilia Makiwane Hospital is a 700-bed hospital and Frere Hospital is an 800-bed hospital. There are about 700 Professional Nurses in the East London Hospital Complex.

1.8.3 Population

Brink (2009:123) defines population in research as the entire group of persons or objects that are of interest to the researcher, or that meets the criteria the researcher is interested in studying. The target population for this study was divorced female professional nurses in the East London Hospital Complex.

1.8.4 Sample and Sampling

A sample is defined as a subset of the target population. The researcher may decide to select a small proportion of this population from whom to collect data. Burns and Grove (2009b: 721) define sample as a subset of the population that is selected for a study. The sample size depended upon data saturation.

The researcher selected the sample of professional nurses who had divorced within the past 5 – 11 years working at the East London Hospital Complex.

Sampling refers to the researcher's process of selecting the sample from a population in order to obtain information regarding a phenomenon in a way that represents the population of interest (Brink, 2009:124). The researcher used purposive and snowball sampling methods.

1.8.5 Pilot Study

According to Burns and Grove (2009b:713) a pilot study is a smaller version of a proposed study, which is conducted to develop or refine the methodology. The purpose of a pilot study is to investigate the feasibility of the proposed study and to detect possible flaws in the data-collection, such as ambiguous instructions in wording, inadequate time limits and so on (Brink 2009:166).

A pilot study was conducted to test the worthiness of the study and to identify problems early in the study. The pilot study was conducted at Frere Hospital. The researcher used an interview guide which was used for the actual study. The questions were focused on

the views and lived experiences of female professional nurses regard to the impact of divorce on their work performance, their coping strategies and their support systems.

1.8.6 Data Collection

Data collection is defined as the precise, systematic gathering of information relevant to the research purpose or the specific objectives and questions of a study (Burns & Grove 2009b:695).

An interview guide was used to collect data. The participants were asked about their experiences regarding the impact of divorce on their caring role towards the patients or their work performance, coping strategies and support systems.

The researcher used an audiotape to record the interviews. Data was transcribed verbatim from the tape.

1.9 Ethical Considerations

Ethics is defined as the study of moral standards and how they affect conduct. Research designs should always reflect careful attention to the ethical issues embodied in research projects (Terre Blanche & Durrheim, 2004:65). The participants participated voluntarily in the research study and an informed consent form was signed by those who were willing to participate. Confidentiality and anonymity were maintained as the researcher did not use their names, but codes e.g. P1 (participant 1). Privacy was maintained. Permission for using audiotape was requested.

Permission for conducting the research was requested from the ethics committee of the Faculty of Science and Agriculture at the University Of Fort Hare, the Department of Health, Eastern Cape Province Research and Surveillance Department and the management of the East London Hospital Complex.

1.10 DATA ANALYSIS

Brink (2009:170) maintains that data analysis entails categorizing, ordering, manipulating and summarizing the data and describing them in meaningful terms. It is conducted to reduce, organize, and giving meaning to data (Burns & Groove 2009b: 695).

Data analysis was done concurrently with data collection. This was continued until there was no more new information reported. The transcriptions together with field notes were sent to “an independent coder” (Creswell 1994:158) for analysis. The coding process resulted to the emergence of themes. The researcher and the co-coder agreed on the categories, subcategories and the themes identified in the transcriptions. The researcher and the co-coder used a work protocol (Annexure F) to ensure the use of the same steps in analyzing the data.

1.10.1 Trustworthiness of The Study

Speziale and Carpenter (2007:49) state that the goal of rigour in qualitative research is to study participants’ experiences accurately. The researcher identified the following measures to demonstrate the trustworthiness of the research: Credibility (True-value), Transferability (Applicability), Dependability (Consistency) and Confirmability (Neutrality).

1.11 SUMMARY

In this chapter, the scientific foundation of the study was introduced with a brief description of the rationale and background, problem statement, purpose, objectives, research question, significance of the study, definition of terms, research methodology and ethical considerations. The next chapter addresses the literature review.

CHAPTER 2

LITERATURE REVIEW

2.1 INTRODUCTION

A literature review is conducted to generate an understanding of what is known about a particular situation or phenomenon and the knowledge gaps that exist. A literature search is a systematic and explicit approach to the identification, retrieval and bibliographical management of independent studies (usually drawn from published sources) for the purpose of locating information on a topic, synthesizing conclusions, identifying areas for future study and developing guidelines for clinical practice (Burns & Groove 2009b: 38 & 707).

For this research study, a cursory literature review before data collection was carried out to ensure the necessity of the study and the appropriateness of method selection. An in-depth literature review was conducted after data analysis to place the findings within the context of what is already known about the topic and to embed the findings (Speziale & Carpenter 2007:97)

The researcher performed a literature search on divorce as a phenomenon and its impact on those affected, nursing as a profession and the scope of practice of a professional nurse, impact of divorce on the work performance, coping strategies used by divorcees and support systems available for divorcees.

2.2 DIVORCE

2.2.1 Definition of Divorce

Divorce, or dissolution of marriage, is defined as a legal action between married people to terminate their marriage relationship before the death of either spouse (Gabru 2004:2).

2.2.2 Origin of Divorce

No one really knows the origin of divorce except that it is a human institution, and not part of God's plan for society (George 1993:42). Nevertheless its effects have been felt by many people in our society. In spite of George's view, other authors have identified heredity as the origin.

According to Johnson, Mc Gue, Krueger, and Bouchard (2004: 285), considerable genetic influence on the propensity to marry over the course of the life-span is found. Longitudinally, the genetic influences on getting married have been found to increase at midlife and then decrease in older adulthood.

Divorce, like marriage, has also been found to be highly heritable. Johnson et al (2004) identified that the proportion of genetics variance in the risk of getting a divorce is slightly greater than 50%, and also reported an increased risk of marital instability in offspring of divorced parents (intergenerational transmission). They found that up to 40% of the variance in the heritability of divorce is from genetic factors that affect the personality of one spouse.

2.2.3 Trends of Divorce

South Africans divorce within the first five to nine years of marriage and most of these divorces are initiated by women. South Africans are adjusting with regard to the roles of men and women in a marriage, as indicated by the following trends:

- The divorce rate is still escalating.
- Marriage, where one or both partners have been married before, is on the increase.
- Single-parent families are becoming fairly common.
- Partners live in different places during the week.

- The increasing number of women in the workplace is putting pressure to the dated concept of the woman as 'just a housewife'.

Traditional families and marriages are thus being compelled to change and adjust to new situation (Du Toit & Van Staden 2005:220).

In Korea, the highest percentage of married couples in their first marriage ended in divorce within 3-4 years of marriage. This can be due to the endeavour of remarried persons not to end their marriages even though they may not be happy with their married lives, since they are afraid that one divorce may be excused, but two divorces would make people believe them abnormal or pathological (Kim & Kim 2002:31-33).

The rise in divorce rates has been very pronounced in Europe since the 1960s. Virtually all European countries experienced less than 1.5 divorces per 1000 people in 1960 and many had divorce rates below 0.5. By 2002, most European countries had divorce rates around 2 per 1000 people or higher (Gonzalez & Viitanen 2009:127-128).

The divorce rate in the United States is the highest in the world as 50% of marriages end in divorce. 67% of all second marriages end in divorce (O'Connell Corcoran 1997: 4).

2.3 EFFECTS OF DIVORCE

2.3.1 Effects of Divorce in Families

In the aftermath of a divorce, one of the more unfortunate outcomes is that, one of the parents may become absent from the child's life. While there is nothing inherently "wrong" with single- parent family, it stands to reason that a child who suddenly goes from having

two parents to one parent will almost certainly feel the missing parent's absence acutely, especially if the transition is abrupt or lacking an explanation from one or both parents. A child in these circumstances may feel abandoned, unloved, or come to believe that there is something "wrong" with them that causes the other parent to go away (Cameron 2008:25).

In the study conducted on post-divorce family relationships as mediating factors in the consequences of divorce for children, the psychological structure of the family after divorce is seen as mediating the impact of divorce upon children. Divorce affects primary bonds with parents, presents challenges to conceptions of social reality and creates stress which interferes with normal development (Hess & Camara 2010:79).

The effects of divorce upon child behaviour (peer relations, stress, aggression, work effectiveness at school) were examined through a comparison of the behaviour of children in and analysis of the association between family processes and child outcomes in intact and divorced families. Family processes examined were the affective relationships between the father and mother, affective relationships between the child and each parent separately, for divorced families, and the amount of contact between child and non-custodial parent. For divorced and intact groups combined, the relationships among family members appear to have more potent influences on child behaviour than marital status. The negative effects of divorce are greatly mitigated when positive relationships with both parents are maintained. The child's relationship with the non-custodial parent (father) is as important as the continuing relationship with the mother. Implications for research and for public policy are discussed (Hess & Camara 2010: 79).

Amato and Sobolewski (2001:900) indicate that there are three pathways through which family disruption may affect the off-spring's well-being and these are: socio-economic attainment, marital and relationship stability and the quality of children's relation with

parents. Divorce appears to erode children's emotional bonds with fathers. Although good reasons for assuming that the quality of parent-child ties mediates some of the long-term negative effects of parent divorce, other studies do not consider this possibility.

2.3.2 Children

More than 1 million children experience the divorce of their parents. The process and trauma these children experience will normally begin long before there is an actual divorce. It will begin with parental disagreements and anger and continue to worsen throughout the divorce process and can often last for many years after the divorce is final. A 6-year follow up longitudinal study on effects of divorce on parents and children reveals that children in divorced families encountered more negative life changes than children in non-divorced families, and these negative life changes are associated with behaviour problems (Hetherington, Cox & Cox 1985: 518).

A comprehensive review of research from several disciplines regarding long-term effects of divorce on children yields a growing consensus, that significant numbers of children suffer for many years from psychological and social difficulties associated with continuing and/or new stresses within the post-divorce family. They experience heightened anxiety in forming enduring attachments at later developmental stages including young adulthood (Wallerstein: 1991:349).

It is also indicated by the participants that the children's health is also affected during the divorce process. Some of the children suffer from depression; others do not want to go to school because of headaches. The participants also fear for their children growing up in an unhealthy environment, which may affect them when they are adults.

According to Chandler (2006:3), people who have experienced high anxiety life events, such as divorce, develop problems during adolescence. When problems such as depression develop during adolescence, these problems persist into adulthood.

Individuals with divorced parents are at increased risk of experiencing psychological problems in adulthood. Although this tendency has been documented in many studies, the explanation for this phenomenon remains elusive. A few studies have considered the possibility that low education attainment or poor interpersonal skills may mediate the association between parental divorce and adult psychological wellbeing. Few studies have attempted to explain link between childhood family structure and adult psychological functioning.(Amato and Soboweski 2001:900)

The effects divorce can have on a child have long-reaching consequences, ones that may last even into adulthood. If the children's' emotional needs are not handled properly both during and after their parents' divorce, lingering feelings of anger, insecurity, alienation, abandonment, and confusion can even manifest into the children's' adult relationships and personal growth years, even decades, after the divorce itself takes place.(Cameron 2008:25).

National, longitudinal surveys from Great Britain and the United States were used to investigate the effects of divorce on children. In the British data, parents and teachers independently rated the children's behaviour problems, and the children were given reading and mathematics achievement tests. In the U.S. data, parents rated the children's behaviour problems. Children whose parents divorced or separated were compared to children whose families remained intact. For boys, the apparent effect of separation or divorce on behaviour problems and achievement at the later time point is sharply reduced by considering behaviour problems, achievement levels, and family difficulties that were present at the earlier time point, before any of the families had broken up. For girls, the

reduction in the apparent effect of divorce occurred to a lesser but still noticeable extent once pre-existing conditions are considered (Cherlin, Furstenberg, Chase-Lansdale, Kiernan, Robins, Morrison & Teitler 1991:1386).

2.3.4 Financial Effects

According to Cameron (2008: 29), both parents should realize that, although the marriage has ended, their fiscal commitment to their children has not. Regardless of one's feelings towards the unhappy ending of a marriage or one's bitter feelings towards an ex-spouse, no child deserves to languish in poverty as a result. Non-payment of child support may be intended as a "punishment" by the noncustodial parent towards their ex-spouse that unthinkingly and callously transfers, through no fault of their own, to the child. Stronger penalties should be issued by the states for wilful non-payment or evasion of child support.

Daniel (1994:23) reveals that the average monthly income of divorced women when compared with during marriage significantly decreases. This directly affects the standard of living and the adjustment after divorce. Post-divorce families usually suffer financially. Studies show that women experiencing divorce face roughly a thirty percent (30%) decline in the standard of living they enjoyed while married and men show a ten percent (10 %) decline.

2.4 IMPACT OF DIVORCE ON WORK PERFORMANCE

According to Walsh (2010:1), even if a person is glad about separation from the spouse and is looking forward to his/her divorce, he/she might still regret his/her decision when he/she goes through the strenuous proceedings in court. The hardships of divorce are certainly having a negative influence on personal, as well as professional, life. While family and friends may understand the pain and make allowance for the short comings, the individual may have to face entirely different and more difficult problems at work. People,

who have appreciated the work of a divorcee before, might turn out to be the worst critics when he/she feels devastated. When a divorcee is going through the divorce, he is almost certainly bound to be disturbed by it. It is natural for work performance to take a dip, due to the worries and disturbed mind. From the perspective of the management, the divorcee has to suffer a lowered productivity from his end. Divorce might be a one-time affair for him/her. With over fifty percent (50%) of marriages ending in a divorce, there might be many such people in the organization who are going through a similar bad patch.

Legal proceedings are time-consuming and can even take years to complete especially in the case of a contested divorce. It can be difficult for the prospective divorcee to spend time on litigation and contribute to work simultaneously. There are statistics to prove that a person is more susceptible to bad habits such as drinking and drugs after a divorce. This would naturally have a serious impact on his professional life and can even render him jobless. If the couple work in the same institution/company, frequent encounters between them would bring back feelings of pain and anger making it difficult to concentrate on their work. According to the study on the effects of major depression on moment-in-time work performance, major depression is thought to have substantial negative effects on work performance. Major depression is the only condition significantly related to decrements in both of the dimensions of work performance assessed in the diaries: task focus and productivity. These effects are equivalent to approximately 2.3 days absent because of sickness per depressed worker per month of being depressed. Productivity losses related to depression appear to exceed the costs of effective treatment (Wang, Beck, Berglund, McKenas, David, Pronk, Simon & Kessler 2004: 1885).

Divorce can affect job performance in many ways both for good and ill. Work can provide much needed stability when everything else in the life of a divorcee is changing. For a divorcee, the job can be the means of surviving the tragedy of divorce and emerging stronger for the experience (Collins 2010: Online).

Smallwood, a workplace psychologist, states that the process of getting divorced is an emotional roller coaster, and that impacts peoples' ability to be mindful on the job. When

people are distracted, they make more mistakes and work more slowly. If they are feeling depressed, their creativity will be down. If they are feeling angry, they may project some of that anger on to co-workers or even customers (Andrews 2005: Online).

2.5 NURSING AS A PROFESSION

The South African Nursing Council governs the nursing profession in South Africa. The Nursing Act, 2005 (Act no 33 of 2005) regulates the nursing and midwifery profession to ensure safe and quality nursing practices.

Nursing has always been regarded as a noble profession of caring and dedication to the alleviation of human suffering with ever-increasing world-wide focus on good health. The nursing community plays a vital role in controlling diseases and providing comprehensive care to the patient.

According to Searle (2002:250), nursing is also a risk-laden profession which should be practiced only by persons who have the insight, knowledge, skill and integrity to act responsibly so that the patient may, at all times, be safe in their hands.

Working female professionals constitute by far the largest group in the nursing profession. These nursing professionals experience the same problems that ordinary working women experience, as well as the tremendous physical and emotional burden any career entails. Such problems include difficulties in the husband-wife relationship, since the husband has to accommodate a nurse's irregular working hours or night duty. The husband is also obliged to help with the children and household chores. The responsibility of managing a home remains largely with the wife, however. This frequently leads to stress. The husband

may also feel burdened because he has to deal with tasks that do not form part of his traditional role (Du Toit & Van Staden 2005:222).

2.6 SCOPE OF PRACTICE OF A PROFESSIONAL NURSE

The scope of practice refers to the regulated responsibilities and roles of the nursing practitioner within a specific country (South Africa). It authorizes practitioners to undertake and perform certain interventions, activities and engagements in accordance with their competencies, level and other regulatory requirements. The regulations relating to the scope of practice of persons who are registered or enrolled under the Nursing Act of 1978 are relevant until they have been repealed. The regulations focus primarily on the principles of scientific based nursing care. The nursing care includes the following: assessment, diagnosis, nursing regimen and execution of the nursing regimen, continuous monitoring of progress and compliance with the stated expected outcomes, provision of the patient's basic healthcare needs and the prevention of illness and promotion of health, including communication, health education, guidance and advocacy (R2598 of 30 November 1984).

Decision making and problem solving are management abilities that are applied by the professional nurse on a daily basis. These are purposeful functional management processes whereby the nursing practitioner selects the most suitable alternative for the solution of a problem, implements it and evaluates the consequences thereof (Muller 2009:191).

Nurses are, by law, expected to render safe and quality nursing care to their patients (Nursing Act, 33 of 2005). The performance of a professional nurse is therefore very important. A nurse is expected to be mentally stable, responsible and accountable for

rendering high quality care of the patient. Professional nurses are high performing, independent practitioners.

According to the Charter of Nursing Practice (2004: 32), the professional nurse should be accountable. Accountability implies that the nursing practitioner should accept and demonstrate accountability and responsibility for own professional judgment and actions. The patient expects quality nursing care and the nurse should possess all the necessary abilities to perform any nursing interaction. The employer expects quality nursing care in a cost-effective manner, in accordance with the service agreement between the employer and employee. As an individual member of the multi-professional health team in the health care service, the professional nurse is therefore personally accountable for her/his acts and omissions (Muller 2009:32-36).

Nursing as a career also demands a great deal from married nursing professional, for example, up-to-date knowledge of the latest scientific developments in the nursing and medical field to be able to render high quality nursing care. The nursing professional must undergo in-service training, continuing education, attend workshops, seminars and lectures by medical representatives to improve her knowledge, skills and qualifications. She should be willing to work overtime when necessary. This involves more time away from the family and, controversially, more money from the family income.

Nurses are professionals, independent, and no longer dependant on their spouses for living, financially and otherwise. They are then more empowered to make informed decisions regarding their lives. The emancipation of women and the need for their contribution in the workplace have redefined the role of women in society. The single lifestyle is becoming more and more popular, and single parenthood has also become acceptable. The growing presence of women in the workforce makes them less dependent

on men. Nursing as a full time occupation demands time and energy (Du Toit & Van Staden 2005: 219 - 222).

2.7 SUPPORT PROGRAMS

An Employee Assistant Program is provided by the Department of Health of the Eastern Cape Province to all institutions. This programme caters for all categories of staff. The purpose of this programme is to provide cost effective and efficient employee wellness interventions that will improve the employee's quality of life, by empowering employees with life skills and providing professional assistance through free, short term counselling to those employees whose personal and work related challenges may have affected their work performance, or have the potential to do so.

The objective of this program is to create a supportive and safe work environment to ensure the success of the Eastern Cape Department of Health in providing improved services to its clients. The provision of the program is as follows: Employees must be assured that they will at all times be treated with dignity, and as adults in the workplace, enjoy a healthy and safe work environment and receive compensation against occupational injuries and diseases. It also provides professional and confidential assistance to the employees.

There are two types of referrals, that is voluntary and supervisory referrals. Voluntary referral is where employees who suspect that they have a problem, which is affecting their job performance, are encouraged to contact the EAP (Employee Assistant Program) coordinator directly for assistance. Supervisory referral is where an employee's job performance falls below the acceptable level or his attendance is unsatisfactory and the employee fails to improve despite normal intervention being taken. This employee then needs management intervention (Employee Assistance Programme Policy: 2006).

2.8 COPING STRATEGIES

In a longitudinal study on stressful life events, psychological distress, coping and parenting of divorced mothers, three coping strategies were studied as moderators of the relationship between distress and parenting. The results showed that both major and small events have significant effects on parental distress, with the effects of daily negative events being greater than those of major events. Parental distress mediates the relationships between stressful life events and parental acceptance of their children's behaviours. Parental coping strategies moderate the relationship between mothers' psychological distress and mothers' discipline practice (Tein, Sandler & Zautra 2000:27).

According to (Shaw 2009: Online). any different emotions and feelings will arise in response to divorce from anger, regret, fear, despair, anxiety, frustration and distrust to feelings of relief and new beginnings. All the emotions should be recognised as real, and all the feelings a person has should be seen as valid. The author further suggests that it is how these emotions and feelings are dealt with, that will determine how a person survives a divorce. Shaw also advises that people experiencing divorce seek support from others, as well as a forum to express feelings - whether it is with a pastor, support group, close friend, counsellor or therapist.

The results of a study on adaptation to divorce revealed that interpersonal and familial problems have a major effect on mood state. The post-divorce adjustment factors include social activities, expressing feelings and developing autonomy. Divorced people are consistently represented in psychiatric populations (Bloom 1975 & Crago, 1972, as cited by Berman & Turk, 1981: 179). Some of them seek pastoral counselling or other less formal interventions. They are more likely to develop physical illnesses and have higher morbidity rates than comparable married people. Awareness of the extent of the impact of divorce on the individual and on society results in increasing interest in ways of controlling

and minimizing the disruptive experiences of the divorcing adult. Preventive intervention programs that are well thought of, economically feasible and based on the difficulties confronted the population are recommended (Berman & Turk, 1981:179).

A study on post-divorce adjustment examined the effects of a group intervention program designed to teach coping skills to recently separated and divorced adults. Twenty-four participants were randomly assigned to a program group (n = 12) and a wait list control group (n = 12) and were administered the Personal Orientation Inventory, the State-Trait Anxiety Inventory, and the Beck Depression Inventory. The experimental group began an eight session program designed to help group member's deal with post-divorce trauma. Each session included an opportunity for individuals to present specific difficulties or issues. Topics covered in the sessions included stress management, stages of uncoupling, communication skills, relationships with ex-spouses, relatives and friends, legal issues, children and divorce, loneliness and depression, dating and sexuality. Overall results indicated that the intervention program promotes reduced depression and anxiety, greater ability to live in the present, greater independence, more spontaneity, and an increase in the experimental subjects' ability to form meaningful relationships (Lee & Hett 1990:1).

Carver, Scheier and Weintraub (1989: 267) conducted a study on assessing coping strategies through a theoretically based approach. They developed a multidimensional coping inventory to assess the different ways in which people respond to stress. They measured conceptually distinct aspects of problem-focused coping (active coping, planning, suppression of competing activities, restraint coping, seeking of instrumental social support); aspects of what might be viewed as emotion-focused coping (seeking of emotional social support, positive reinterpretation, acceptance, denial, turning to religion); and coping responses that arguably are less useful (focus on and venting of emotions, behavioural disengagement, mental disengagement). The reports revealed correlations between the various coping scales and several theoretically relevant personality measures in an effort to provide preliminary information about the inventory's convergent and discriminant validity.

Hetherington (1979: 851) states that, it is contended that much of the confusion in studying the impact of divorce on children has been a result of a failure to view divorce as a process involving a series of events and changes in life circumstances rather than as a single event. At different points in this sequence, children are confronted with different adaptive tasks and will use different coping strategies. The diversity in children's responses to divorce, in part, is attributable to temperamental variables, past experience, and the child's sex and developmental status. In understanding the child's adjustment to divorce, it is important to look not only at changes in family structure, but also at changes in family functioning and at stresses and support systems in the child's extra familial social environment.

2.9 SUMMARY

This chapter explored existing literature on divorce as a phenomenon and its impact on those affected, nursing as a profession and the responsibilities of a professional nurse, impact of divorce on the work performance, coping strategies used by divorcees and support systems available for divorcees. The next chapter presents the research methodology followed in this study.

CHAPTER 3

RESEARCH METHODOLOGY

3.1 INTRODUCTION

Chapter 3 outlines the research methodology applied during this study. Included is a discussion of the research design, the research problem, the study population, the sampling procedure, data collection methods, ethical considerations and data analysis.

3.2 RESEARCH APPROACH AND RESEARCH DESIGN

Polit and Beck (2008:765) define research design as the overall plan for addressing a research question, including specifications for enhancing the study's integrity. Brink (2009:92) describes research design as the set of logical steps taken by the researcher to answer the research question. It forms the 'blue print' of the study and determines the methodology used by the researcher to obtain sources of information.

A qualitative research paradigm which was explorative, descriptive and contextual was used to explore and describe the impact of divorce on professional nurses work performance.

In this study, the researcher used a qualitative approach as it would give the participants an opportunity to express their views or concerns on the impact of divorce on their work performance/caring role. The participants were allowed to express themselves in a manner which would reveal the real situation. The participants were able to express lived experiences of being divorced and how this impacted on their work performance.

The researcher focused on the experiences, feelings and views of divorced professional nurses. The participants were encouraged to describe their world in their own terms. An attempt was made to understand the impact of divorce on work performance of divorced professional nurses' experience from the subjective perspective of the individuals involved, because the complexities, richness and diversity of their lives could only be captured by describing what really goes on in their everyday lives, incorporating the context in which they operate (Mouton 2008:194-195).

The researcher used the phenomenological approach of the qualitative paradigm. Phenomenology is defined as a science whose purpose is to describe particular phenomena or the appearance of things, as lived experiences (Streubert & Carpenter 2007:76).

Burns and Grove (2005:55) also state that the purpose of phenomenological research is to describe and capture the experiences as they are lived. It is this lived experience that gives meaning to each individual's perception of a particular phenomenon and is influenced by everything internal and external to the individual.

In this study, the participants as divorced professional nurses described how divorce impacts on their work performance. Lived experience of the world of everyday life is the central point. In other words, it is the lived experience that presents to the individual what is true or real in his or her life (Streubert & Carpenter 2007:76)

3.3 RESEARCH SETTING

The research was conducted in the East London Hospital Complex, which comprises Frere Hospital and Cecilia Makiwane Hospital. Cecilia Makiwane Hospital is a 700-bed

hospital and Frere Hospital is an 800-bed hospital. There are about 700 Professional Nurses in the East London Hospital Complex.

3.4 POPULATION

Brink (2009:123) defines population in research as the entire group of persons or objects that are of interest to the researcher, or that meets the criteria the researcher is interested in studying. Population is also defined as all elements (individuals, objects, events, or substances) that meet the sample criteria for inclusion in a study, sometimes referred to as a target population (Burns and Grove 2009:714)

The target population becomes the population of interest from whom the data can potentially be collected (Parahoo, 2006:257).The target population for this study was all divorced female professional nurses in the East London Hospital Complex.

3.5 SAMPLE AND SAMPLING

A sample is defined as a subset of the target population. The researcher may decide to select a small proportion of this population from whom to collect data. Burns and Grove (2009b: 721) defined sample as a subset of the population that is selected for a study.

The researcher selected the sample of professional nurses who had divorced within the past 5 – 11 years working at the East London Hospital Complex.

Sampling refers to the researcher's process of selecting the sample from a population in order to obtain information regarding a phenomenon in a way that represents the population of interest (Brink, 2009:124). The selection method is called sampling (Parahoo, 2006:258). Sampling is the selection of groups of people, events, behaviours, or

other elements with which to conduct a study (Burns & Grove 2009b:721). The researcher used purposive and snowball sampling methods.

Qualitative researchers often use non-probability sampling because, according to them, the purpose of qualitative research is to contribute to an understanding of the phenomena. They therefore choose the sample which can best provide the required data, whatever the sampling method is.

The purposive and snowball sampling as non-probability sampling techniques was used to sample the participants. It gave the researcher autonomy to deliberately choose the participants to include in the study.

According to Brink (2009:134), snowball sampling involves the assistance by study subjects in obtaining other potential subjects, especially where it is difficult for the researcher to gain access to the population. Firstly, the researcher identified a few people by communicating with divorced professional nurses that were known to the researcher. Who further referred the researcher to the other professional nurses who had the required characteristics. They then helped her to identify more people who also possessed the desired characteristics. The sample for the study consisted of 12 participants. The process continued until the researcher was satisfied that the sample was sufficiently large and the themes began repeating or reached saturation.

Data was collected until the researcher believed that saturation was achieved, that is when new themes or essences emerged from the participants and the data were repeating. Therefore predetermination of the number of participants for a given study was impossible (Speziale & Carpenter, 2007:95).

3.6. INCLUSION CRITERIA

Participants that were included in the study were female professional nurses who had been divorced for the past 5 – 11 years. The researcher managed to get only four (4) participants that were divorced for the past 5 years as per proposal. Data was not saturated and the researcher continued to interview participants who had divorced for up to eleven (11) years.

Divorced professional nurses were the participants in this research study. The reason for using professional nurses as participants included that performance of a professional nurse is important in the quality of nursing care rendered. Professional nurses are independent practitioners who are responsible and accountable for their acts and omissions. Therefore they are expected to be competent, stable and perform at a high level for the quality care of the patients.

3.7. EXCLUSION CRITERIA

Male professional nurses were excluded because most professional nurses are female.

3.8 PILOT STUDY

According to Burns and Grove (2009b:713), a pilot study is a smaller version of a proposed study, which is conducted to develop or refine the methodology. Terre Blanche and Durrheim (2004:70) further add that a pilot study also helps to identify potential problems with the design, which can thus be rectified before the actual study is carried out and enhance cost effectiveness.

The purpose of a pilot study is to investigate the feasibility of the proposed study and to detect possible flaws in the data-collection, such as ambiguous instructions in wording, inadequate time limits and so on. The time and effort expended in conducting a pilot study

will be well spent, as pitfalls and errors that may prove costly in the actual study can be identified and avoided (Brink 2009:166).

A pilot study was conducted to test the worthiness of the study and to identify problems early in the study. The pilot study was conducted at Frere Hospital. The researcher decided to use Frere Hospital because it was a convenient, financially cost effective and less time consuming location. The researcher used an interview guide. The questions focused on the views and experiences of the participants with regard to the impact of divorce on their work performance, their coping strategies and their support systems. The probing questions depended upon the participants' responses. The participants for the pilot study did not participate in the actual study. The researcher followed all the steps of the research process up to the findings. By doing so the researcher had the opportunity to detect possible flaws in the interview guide. The pilot study assisted the researcher in mastering interviewing skills.

3.9 RESEARCH INSTRUMENT

An interview guide was used to collect data from the participants. The guide consisted of two sections. Section A with demographic data. The data included age, name of institution in which the participant was working, work experience as a professional nurse and duration of divorce. Section B. consisted of questions which focused on the experiences of professional nurses with regard to the impact of divorce on their work performance, their coping strategies and their support systems.

The following questions were asked:

- Tell me about your views and experiences of divorce?
- May you please tell me how did divorce impact on your performance?
- How did you cope with divorce?

- Did you utilize any support systems from your institution?

Probing questions were guided by the responses from the participants.

3.10 DATA COLLECTION

Data collection is defined as the precise, systematic gathering of information relevant to the research purpose or the specific objectives and questions of a study (Burns & Grove 2009b:695).

Brink (2009:141) states that the data-collection procedure and techniques are planned as part of the research design. The process of data collection is of critical importance to the success of a study. It is essential that the researcher is familiar with the various data-collection techniques, including their advantages and disadvantages, so that he/she can select the most suitable technique for the study purpose, the setting and the proposed study population.

An interview guide was used to conduct the interview (See Annexure E). The interview was guided by the responses of the participants where probing questions were used. The participants were asked about their experiences regarding the impact of divorce on their caring role towards the patients or their work performance. The number of participants was determined by the evidence of repetition of discovered information and confirmation of earlier data saturation (Streubert & Carpenter, 1995:24).

The researcher interviewed twelve (12) participants. The questions which focused on the lived experiences of professional nurses with regard to the impact of divorce on their work performance, their coping strategies and their support systems were asked. Follow up questions were guided by the responses of the participants.

The researcher used an audiotape to record the interviews, after the participants had expressed no problem with the use thereof or the taking of notes (observational, theoretical, methodological and personal). Data was transcribed verbatim from the tape.

A working relationship with the participants was developed. Phenomenological reduction or bracketing was used during the interview process (Streubert & Carpenter, 1995:44).

Trust and rapport was attained by using effective communication skills, empathy, congruence and genuine acceptance. The interview was conducted in the familiar atmosphere of the participants' workplace; thus genuine cooperation was more easily obtained.

3.11 ETHICAL CONSIDERATIONS

Ethics is defined as the study of moral standards and how they affect conduct. Research designs should always reflect careful attention to the ethical issues embodied in research projects (Terre Blanche & Durrheim, 2004:65). Ethical considerations were implemented throughout this study. According to Burns and Grove (2007:156), ethical issues must be considered in presenting research sources, e.g. contents from studies must be presented honestly, without distortion, to support evidence. Ethical concerns should thus be an integral part of the planning and implementation of research (Terre Blanche & Durrheim, 2004:65).

The participants voluntarily participated in the research study and an informed consent form was signed by those who were willing to participate. The participants were informed that the purpose of the study was to investigate the impact of divorce on their work performance. They were told that they were expected to participate in interviews. They were given an opportunity to discuss the venue and time with the researcher. They were

made aware of the fact that they had the right to withdraw at any time without repercussion or penalty.

Confidentiality and anonymity were maintained as the researcher did not use their names, but codes e.g. P1 (participant 1). There were no risks for the study since the participants were expected to share their personal experiences of the impact of divorce on their work performance. Since talking about divorce may evoke negative emotions in some individuals, the researcher made provision to refer such participants to the psychologists in the Complex for further management. Privacy was maintained during the interviews. The researcher made the participants aware of the fact that the interview would be tape recorded and the name would not be attached to the interview. Permission to use audio tapes was requested from the participants.

Although this study would not benefit the participants financially, their input would contribute to the improvement of support for divorcees in the workplace as well as improvement on the quality of patient care.

Permission for conducting the research was requested from the ethics committee of the Faculty of Science and Agriculture at the University of Fort Hare, the Department of Health, Eastern Cape Province Research and Surveillance Department and the management of the East London Hospital Complex in which the participants worked. See Annexure (.A, B and C)

3.12 DATA ANALYSIS

Brink (2009:170) maintains that data analysis entails categorizing, ordering, manipulating and summarizing the data and describing them in meaningful terms. It is conducted to reduce, organize, and giving meaning to data (Burns & Groove, 2009b: 695).

Data analysis was done concurrently with data collection. This continued until there was no more new information reported and there was redundancy as well as theoretical saturation (Lincoln & Guba, 1985: 201). The methods suggested by Sandelowski (1995:182) for proof reading the transcripts was used. The audiotape interviews were listened to repeatedly, to compare them with the transcriptions. During this process, key phrases were pointed out and sentences and feelings expressed by the respondents were noted. After proofing the transcripts, information was sorted into categories to form a story (Creswell 1994:153). Tesch's steps (1990) of analyzing qualitative data guided the data analysis process.

Creswell (1994:155) outlines the steps as:

- Getting a sense of the whole by reading through all the transcriptions carefully and jotting down ideas.
- Picking the most interesting interview and considering its content.
- Categorizing topics as major, unique and "leftovers" abbreviating the topics as codes and writing the codes next to the appropriate segments of the text, and then trying out this preliminary organizing scheme to see whether new categories and codes emerge.
- Finding the most descriptive wording for the topics and turning them into categories and grouping topics that relate to each other in order to reduce the total list of categories.
- Make a final decision on the abbreviation of each category and placing codes in alphabetic manner.
- Assembling the data belonging to each category in one place and perform a preliminary analysis.

Field notes were expanded by transforming shorthand into narrative and elaborating on non-verbal observations made during the interviews. All expanded notes were then transcribed and typed into a computer for analyses. Analyses included careful checking of all data collected as well as attentive listening and analyses of the audiotape. The transcript was read through thoroughly with the aim of interpreting the responses of the

participants. The qualitative feedback of the participants was interpreted by identifying themes in response to each question asked by the researcher. The researcher was guided by the supervisor in this process, in order to enhance the trustworthiness of the themes identified.

The transcriptions together with field notes were sent to “an independent coder” (Creswell 1994:158) for analysis. The coding process resulted in the emergence of themes. These were refined during the consensus discussion with the co-coder. The researcher and the co-coder agreed on the categories, subcategories and the themes identified in the transcriptions. The researcher and the co-coder used a work protocol (Annexure F) to ensure the use of the same steps in analyzing the data thereby adding to the trustworthiness of the study.

3.13 TRUSTWORTHINESS OF THE STUDY

Speziale and Carpenter (2007:49) state that the goal of rigour in qualitative research is to study participants’ experiences accurately. The author identified the following measures to demonstrate the trustworthiness of the research: Credibility (True-value), Transferability (Applicability), Dependability (Consistency) and Confirmability (Neutrality).

3.13.1 Credibility (True-Value)

Speziale and Carpenter (2007:49) state that credibility includes activities that increase the probability that credible findings will be produced.

The researcher ensured that the truth, of the experiences of the impact of divorced professional nurses with regard to their work performance, was uncovered. This was achieved through being immersed in the setting for a prolonged period, conducting interviews, observing and taking field notes with each participant. The researcher took the

themes that emerge from the study to the participants for member- check to increase the credibility of the study.

3.13.2 Transferability (Applicability)

Speziale and Carpenter (2007:50) state that transferability refers to the probability that the study findings have meaning to others in similar situations. The researcher enhanced the transferability of the study by safeguarding all data transcripts, analyzed data records, cassettes and the independent coder's analysis and consensus discussion records. The researcher provided this data base to make transferability judgment possible on the part of potential supplies.

3.13.3 Dependability (Consistency)

According to Brink (2009:119), dependability is a further criterion listed by Lincoln and Guba (1985) to establish the trustworthiness of the study. This requires an audit. The enquiry auditor or a peer followed the process and procedures used by the researcher in the study to determine whether they were acceptable.

To adhere to the dependability requirement, the researcher conducted a pilot study and interviewed several participants until saturation of data was reached, when the same themes started reappearing in the data.

3.13.4 Confirmability (Neutrality)

According to Brink (2009:119), confirmability guarantees that the findings, conclusions and recommendations are supported by the data and that there is internal agreement between the investigator's interpretation and the actual evidence. This is also accomplished by incorporating an audit procedure. The researcher maintained the confirmability of this study by taking notes throughout the research process, ensuring that the data were accurately interpreted which reflected the data that were obtained from the participant.

3.14 SUMMARY

This chapter presented the research methodology. For the purpose of this study, Qualitative research by means of interviews was considered an appropriate method for gaining insight in the impact of divorce on work performance of professional nurses.

CHAPTER 4

RESULTS

4.1 INTRODUCTION

In this chapter the researcher has discussed the research findings, which include the demographic data of the participants and themes that emerged from data analysis.

4.2 PARTICIPANTS' DEMOGRAPHIC DATA

This study had a total of twelve (12) participants. These were all females who worked at the complex comprising Frere Hospital and Cecilia Makiwane Hospital. Their ages ranged between 42 and 61. Two of them were 60-61 years old.

Their years of experience as professional nurses ranged from 4 to 29years. The duration of divorce ranged from 5years to 11yrs.

4.3 THEMES THAT EMERGED FROM THE DATA ANALYSIS

Four main themes emerged from data analysis: (1) Experiences of divorce of professional nurses, (2) Impact of divorce on professional roles and work performance, (3) Coping strategies (4) Support systems in the workplace.

The themes were further classified into categories and sub-categories as indicated in the table below;

Table 4.1 Themes, categories and subcategories regarding the impact of divorce on work performance of professional nurses.

Number	Main Theme	Categories	Subcategories
1	Experience of divorce of professional nurses	Emotional Impact	Losing self-worth Loss of dignity Humiliation Denial Guilt Blame Crying Anger Traumatized Pain Rejection Failure Accusation Misunderstanding Interpersonal relations Non acceptance Overwhelmed
		Physical impact	Fights and conflicts
		Social impact	Depression Loneliness Desertion Abandoned Isolation

			Relationship Unfaithfulness Stigma
		Financial impact	Loss of resources e.g. a house, insurances
		Impact on the children	Desertion Abandonment Stigma
		Impact on health	Hypertension Depression
2	Impact of divorce on professional roles and work performance	Lack of motivation Under performing Burnout Distracted Unsupported	Comfort zone Lack of focus Overwhelmed
3	Coping strategies regarding divorce	Self-coping mechanisms	Channelled frustration by studying Accepting reality hope Self rediscovery Talking to everyone
		Community involvement	Joined support groups
		Religion/Christianity	Prayer Church activities Support groups

4	Support systems in the work place and others.	Family support Religious support Support groups	Availability or Non availability Employee assistant programmes Prayer Church activities Support from colleagues and friends
---	---	---	--

This study was conducted in order to explore and describe the impact of divorce on professional nurses work performance in the East London Hospital Complex.

4.3.1 Experiences of Divorce of Professional Nurses

Most of the participants presented with different experiences, though there were some commonalities. The most marked common factor was a relationship that broke down which was characterized by emotional impact, physical impact, financial and social impact, as well as impact on children and health of the divorced professional nurses.

4.3.1.1 Emotional Impact

During the interviews it emerged that all the professional nurses felt that going through the process of divorce can be a very traumatic experience. What they could not cope with was emotional abuse. The pain, the hurt, the anger and the humiliation were unbearable. The following extracts were expressed by various participants who experienced the emotional impact they suffered, because of divorce.

“Divorce is very traumatic. It is a little bit worse than death because death is final. With divorce a person goes on with their life. It is a devastating experience - first you get mixed feelings; your emotions are all over the place.”

“Was very traumatized, very hurt I felt suicidal, I felt like it was the end of the world, I felt like ‘Oh God - why this is happening to me?’”

“I had a total nervous breakdown. I remember the day when I had to write out the off duty schedules, I could not even hold a pen in my hands. I just simply couldn’t write. I was tired every day when I had to go and work, because I couldn’t sleep at night for days. Was tired and exhausted, I could not remember everything I used to forget things. My work speed was affected. I had to read patients notes repeatedly so that I could remember when handing over. I was not completely focused on my work, I could not do my work to the fullest.”

4.3.1.2 Left with Feeling of Being a Failure

Some of the participants felt that they had failed in life, because their marriages had failed. They started blaming themselves for the breakdown of their marriages. They started blaming themselves for a marriage that did not work. Below are some responses relating to this:

“You tend to blame yourself. You see yourself as a failure, because my marriage did not work, something that I didn’t see coming, a lot of accumulation of events that affects you emotionally and tear you down. I felt like I was being ripped off, of myself, myself within a marriage, I was doing what I thought was right at that time and it didn’t work and that also added to those feelings of failure you know?”

4.3.1.3 Self-Blame

The research participants started blaming themselves for the broken marriage. They started looking for faults. They felt that they were a part of the failure of their expectation of marriage has failed and they were part of it.

“I started looking at myself for faults of my broken marriage. I thought that it was my fault. I asked myself the question what was the reason why my husband decided to look for another woman? I feel like I failed, like something that was my expectations of marriage have failed and I had a part in it”

“Violence, the violence got to me so bad, I always used to blame myself for it. He used to “donner me”. He dragged me in the street. I still had to go to work the following day. My friends took me to a women’s support group He would eventually kill me”

4.3.1.4 Self-Rejection

Some of the participants felt rejected and humiliated by their spouses’ infidelities. They could not understand why their spouses would prefer to be with another woman. These participants were professionals and educated individuals. This made it very difficult to understand why they should be rejected. Nurses hold an esteemed position in our society and are highly respected in our communities; the perceived shame of going through a divorce became even more unbearable. The fact that HIV/AIDS is very prevalent today also contributed to their ultimate decision. Below are some responses from the participants relating to this.

“I felt rejected and helpless. I saved myself for the man that I was going to marry one day. He was my first sexual partner, he will put a crown on my head, If I get married one day it will be for keeps, the effects of divorce is like a roller coaster of

emotions up and down but you have to be strong and I got tired of being strong, I got tired of been the strong one in the family”

“He said I don’t know why are you still here you can’t see that I have been chasing you a away, this is my house I can’t stay with somebody who cannot give me a child I want to take another wife, the physical abuse was worse many times I was disfigured but believed in the old saying till death do us part”

4.3.1.5 Hurt/ Scarred

The participants referred to the difficulties in divorce and the devastating emotional consequences, as well as the sense of betrayal or violation at the breaking of marriage VOWS.

“I was free but so sad as easy as it is not just like something getting into the door and get out it leaves scars I have lost something, you are lost in the world and the man you trusted, the one you stood in front of the alter where you made an oath that we will remain faithful to each other, he didn’t do this things that he promised, this marriage was a joke for him”

4.3.1.6 Not Worthy

Most of the participants expressed feelings of not being worthy. Some felt that they were nothing; they did not know how to face the community at large, their children, their families, the church and their colleagues. They said that they had lost their self-worth and their self esteem.

“You feel so small and ashamed, what’s going to happen with my child and cried and cried and cried and cried allot, I saw myself as nothing, “You don’t feel worthy when you are going through that as a person you feel your self esteem gets a good knock your self esteem is broken down”

4.3.1.7 Felt Humiliated

The research participants pointed out that they felt so humiliated during the divorce proceedings..

“Someone can make a hole and bury me there. I felt as if I was in a hole and wrestled with myself... someone can make a hole and bury me there. I felt as if I was in a hole and wrestled with myself. It is better to see your husband dead than going through a divorce, divorce is like a cancerous sore that does not heal.”

4.3.1.8 Physical Impact

It evolved from the findings that some of the participants were physically abused; some even disfigured because of the abuse. All of these things happened in the presence of the children. Sometimes these incidences happened when the spouse was under the influence of drugs and alcohol and some participants had to call the police for assistance.

“He was violent that I never seen. I don’t know if he smoked dagga but he came back as somebody I did not know. He wanted to kill me - it was only two of us but if I was not strong... as tiny as I am... I had to bite him and push him and lock myself in the room. It was at night, I am giving up because this man is going to kill me,”

4.3.1.9 Social Impact

This findings of the study showed that the affected participants suffered some depression which lead to various kinds of behaviour and tendencies, for instance some were put on psychiatric treatment, some of the participants suffered from depression as results they were scared to mix with people.

“Something that was too glaring in my life was loneliness - having a companion and not having a companion. I had something that I can personally call as, as intellectual or academic depressions. I felt alone, I felt that I have lost my self-

esteem. Feeling lonely and alone, you do not know how to face things; you do not know how to face people”.

4.3.1.10 Suicidal Tendencies

It also evolved from the findings that one of the participants developed suicidal tendencies hence the following:

“I had a total nervous breakdown I could not completely focus on my work. I could not do my work to the fullest. I was suicidal at one stage. Nobody knows about it. At home I felt so bad because I thought maybe my kids will be better without me”

4.3.1.11 Loneliness

The research participants indicated that what was glaring in their life was loneliness. They felt alone they felt that they have lost their self esteem. It was difficult for them to face people.

“Something that was too glaring in my life was loneliness - having a companion and not having a companion. I had something that I can personally call as, as intellectual or academic depressions. I felt alone, I felt that I have lost my self-esteem. Feeling lonely and alone, you do not know how to face things, you do not know how to face people, you are just hurt and traumatized and all you want to do you just want to bury yourself in something, you are lonely maybe I should have stayed.”

4.3.1.12 Labelled

Participants highlighted that divorced people are labelled. They suggested that if you are divorced, you cannot advise a young girl who is going to get married because your marriage has failed. They said that they were actually excluded from those discussions. Losing married friends was also indicated as a known phenomenon. They also mentioned

that, as a divorced person, you become a threat to your married friends and end up making new friends.

“Lifestyle changed when I found the Lord the friends I had before are not like my friends anymore, my circle of friends have changed I do not have friends actually now”.

“Once your marriage is broken they do not see you as that woman that has managed to endure all the ups and downs of marriage, a stigma was just a process in my life and I tried to destigmatise.”

4.3.1.13 Marginalised

One of the research participants said that she had to leave her church because she was judged. Divorce was regarded as a sin in her church, even if the marriage so she joined another church.

“During my divorce process... this separation of divorce... I had to move out of my church. I was already born again Christian but in that church I was judged because I was not supposed to get out of that marriage even if the kettle is boiling”

“Once your marriage is broken they do not see you as that woman that has managed to endure all the ups and downs of married life never a stigma it was just a process in my life and I tried to destigmatise”

4.3.1.14 Financial Impact

The consequence of divorce led to a huge financial decline for most of the participants interviewed. Married people become dependent on two salaries, but normally divorced people end up having to carry the financial burden solely, especially if the former spouse is unemployed or has an estranged relationship with the partner and the children. In some

instances, participants received maintenance on an ad hoc basis. They reflected that their standard of living dropped because they could not meet the needs of the family. Many necessities are done away with in order to ensure the survival of the family and the ongoing care of the children. Some of the participants had to leave their homes and find alternative accommodation and refurnish their dwellings.

“So then, I had to get a place now to stay. In fact, I left my children behind I said I never came with children so I am leaving the children you can take them, you can take the house you can take the children, as long you are not going to take me (laughed)”

“...so I had to go out of the house and go and rent a flat leaving a 9 roomed house that we bought now we had to rent that house it was small and my furniture could not get in, but I managed”

“I took everything in the house that belong to me and go to my new flat and I already approached my lawyers and he came back from work that day in the afternoon he was so shocked because there was not even curtains in the house.”

4.3.1.15 The Impact Of Divorce On The Children

Divorce has a very negative impact on the children. In most instances, children are not part of the decisions taken and have to accept the outcome. Neither are they counselled, especially since some of them blame themselves for the divorce. Nowadays loving parents prepare the children for the split and share custody of the children. There is also an arrangement where the parents share responsibility.

Most of the participant’s biggest concern has been the children, especially having to raise them as single parents. One of the biggest concerns has also been how the children would emulate their parents since many of the children experienced violent behaviour. The fact that some of the participants had to flee their homes and become displaced led to many of the children performing poorly and ultimately dropping out of school.

It also emerged that the children showed changes in their social behaviour. They started using drugs and alcohol, whilst others ended up in jail because of crime. This led to many of the participants questioning whether they had made the right decision. The absence of a male figure made it increasingly difficult for male children to adjust. There was always a sense of "It is my fault" and this is largely due to parents not discussing the situation in an amicable manner.

The following are responses from the various participants relating to the topic on the impact on divorce on the children.

"I never felt that I could stay in a marriage for my children's sake, but every now and again when the children are giving problems, you ask yourself maybe I should have stayed... he told us that I want you to leave with your own kids and leave mine, this thing, this thing has actually affected me and it also affected my children, affected my children because my children were not happy I had to be there for my children I had to be strong for my children."

"What's going to happen with my child? And cried and cried and cried and cried and cried a lot. It affected my kids a lot and they had a problem regarding their studies... they are deteriorating at in their work at school. It had an impact, you know. Things were very bad. I had to take our child and send her to my family. She was only two and a half years old"

"Sometimes you don't know how it is affecting the children until the last born started smoking dagga and drinking, sometimes I wonder whether I did the right thing to divorce this man my children still love their father. One of my sons was not even at school, but smoking in the bush with friends. He was so naughty that he actually dropped out from school the problems were endless"

4.3.1.16 Impact of Divorce on the Health of the Professional Nurse

Divorce had a great impact on the health of the participants. All the hurt and pain they were going through during the process of divorce affected them in different ways. Since these participants have an important role to play in the wards, when their health is affected they would not be able to render the quality care for their patients.

“I had a problem with my skin and I did not know it was the dermatologist that I saw said it was stress related. It was stress related so it manifested physically on my body. It was really affecting my health. I was also developing those stress related illnesses like blood pressure... it was affecting my work... sometimes you are irritated”

“I developed hypertension, diabetes mellitus and heart problems during the divorce process which affected my life at home and at work. I had a total nervous breakdown I could not completely focus on my work. I couldn't do my work to the fullest. I had these persistent headaches and I want to sleep at work”

“I had something that I can personally call as, as intellectual or academic depression, after delivery I am sure it was post depression. They gave me treatment because I could not cope post delivery”

4.3.2 Impact of Divorce on Professional Roles and Work Performance

Many participants reported that they were affected by the divorce, especially in their roles as professional nurses. They were not able to render quality patient care. They were not of sound mind.

Due to the pain and hurt they went through with all the worries and problems they were experiencing, their performance was affected. They preferred to be at work, because they took work as their comfort zone. They felt that they were better off at work than being at home. They did not like the home environment. They felt safer at work than at home.

Some said that their performance was not affected, but going home was the problem, as they feared what was going to happen with them at home.

“If you are going to work, it actually suppresses what is actually eating you and you deal with the issues that are at work, but when you go home after that it comes back again... it keeps on coming for a year and another year it keeps on haunting you... work was my comfort zone because my home was hell... I am at work I am sort of removed from the situation”

“I got comfort from working and I began to excel in whatever I did”

“Never affected my work. I was always the same but deep inside it was painful to me my performance I ensure that I work hard I mean I am an workaholic”

“My performance was not negatively affected my feelings of inadequately here at home it did not affect the quality of my work because it was like a getaway that some place I could be”

Some said that their performance was affected.

“I had a total nervous breakdown. I remember the day when I had to write out the off duty schedules, I could not even hold a pen in my hands. I just simply couldn't write. I was tired every day when I had to go and work, because I couldn't sleep at night for days. Was tired and exhausted, I could not remember everything I used to forget things. My work speed was affected. I had to read patients notes repeatedly so that I could remember when handing over I was not completely focused on my work, I could not do my work to the fullest.”

“You cannot concentrate, you make mistakes, you may become irritable with the patients you know, and you do not perform at your best at that time, the work suffers a bit especially when you have got nobody to talk to, you go to work to just

be present the body is there but your soul and everything is not there, as far as absenteeism was concern”

“I was a little bit disturbed because I didn’t give my patients what they have expected from me much”

“I was also developing those stress related illnesses like blood pressure... it was affecting my work... sometimes you are irritated”

The participants indicated that they were always on duty, but the performance was not very good. Their output was not 100%. The shift that nurses work is one of the contributory factors that many marriages of nurses end up in divorce. In addition to working long hours, staff shortages lead to overwork and the participants reported being very tired when they get home.

“I was always on duty, I was feeling not well but the performance was not very good, my output at work was not 100% the shifts we work as nurses is one of the contributory factors that many marriages of nurses end up in divorce. Working long hours we are short staff which leads to be overworked you are very tired when you get home you must still see to the children, husband and all the house chores nursing is a strenuous profession”

“I developed hypertension, diabetes mellitus and heart problems during the divorce process which affected my life at home and at work”

4.3.3 Coping Strategies

4.3.3.1 Self Coping Mechanisms

The findings revealed the most of the participants had similar coping strategies. They had their own self coping mechanisms. One of the first coping mechanisms they used was accepting reality. They had to rediscover themselves. It was important for them to accept

that the marriage was over that was a very difficult part as soon as they accepted that, then only they could move on. They also had to have answers for the children so that the children could understand that they still had a father who loved them, but he was not living with them. Some of the participants embarked on post basic studies to occupy their minds and also improve their education so that they could apply for more senior posts and earn a better salary, so that they could still continue to maintain their living standards.

Some of the participants still had hope that things would come right between the two parties, but that did not happen. Some participants felt that talking to their managers, colleagues and their subordinates would make them feel better; they would understand why they were not performing well at work and they needed more support.

“The best thing that happened was the day I accepted what has happened to me and I had to continue with my life. I feel good about myself. I can stand on top of the roof and shout and say this is what I am going through. The more I talk about this, I feel lighter at work. As women you cannot cope you can’t cope. My divorce story has been everybody’s business so I was talking with everyone and laughing about it I think it helped.”

“I know the more I bottle it the more it is going to eat me, when one area of your life go down you just put 100% into the other area. It was my secret I did not want to talk about it but I told my intimate friends, what helped me was sharing my feelings with my friends, the hurt and the aggression that I was experiencing “

“I started reading motivational books, able to talk more about it to my friends to my family and all, spending time on myself, my hair and my skin. It was important for me as a result I even said to myself as if my mind is actually getting out of me I was really feeling hay ndiya phambana apa I am getting mad in this thing”

4.3.3.2 Community Involvement

The results revealed that one of the participants belonged to a women's club. As a professional nurse, she was able to assist and intervene with the community who had family problems. These people trusted and believed in her. During her divorce process she was also able to share her own experience of divorce with the women's club members who could not believe that she as a professional nurse would go through the same problems they were going through. It actually shattered the women when they heard that she was going through a divorce, because they relied on her to deal with their domestic issues they had at home. She also managed to get some sort of support from her club members. She was very active in one of the union organization that helped her a great deal.

One of the participants joined a divorce support group in the church which was formulated by the church members. They met on a regular basis to share experiences of divorce. Some participants were busy with community activities as a coping strategy.

“I decided that let me go and tell my club members that I have moved out of the house because I belonged to a club of women”

“I met people on my first month in that church a group that was divorced. We spoke and talked about how did we cope with divorce, having met those people it made a difference , because you talked to somebody who experienced these things you know”

4.3.3.3 Religion as a Means of Support

Religion plays a very important role in our communities. Most of the participants felt that their faith had helped them deal with the effects of their divorce. They became more spiritual and focused on God to help them deal with the aftermath. Some participants decided to form their own support groups in their institutions, where all staff members that were going through a divorce could meet lunch times and share their experiences.

The participants also indicated that the church was their support system. Support from the church and the ministers of religion were appreciated by the participants. They felt that they could not have made it without the assistance from the church and the ministers. Prayer played a very important role in their lives. They felt they were more connected to God and could draw strength and help from him. They said that when they found God and accepted him as their personal saviour, they felt that they could move on.

Alternatively, some of the participants felt that God had forsaken them. They expressed feelings of anger towards God. Some lost faith and distanced themselves from church activities. In the Roman Catholic Church divorced individuals cannot partake in Holy Communion, as divorce is being seen as a sin. This led to some participants totally alienating themselves from church life. The following are responses from the various participants relating to the topic on how religion has influenced their healing.

“The Lord helped me to cope the best in my situation... all the other things I tried, but the Lord helped me, but today I totally I am a different person a new, new person because of him and I am so glad that I found the Lord he was not lost I was the one that was lost ha, ha, ha”.

“The support system was strong, my lifestyle changed when I found the Lord. I do not have friends... actually now I just accepted Jesus and everything was ok. I had nothing that put me down. Prayer is the best medicine for me”

“You just pray and forget about it and cry unto God not to other person that is how I cope. I am now strong in faith and in prayer life. The Lord helped me and strengthened me”

“As religious as I was I felt like God has forsaken me. I had to wrestle with the Lord, I was angry with the Lord. I always say God will never leave me nor forsake me”

“I found support from my pastor and his wife. I could talk and open up to them The Lord helped me and strengthened me, lifestyle changed when I found the Lord the friends I had before are not like my friends anymore my circle of friends have changed I do not have friends actually now”

4.3.4 Support Systems in the Workplace

This information emerged from the findings that some of the participants were not aware of any availability of support systems within the two institutions. Those that were aware of the employee assistant program said that they were not aware that they catered for divorce individuals.

The other participants said they were aware, but there was no confidentiality. While the others said that they were aware, but did not utilize the services. Some of the participants utilized their own private psychologist.

“I never utilized anything at the hospital; I do not even know whether they have facilities that people can use generally for divorce cases, lack those support systems at times, we need support systems within the institutions”

“I do not know when the employee assistant program started, but I knew about the psychologist. I used none of them. I do not believe in them I was very strong”

“They have employee assistant programme, but I didn’t know that they deal with divorce cases; I even went to a private psychologist two of them the one that was dealing with the family and another psychologist who also has gone through a divorce”

“There is no confidentiality your business is everybody’s business I used my own private psychologist”

4.3.4.1 Family Support

It emerged from the study that most participants had family support. Many of them said that they did not know how they would have managed or survived without the support of the family, because they were not experiencing divorce alone, but with the children. They indicated that it had been a traumatic experience. Some suffered from depression and some even had suicidal feelings. Others were mentally and physically abused in front of the children as was indicated earlier in this chapter. They said that they would have never coped without the support of their families. They are thankful everyday for the support they received from their family.

“About myself, it was a difficult decision to say is it right for me, is it right for my children, is it right for the family and the home, because I was closer to my in laws very close to my in-laws my mother in-law, so it was easier for me to speak to my mother in-law whenever I needed support.”

“I started talking about it to my friends and then it gave me strength to be able to talk more about it to my friends and to my family and all”

“The support I had from my family especially my mother, when I used to cry she would cry with me. I had to be strong for my children, my support system was very strong, hey...from church members and some from the in-laws especially my mother in law.

4.3.4.2 Support from Colleagues and Friends

It emerged from the interviews that, most of the participants had support from their colleagues and friends which was very appreciated by the participants. They also shared their experiences with their colleagues and their intimate friends so that they could understand what they were going through.

“Had good support system from my friends, colleagues and even the unit manager. My colleagues I use to offload to them”

“I never use to keep my feelings inside I use to talk I did not bottle up. I shared my feelings: the hurt, and aggression with everybody, everybody was my shock

absorbers able to talk more about it to my friends, family. All friends and colleagues were very supportive”.

4.3.4.3 Support Groups

It emerged from the findings that there were no support groups for divorced staff members in the two institutions. One of the participants who was divorced while she was in another institution said that there were three professional nurses that were in the process of divorce and that they formed their own support group where they met during their lunch times and shared their experiences and challenges of divorce. She said that it was a very fruitful exercise and her “load seemed lighter”.

She also said that associating yourself with people with similar issues helped her realize that she was not immune to divorce and neither was she the only one. Although their situations were different the emotional trauma was the same.

She said that sometimes she felt that she had worse problems, but when she shared with the others, she saw that others’ problems were worse than hers. Their experiences were different, but they had one common factor and the emotions was the same.

Another participant said that a divorce support group was formed in their church. She said that she used to meet with the church members that went through a divorce and that assisted her very much, because every week when she came from church she was stronger she could face tomorrow.

All the participants felt that there is a need for a support group in their institutions, because often they did not know who to talk to and, if a support group was formed, they would be able to support one another. They believe that they would not be judged.

“We were three people that were going through a divorce at that hospital and it was very good. We use to come together and talk and that also helped me, we used to meet during lunch times that thing helped me a lot. You will think that her pain is worse than mine and they could see that my pain was worse than their pain so it was helping us although it was not a formal support group.”

“I met people on my first month in that church there was a group of people that was divorced before we spoke and talked about how we coped with divorce. Having met those people it made a difference, because you talked to people that experienced these things.”

4.3.4.4 Support Groups within the Institutions

The research participants indicated that a support group for divorced individuals should be formulated in the two institutions. It would be beneficial for them to meet during lunch times and support one another and share experiences and challenges together.

“Support groups must be formulated for divorced staff members. Having a support group would be, so great I don’t know why somebody didn’t think about this, because divorces have been happening so long. A support group will be a good idea because the divorce rate among nurses is very high in this hospital. You can support one another, the experience might be different but the emotions are the same, they will not judge you.”

“They know what you are going through, people must go through a divorce for them to understand what you are going through...it suppose to be there because not all of us cope the same way we are not built the same way and we are not all created to be strong characters”

“Those of us who have gone through divorce suppose to be forming a support group because they are the ones who have experienced it and know how they coped with it. I think it’s a good idea, what we need is somebody we can talk to share one another’s experiences, support each other because we have gone through the same thing.

4.4 SUMMARY

This chapter has presented the analysis and discussion of the study findings. It is quite clear from the participant’s responses that divorce is a very painful and traumatic experience. It also demonstrated that nurses also go through the same problems that other people go through during a divorce process.

Significantly, it indicated that divorce does have a major impact on the professional nurses’ work performance. This is especially valid as they have major responsibilities within their unit or hospital, to render quality patient care. It is evident that these participants were unable to provide fully the care that they were supposed to render.

What emerged was the participants’ perception of the need for formulation of support groups for divorced staff members at the institutions. The next chapter presents the discussion, implications for practice, and limitations of the study, conclusion and recommendations.

CHAPTER 5

DISCUSSION

5.1 INTRODUCTION

This chapter presents the discussion of the findings in relation to earlier studies, the implications for practice, limitations of the study, conclusion and recommendations.

5.2 DISCUSSION

This study explored and described the impact of divorce on work performance of professional nurses.

It emerged from the findings that the participant had different experiences, but had one commonality the breakdown of a marriage between two people which led to significant emotional, physical, social and financial impact.

The participants indicated that divorce had been a very devastating and traumatic experience. It was described as worse than death because death is final, whereas with divorce a person goes on with their life. The pain, hurt, anger and humiliation participants suffered was felt to be unbearable.

Some of the participants felt rejected and humiliated. The participants were professionals and educated individuals, and this made it very difficult to understand why they should be rejected. They could not understand why their spouses would prefer to be with other women. Nurses hold an esteemed position in our society and are highly respected in our communities. The shame of going through a divorce became even more unbearable. The fact that HIV/AIDS is very prevalent today also contributed to their ultimate decision to end the union.

The participants experienced mixed emotions. They felt as if they had been going through a painful grieving process. They had also questioned themselves about what went wrong in their marriages. They had blamed themselves and started looking for faults. They said that there were times when they lost confidence in themselves. One participant said that emotional abuse was worse than physical abuse. Another participant said that she saw herself as a failure, because the marriage did not work.

According to Hickson (2011: Online), grieving the loss of a marriage is a healthy part of the divorce process that a woman must endure in order to heal properly. This is also supported by Shaw (2009: Online). Many different emotions and feelings will arise, from anger, regret, fear, despair, anxiety, frustration and distrust to feelings of relief and new beginnings, may be experienced.

The psychological damage experienced in divorce was perceived to be significant. Most of the participants even felt that they were not worthy to be alive; some felt that they were nothing. They did not know how to face the community at large, their children, their families, the church and their colleagues. They said that they had lost their self-worth and their self esteem.

The experiences of the participants are reflected by **Wallerstein (1991:349) who stated that** a comprehensive review of research from several disciplines regarding long-term effects of divorce on children yields a growing consensus, that significant numbers of children suffer for many years from psychological and social difficulties associated with continuing and/or new stresses within the post-divorce family. They experience heightened anxiety in forming enduring attachments at later developmental stages including young adulthood.

Amato and Soboweski's findings (2001:900) also indicated that individuals with divorced parents are at increased risk of experiencing psychological problems in adulthood. Although this tendency has been documented in many studies, the explanation for this phenomenon remains elusive. A few studies have considered the possibility that low education attainment or poor interpersonal skills may mediate the association between parental divorce and adult psychological wellbeing. Few studies have attempted to explain link between childhood family structure and adult psychological functioning.

It is with great shame to report on the effects of the physical abuse, especially knowing that men were responsible for this. Some of the participants were physically abused resulting in others being disfigured. Most of those who reported to be physically abuse were attacked in front of their children. Sometimes these incidences happened when the spouse was under the influence of drugs and alcohol and some of the participants had to call the police for assistance.

Not only emotional abuse, but also physical abuse, was a major concern for the participants. One participant commented, "...he was violent that I never seen I don't know if he smoked dagga but he came back as somebody I did not know he wanted to kill me, it was only the two of us, but if I was not strong as tiny as I am I had to bite him and push him and lock myself in the room it was at night I am giving up, because this man is going to kill me."

One participant was beaten up and dragged in the street and still had to go to work the following morning. She found this attack embarrassing especially as an educated professional.

Another participant commented that she had “saved herself” for marriage and had expected lifelong fidelity, yet Marital unfaithfulness was commonly reported by the participants.

The occurrence of financial and social abuse also emerged quite clearly during the interviews. Participants suggested that socially it was very difficult to mix with people, that they lost their friends and became a “threat” to them when they were divorced. They reported that it is even very difficult to face children, family, friends and colleagues. The reason given for this was a feeling of confusion, not wanting to hear advice from others, and a fear of judgement by others.

One of the participants reflected on her loneliness without a companion. She said that she had something that she could personally call “intellectual or academic depression”. This participant stated, “I felt alone, I felt that I have lost my self-esteem, Feeling lonely and alone, you don’t know how to face things, you don’t know how to face people you are just hurt and traumatized and all you want to do you just want to bury yourself in something, you are lonely maybe I should have stayed”.

The consequence of divorce led to a huge financial decline for most of the participants interviewed. Married people become dependent on two salaries. Normally after the divorce, the divorcee has to carry the financial burden solely, especially if the spouse is unemployed or there is an estranged relationship with the partner and the children. In some instances participants received maintenance on an ad hoc basis. They indicated that their standard of living dropped and that they could not meet the needs of the family. Many necessities are done away with in order to ensure the survival of the family and the children, in particular.

These findings are supported by Daniel (1994: 23). In the study he conducted, he found that the average monthly income of divorced women, when compared with during marriage, significantly decreased. This directly affects the standard of living and the adjustment after divorce.

Some of the participants had to move out of their homes and start afresh; others were chased out of their homes. Some of them had no transport; they had to use public transport. Their insurance was affected, because they had to take out new policies to see that they and the children were well covered. One participant said that she had to leave her nine roomed house that she and her husband had bought and rent a flat so small that her furniture could not fit in it.

Cameron (2008: 28) stresses the idea that both parents should realize that though the marriage has ended, their fiscal commitment to their children has not. Regardless of one's feelings towards the unhappy ending of a marriage or one's bitter feelings towards an ex-spouse, no child deserves to languish in poverty as a result. Non-payment of child support may be intended as a "punishment" by the noncustodial parent towards their ex-spouse that unthinkingly and callously transfers, through no fault of their own, to the child. Stronger penalties should be issued by the state for wilful non-payment or evasion of child support.

Divorce has a very negative emotional psychological consequence on children. In most instances, children are not part of the decisions taken and have to accept the outcome. Neither are they counselled. Some blame themselves for the divorce.

Amato and Sobolewski (2001:900) refer to three pathways through which family disruption may affect the off-spring's well-being: socioeconomic attainment, marital and relationship

stability and the quality of children's relation with parents. Divorce appeared to erode children's emotional bonds with fathers. Although good reasons for assuming that the quality of parent-child ties mediates some of the long-term negative effects of parent divorce, other studies did not consider this possibility. Nowadays loving parents prepare the children for the split and share custody of the children. There is also an arrangement where the parents share responsibility.

For most of the participants, the primary concern was the children, especially having to raise them as single parents. Another significant matter was how the children would emulate their parents since many witnessed and experienced violent behaviour. The fact that some of the participants had to flee their homes and become displaced led to many of the children performing poorly and ultimately dropping out of school.

Amato and Soboweski (2001:900) indicated that few studies have considered the possibility that low education attainment or poor interpersonal skills may mediate the association between parental divorce and adult psychological wellbeing. Few studies have attempted to explain link between childhood family structure and adult psychological functioning.

Another participant said she never felt that she could stay in a marriage for her children's sake, but every now and again when the children were giving problems, she asked herself whether she should have stayed. The spouse had told her to leave the house with her own children and leave his child. This situation was also identified by Cameron (2008:25) who stated that a child in these circumstances may feel abandoned, unloved, or come to believe that there is something "wrong" with them that caused the other parent to go away.

One participant said that she observed how divorce affected different areas of her life: her children, her work, her personality, her character and her confidence because of the sense of rejection and failure.

The research participants pointed out that the children started to blame themselves. The children started asking questions and they needed answers. All the participants said that this affected their children's performance and behaviour at school. Sometimes the children did not attend school on a regular basis and some even started taking drugs and dagga. Sometimes the participants were not sure whether they did the right thing in divorcing their spouses.

It is clear that divorce has long-reaching consequences for children that may last even into adulthood. If the children's emotional needs are not handled properly both during and after their parents' divorce, lingering feelings of anger, insecurity, alienation, abandonment, and confusion can even manifest into the children's adult relationships and personal growth years, even decades, after the divorce itself takes place (Cameron 2008:25).

The participants indicated that their health was affected. During the interviews it emerged that some of the participants developed stress related illness such as hypertension, heart problems, skin rashes and depression. This is supported by Bloom, (1975) and Crago (1972) as cited by Berman and Turk (1981: 179) in their study on post-divorce adjustment factors. They also stated that divorced people are consistently represented in psychiatric populations. They are also more likely to develop physical illnesses and have higher morbidity rates in comparison to married people.

One participant said that she had a stress-related problem with her skin: "It was really affecting my health. I was also developing those stress related illnesses like blood

pressure... it was affecting my work... sometimes you are irritated.” Another participant said that she developed hypertension, diabetes mellitus and heart problems during the divorce process which affected her life at home and at work. One participant said that she had a nervous breakdown: “I could not completely focus on my work; I couldn’t do my work to the fullest. I had these persistent headaches and I wanted to sleep at work.”

A professional nurse is expected to be mentally sound, responsible and accountable as the decision maker on the care of the patients to ensure quality care. The professional nurse, who has been abused, may be psychologically affected and depressed. This may negatively affect her work performance as she may not be able to come up with appropriate decisions for effective care of the patients. She may not be in a position to guide her subordinates. The state of health of this divorcee may need her to visit physicians and psychologists frequently, or she may be booked off sick and the rate of absenteeism may be high. This may affect the smooth running of the unit and therefore the quality of patient care. This is supported by the previous studies which concluded that days missed from work significantly underestimate the adverse economic effects associated with depression. Productivity losses related to depression appear to exceed the costs of effective treatment (Wang, Beck, Berglund, McKenas, David, Pronk, Simon & Kessler 2004: 1885).

The participants indicated that there is a stigma attached to divorce. It emerged during the interviews that the participants felt they would always be labelled. Their social life suffered and they lost friendships in the process. They felt that they had become a threat to married friends. They also felt that culturally a divorced woman cannot reprimand or advise a young girl who is going to get married. The divorcee is always excluded. One of the research participants even said that she had to leave her church because she was judged because it was against the church rules to divorce your spouse even if the marriage breaks down.

According to a Korean study by Kim and Kim, a severe stigma is attached to divorce. There would be three mediating processes existing in the moving from the first divorce to the second divorce. As the duration of marriage increased, a wife's relation-specific investment increased. Women who divorced after being married several years had less chance of getting a decent or well paid job, because they did not invest much on their human capital which is useful in the job market. They have the highest percent of married couples in their first marriage ended in divorce within 3-4 years of marriage. This can be due to the endeavour of remarried persons not to end their remarriages even though they may not be happy with their lives, since they are afraid that one divorce may be excused but two divorces would make people believe them abnormal or pathological.

Nurses are, by law, expected to render safe and quality nursing care to their patients (Nursing Act, 33 of 2005). The performance of a professional nurse is very important. Most of the participants have strategic positions in their respective hospitals and to some extent continuously have not performed satisfactorily. The effects of the divorce have, in some instances, jeopardized the quality care of the patients.

A nurse is expected to be mentally stable, responsible and accountable for rendering high quality care of the patient. This is supported by Muller (2009:32-36) who indicated that the patient expects quality nursing care and the nurse should possess all the necessary abilities to perform any nursing interaction. The employer expects quality nursing care in a cost-effective manner, in accordance with the service agreement between the employer and employee. As an individual member of the multi-professional health team in the health care service, the professional nurse is therefore personally accountable for her/his acts and omissions.

During the process of divorcing many participants were not able to render quality patient care; they were not in a good frame of mind. Due to difficult home situations, many of

these nurses opt to be at work rather than being at home. This poses a dangerous situation that could have catastrophic consequences.

These health practitioners reported that they became distracted; they underperformed and were unable to concentrate. They felt that they had no support structures at work and often felt burned out. One reported that she was a little bit disturbed because she did not give her patients what they expected from her.

The participants said that they could not concentrate; they made mistakes, became irritable with the patients, and were not performing at their best at that time. The work suffered, especially when there was nobody to talk to. As far as absenteeism was concerned, they were always on duty: "The output at work was not 100%, we were working long hours." This has been supported by Walsh (2010:1) who maintains that when a divorcee is going through the divorce, she is almost certainly bound to be disturbed by it. It is natural for the performance to take a dip, due to the worries and preoccupied mind. From the perspective of the management, the divorcee has lower productivity.

One of the participants even said that she had a nervous breakdown and that she was unable to even hold a pen in her hands - she simply couldn't write. She couldn't sleep at night and she was tired and exhausted. She couldn't remember things and she felt that she couldn't focus and do her work. This was identified by a workplace psychologist Smallword, as cited by Andrews (2005: Online) that, the process of getting divorced is an emotional roller coaster, and that impacts peoples' ability to be mindful on the job. When people are distracted, they make more mistakes and work more slowly. If they are feeling depressed, the creativity will be down. If they are feeling angry they may project some of that anger on to co-workers or even customers.

If unsupported it, becomes incredibly difficult to cope with a divorce. Most of the participants' coping strategies were quite similar in nature. Many of them tried to cope by accepting the reality of the divorce. They had to rediscover themselves. They felt that it was important for them to accept that the marriage was over even though it was difficult at first. Some of the participants embarked on post basic studies to occupy their minds and also improve their education so that they could apply for more senior posts and earn a better salary, to ensure that their standard of living was maintained and improved. This is supported by Hickson (2011: Online) who states that, no matter how intense the suffering is, the divorcee should take comfort in the fact that it will not last forever. The sooner they cope, the more they'll be prepared to move forward. The process of mourning is precisely what the divorcee needs in order to recover confidence and the ability to find new flourishing relationships.

There was still the longing for reconciliation, but most of the participants had not ventured on any successful reunion. Some of the participants decided to open up to their subordinates and superiors in order to create some kind of support structure. Some of the participants shared their feelings, hurt and the aggression that they were experiencing with their friends. This was supported by Hickson (2011: Online) who further advises divorcees to allow themselves to express their feelings.

Community involvement is critical in assisting divorcees to deal with their pain and to help heal the wounds. One of the participants belonged to a woman's club. Using her professional background, as a nurse, she was able to assist and intervene with a community who had family problems. This is supported by Shaw (2009: Online) who stated that a divorcee can cope with divorce by using a pastor, support group, close friend, counsellor or therapist as a support system.

Religion plays a very important role in our communities, unlike in other countries. Most of the participants feel that their faith has helped them deal with the effects of their divorce. They became more spiritual and focused on the Almighty to help them deal with the aftermath. Some participants decided to form their own support groups in their institutions, where all staff members that were going through a divorce could meet lunch times and share their experiences.

Alternatively some of the participants felt that God had forsaken them and were actually angry with God. Some lost faith and distanced themselves from church activities. In the Roman Catholic Church, divorced individuals cannot partake in Holy Communion, as divorce is being seen as a sin. This led to some of the participants totally alienating themselves from church life. Most of the participants attended church on a regular basis and were involved in church activities as a coping strategy.

In general, however, support from the church was evident during the interviews. Ministers, pastors and their wives had proven good support systems for many participants.

One of the participants said that at their church they also had their own support group which was beneficiary to them because this group comprised of divorced congregants. They were able to share their experiences of divorce; they prayed together and supported one another.

The research participants verbalized during the interviews that they all received support from their families. The others said that they received support from their children. All the participants said that they don't know what would have happened to them without their family support. What also emerged was the value of support from their colleagues, friends, supervisors and some of their managers.

The research participants indicated that they were not aware of the availability of any form of support systems within the two institutions. Some of them said that they were aware of the employee assistance program, but were not aware that this program caters for divorced individuals. The others said that they did not know that there was any support system that was available in both institutions. They also said that they did not attend any support services within the institutions. Most of the participants were seeing their own private psychologist.

The participants said that in some of the departments they were not getting much support from management, but the researcher suspects that a contributory factor could be that the participants have not made the management aware of their problems.

One of the research participant said that during her divorce process at the institution where she was working, three professional nurses were going through a divorce at the same time, so they decided to form their own support group where they use to meet during their lunch times and shared their divorce experiences. It was highly beneficial because it assisted them as a support system.

The findings of this study also revealed that there were no support groups for divorced staff members within the two institutions. The participants said that it would be a good idea to have a support group for divorced staff members because they need to talk to somebody, they need to share one another's experiences of divorce, and they need to support one another. Some suggested that they as divorced staff members would like to assist with the formulation of the support group because they knew what it was like to go through a divorce. They said that people who had never been divorced could never know the pain and trauma of divorce. Some of them said that it must be formed with a Christian perspective. The support group for divorced staff members was highly recommended by the participants.

5.3 IMPLICATIONS FOR PRACTICE

It is envisaged that after the findings of this study are shared with the management of the East London Hospital Complex, the divorced employees will be supported by management. Their challenges will be catered for. This will lead to improved work performance and therefore high quality patient care. The marriage problems will be minimized as the life skills programme will empower all the staff members on how to cope with their marriages.

5.4 IMPLICATIONS FOR RESEARCH

The researcher identified possible areas for further research which could have an impact on the employees 'improved work performance and high quality patient care:

- The need to perform the same type of investigation on other nursing categories of staff irrespective of gender.
- The need to investigate the extent of the impact of divorce on the work performance of professional nurses.
- Need for development of guidelines or modules on preventative programme on life skills which will apply to all staff members.

5.5 LIMITATIONS OF THE STUDY

The sampling technique used for this study could be biased, since the most isolated cases may not be mentioned by anyone and therefore not be included (Joubert, Ehrlich, Katzenellenbogen, Abdool & Karim 2009:101).

The researcher managed to get only four (4) participants that were divorced for 5 years as per proposal. Data was not saturated and the researcher continued to interview participants who had divorced for up to eleven (11) years.

The findings of this study cannot be generalized to all professional nurses because this study focused on divorced female professional nurses. Each person is a unique individual who has her own lived experiences. The participants may be divorced female professional nurses, but their responses to the same situation may not be the same. The situation was unique in each instance as each participant referred to her own divorce situation and her work performance. Each institution has its own policies and its own way of dealing with the challenges of its employees.

This study provided in depth information on the impact of divorce on professional nurses' work performance in the East London Hospital Complex and the findings cannot be generalized to other institutions in the Eastern Cape Province or other provinces in South Africa.

5.6 CONCLUSION

In conclusion, this qualitative study aimed at describing and exploring the impact of divorce on professional nurses' work performance within the East London Hospital Complex. The emphasis was on the experiences of divorce of professional nurses, the professional roles and work performance, the coping strategies and support systems within the institutions.

According to the lived experiences of the participants, divorce is traumatic and painful with emotional, physical, financial and social impact. It also has an impact on the health of the divorcees and children. It was quite clear that divorce had a negative impact on the professional nurses' work performance. The participants had different coping strategies that they used. Some were accepting the reality that the marriage was over, some were doing post basic studies, others were involved with club and church activities, others attended the gym, while others were reading motivational books, and some formed their

own support groups for divorced professional nurses. Participants were not aware of the availability of any support systems within the two institutions.

The participants indicated that they had support from their families, church, friends, and colleagues. It was concluded that some supervisors and managers were not supportive and there is a need for the formulation of a support group for divorced staff members within both institutions.

5.7 RECOMMENDATIONS

The researcher is recommending that:

- The employee assistance program be marketed more effectively by hospital management by conducting:
 - Awareness campaigns at least twice a year.
 - Workshops where the content of the program should be presented at least twice a year.
- The employee assistance program be included in the hospital, departmental and unit orientation programmes in detail so that the staff members understand the content of the program thoroughly.
- A dedicated psychologist be readily available at all times as part of a support system.
- A support group for divorced staff members be formulated.
- Confidentiality is maintained at all times according to the EAP policy.
- Preventive intervention programs be offered to the staff members. The management should arrange with the marriage and family support organizations to present workshops on life skills which will include relationships, marriage and

divorce. This may limit the rate of divorce amongst the employees. This will also assist the employees on how to deal with divorce and its effects.

6. LIST OF REFERENCES

Amato, P.R. & Sobolewski, J.M. The effects of divorce and marital discord on adult children's psychological well-being. *American Sociological review*, 2001, Vol.66 (December: 900-921).

Andrews L. W. 2005 'Coping with divorce: help maintain your employees' workplace productivity during a personal crisis.' *HR Magazine*, May, 2005. www.shrm.org/5/1/2005.

Berman W. H. & Turk D. C. 'Adaptation to Divorce: Problems and Coping Strategies. *Journal of Marriage and Family*. Volume 43, no. 1(February, 1981), pp 179 – 189.

Brink, H. 2009. *Fundamentals of Research Methodology for Health Care Professionals*. 2nd Edition: Juta: Cape Town

Burns, N. and Grove, S.K. (2005) *the practice of nursing research: conduct, critique, & utilization*. 5th ed. St. Louis, Missouri: Elsevier Saunders.

Burns, K. & Grove, S. 2009a. *The Practice of Nursing Research: Conduct, Critique and Utilization*. 5th Edition. Saunders: USA

Burns, N. & Grove, S.K.2009b. *The Practice of Nursing Research. Appraisal, Synthesis, and Generation of evidence*. 6th Edition. Saunders: USA.

Carver, C, Scheier, S. Michael F.; Weintraub, Jagdish K. Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, Vol 56(2), Feb 1989, 267-283.

Cameron, L. 2008. 'The Possible Negative Emotional and Psychological Consequences in Children of Divorce'. *ESSAI:Vol. 6, Article 15*.

Chambers-Macmillan.1996 *South African Student's Dictionary*

Chandler. 2006. Social effects of divorce on Children. Sociology: Divorce. Loyola University: New Orleans.

Cherlin A. J.; Furstenberg F.F.; Chase-Lansdale L.; Kiernan K. E.; Robins P. K.; Morrison D.R. & Teitler J.O. Longitudinal studies of effects of divorce on children in Great Britain and the United States. Department of Sociology, Johns Hopkins University, Baltimore, MD 21218. Science 7 June 1991. DOI: 10.1126/science.2047851 Vol. 252 no. 5011 pp. 1386-1389.

Creswell, J.W. 1994. Research designs: Qualitative and Quantitative approaches. Thousand Oaks, CA: Sage. Hiebert, Paul G. and Frances F.

Daniel T, 1994, The Social and Economic Problem of divorced Women: An Assesment of the case of Divorced Women, Addis Ababa

Du Toit, D. A. & Van Staden, S. J. 2005. Nursing Sociology Van Schaik Publishers 3rd Edition.

Employee Assistance Programme Policy : (2006). Department of Health . Eastern Cape Province.

Gabru. N.2004. Dilemma of Muslim women regarding Divorce in South Africa.

George, B. 1993 The Future of the American Family Moody Press.

Gonzalez, L and Viitanen,Tarja,K, (2009),The effect of divorce laws on divorce rates in Europe, *European Economics Review* 53 (2009) 127-138.

Hickson A. S.2011. Psychological effects of divorce on women.(Online). Available: [http://www.livestrong.com/article.\[2011,May 3\]](http://www.livestrong.com/article.[2011,May 3]).

Hess R. D. & Camara K. A. 2010. Post-Divorce Family Relationships as Mediating Factors in the Consequences of Divorce for Children. *Journal of Social Issues*. [Volume 35, Issue 4](#), pages 79–96, fall 1979.

Hetherington, E. M. Divorce: A child's perspective. *American Psychologist*, Vol 34(10), Oct 1979, 851-858.

Hetherington, M.; Cox, M. & Cox R. Long term effects of divorce and remarriage on the adjustment of children. *Journal of the American Academy of Child Psychiatry*, 24, 5:518–530, 1985.

Collins, M. 2010. Divorce: How it affects your job performance. <http://www.helium.com/items/174197.divorce-how-it-affects-your-job-performance>

Jerskey BA, Lyons MJ, Lynch CE, Hines D, Ascher S, Tsuang MT. Genetic influence on marital status. *Twin Research*. 2001; 4(3):189.

Johnson, W. McGue, M, Kreuger, R, F, & Bouchard, T, J, (2004).’ Marriage and Personality, A genetic analysis, *Journal of Personality and Social Psychology*, 86 (2), 285-294.

Joubert G., Ehrlich R.,Ktzenellenbogen J. Abdool S. & Karim. 2009. Epidemiology: a Research Manual for South Africa. 2nd Edition. Oxford University Press: Cape Town.

Kim, J.Y and Kim, H. 2002.'Stigma in divorces and its deterrence effect'. Journal of Socio-Economics 31, page 31-44.

Lee J. M. & Hett G.G. Post-divorce Adjustment: An Assessment of a Group Intervention. Canadian Journal of Counseling and Psychotherapy.1990. Volume 24, no.3

Lincoln, YS. & Guba, EG. (1985). [Naturalistic Inquiry](#). Newbury Park, CA: Sage Publications.

Mounton. J. 2008. How to succeed in your masters & doctoral studies. 1st Edition. Pretoria: Van Schaik publishers.

Muller M.2009. Nursing Dynamics (4th ed.). Heinemann: Sandton.

O'Connel Corcoran. 1997. Psychological and Emotional Aspects of Divorce. Designed & Developed by Resourceful Internet Solutions Home of Mediate.com.

Parahoo, K. 2006. Principals, Process Nursing Research and Issues. Palgrave Macmillan. 2nd Edition

Polit, D. F. & Beck, C. T. 2008. Nursing research generating and assessing evidence for nursing practice (8th ed). Philadelphia. Lippincott. Williams & Wilkins.

Sandelowski, M. (1995). "Sample size in qualitative research." [Research in Nursing and Health](#). 18, 179-183.

Searle. C. 2002. Professional Practice. South African Nursing Perspective.4th Edition. Butterworth Publishers.

Shaw, P. B.Jr.2009.The challenge of change- Managing divorce- Related stress. We. @ thelaboroflove.com.[2009,November 6].

South African Nursing Council.1984. Regulations relating to the scope of practice of persons who are registered or enrolled under the Nursing Act, 1978 R2598, as amended. Government Printer: Pretoria.

South African Nursing Council.2004/2009. Draft Charter of Nursing Practice. SANC: Pretoria (www.sanc.org.za).

South Africa (Republic) 2005. Nursing Act.No.33 of 2005. Government Printer: Pretoria.

Streubert H. & Carpenter D. 1995. Qualitative Research in Nursing: Advancing the Humanistic Imperative. Philadelphia: J.B. Lippincott Company

Speziale,H.J. & Carpenter, D.R. 2007. 4th edition.Qualitative Research in Nursing .Philadelphia: Lippincott Williams & Wilkins.

Tein, J. ;Sandler, I. N.; Zautra, A. J. Stressful life events, psychological distress, coping, and parenting of divorced mothers: A longitudinal study. Journal of Family Psychology, Vol 14(1), Mar 2000, 27-41.

Terre Blanche, M. & Durrheim. K. 2004. Research in Practice. Cape Town: University of Cape Town Press.

Wang, P. S.;Beck, Arne L.;Berglund, P.McKenas, David K.;Pronk, Nicolaas P.;Simon, Gregory E.;Kessler, Ronald C. Effects of Major Depression on Moment-in-Time Work Performance. The American Journal of Psychiatry, Vol 161(10), Oct 2004, 1885-1891.

Wallerstein J. The Long-Term Effects of Divorce on Children: A Review. Journal of the American Academy of Child & Adolescent Psychiatry.Volume 30, Issue 3, May 1991, Pages 349-360.

Walsh J.2010 .How divorce affects your work.[On line].Available: <http://www.articleGold.com/atrticle>.[2010, August 27].