



University of Venda

**FACTORS LEADING TO STUDENT NURSES' ABSENTEEISM IN THE
LIMPOPO COLLEGE OF NURSING, DURING PSYCHIATRIC NURSING
SCIENCE CLINICAL PLACEMENT**

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DECLARATION

I, Thingahangwi Cecilia, Masutha, declare that the dissertation titled **“Factors leading to student nurses’ Absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement”**, has not been submitted previously by me for the degree at this or any other university; and that the work is entirely my own in design, and all materials contained herein have been acknowledged.

.....
Masutha T.C.

.....
Date

DEDICATION

This dissertation is dedicated to my late mother, Ntshoniseni Violet Nengwekhulu, for encouraging me to study, my beloved husband, Fhatuwani Alpheus Lishivha, for his support, my lovely daughter Dakalo, for taking care of her younger brothers when I was busy with my study, my sons, Ndimuhulu, Khathutshelo and Ramaanda, for giving me enough time to study compromising their own time to be with them. My siblings, Mashudu, Tshianeo, Thifhelimbilu, Khathutshelo and Thabelo, for the support and encouragement they gave me during my study.

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LIST OF ACRONYMS

AIDS	Acquired Immuno- Deficiency Syndrome
CNS	Community Nursing Science
FNS	Fundamental Nursing Science
GNS	General Nursing Science
HIV	Human Immunodeficiency Virus
MID	Midwifery Science
PNS	Psychiatric Nursing Science
SANC	South African Nursing Council
SPSS	Statistical Package for Social Sciences

ABSTRACT

Nursing students' absenteeism has become a very serious concern in every higher educational institution in the whole world especially those of nursing. This study was conducted to investigate factors leading to student nurses' absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement.

A quantitative approach using descriptive design was used. Purposive sampling method was used to get a sample of two hundred and six (206) of students who have absented themselves before. Data was collected through a self-report scale in the form of questionnaires of structured questions, entered and analysed using SPSS version 24. Ethical considerations were adhered to throughout.

The correlation between clinical factors and absenteeism was determined. The main reported factors for absenteeism were: student nurses being treated as a workforce in the clinical areas; shortage of staff in the clinical areas; study for tests and examinations; inadequate supervision of student nurses by professional nurses; and being inconsiderate of student nurses request for days off in the clinical area.

This study recommends that the college should make a provision of one week of study for student nurses between the period of clinical placement and tests or final examinations as most of the respondents indicated that they absent themselves due to study for tests and examinations. The Department of Health should find a way of not overworking students due to shortage of staff in the wards but consider them for experiential learning. A research study should be conducted to develop a model to reduce student nurses absenteeism.

Key words: *Absenteeism, Clinical placement, factors, staff, Student Nurse*

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CHAPTER 1

ORIENTATION TO THE STUDY

1.1. INTRODUCTION AND BACKGROUND TO THE STUDY

Nursing students' absenteeism has become a very serious concern in nursing higher educational institutions world-wide. For the past three years, the principal investigator has observed a trend of nursing students' absenteeism on one of the campuses that the principal investigator is working, during Psychiatric clinical placement. Student absenteeism refers to instances where a student fails to attend any scheduled meetings, like classes, lectures, tutorials, workshops or seminars, or laboratory sessions without permission (Thekedam, 2013).

In Ethiopia, a study conducted at Universities, including Hawassa University indicates that many higher institutions have strict policies regarding mandatory attendance during lectures, laboratory, and practical sessions. Despite those policies, absenteeism is an ongoing problem in those universities (Desalegn, Berhan & Berhan, 2014). Mahlangu (2012) states that in most of the provinces in South Africa, absenteeism of students is still a great concern.

Another study conducted at Capricorn District Nursing Schools found that absenteeism amongst pupil nurses in the nursing schools is very high (Thobakgale, Lekhuleni & Kgole, 2013). According to UKessays (2015), absenteeism is the term used to describe rash employee absences from the workplace. A study conducted in Barbados and Nigeria Universities

indicates that the problem of absenteeism is caused by the interaction of many factors, including student-centered, home, school, and society related reasons (Fayombo, Ogunkola & Olaleye, 2012).

According to Baloyi (2014), nursing students absent themselves from class due to student-school and home-related factors.

In South Africa, the study conducted at Kwazulu-Natal Primary Health Care Centers indicates that stress related illnesses, staff shortages, workload, lack of promotion opportunities, lack of child care facilities, lack of appreciation and feedback and lack of flexible working schedules were identified as the critical factors to absenteeism. The study also reveals that demographic variables did not reveal any factors contributing to absenteeism (Singh, 2012).

A study conducted at Capricorn District Nursing Schools, found that most pupil nurse students perceive assessment methods as the most common factor that contributed to their absenteeism. The study concludes that it may be because of the way evaluations have been presented or conducted, and when learner nurses are treated as a workforce they may absent themselves from the clinical area. The results of the study also indicate that absenteeism amongst pupil nurses in nursing schools is very high and that the following were identified as contributory factors to absenteeism: teaching methodology, teaching content, learning environment, assessment, and social problems (Thobakgale *et al.*, 2013).

A four-year diploma nursing programme in the Limpopo College of Nursing provides training to students to become professional nurses. However, it has been noted that absenteeism of student nurses in this programme is increasing. Absenteeism can lead to extension of training and termination of student nurses from the programme (Limpopo College of Nursing Rules &

Regulations, 2013). This would result in fewer student nurses completing training, and therefore, a shortage of professional nurses (Singh, 2015). In this four-year diploma, nursing students (R425) in the Limpopo Province enter a fixed term appointment contract as a trainee nurse. According to this contract, student nurses are not entitled to family responsibility leave but are entitled to sick and vacation leave. Maternity leave for these students is specified under certain conditions (Limpopo College of Nursing, Nurse Education & Training Policy, 2007). The college comprises five campuses namely: Sovenga, Thohoyandou, Giyani, Waterberg, and Sekhukhune. All personnel on the campuses are both for theory and clinical accompaniment. Sovenga, Thohoyandou and Giyani campuses train nurses from level one to level four, whereas Waterberg and Sekhukhune campuses train level one only and students proceed with other levels at Thohoyandou and Giyani campuses respectively.

1.2. PROBLEM STATEMENT

The principal investigator is employed on one of the campuses of the Limpopo College of Nursing; Giyani Campus. Giyani Campus allocates Psychiatric Nursing Science students for their clinical practice at Evuxakeni Hospital in the Mopani District, Giyani. Thohoyandou Campus allocates Psychiatric Nursing Science students for their clinical practice at Donald Fraser Hospital, Siloam Hospital and Hayani Hospital in Vhembe District, Thohoyandou. Sovenga Campus allocates Psychiatric Nursing Science students for their clinical practice at Thabamoopo Hospital in Capricorn District, Polokwane. Table 1.1 presents the number of hours in clinical areas that student nurses are expected to accumulate, according to college curriculum requirements.

Table 1.1. Required level III and level IV clinical hours according to Limpopo College of Nursing Curriculum (1997).

Subject	Number of weeks	Number of hours
PNS 1 (Level III)	8	320
PNS II (Level IV)	10	400
TOTAL	18	720

Based on the information provided in Table 1.1, the total clinical hours to be accumulated for PNS is 720 hours.

If a student did not obtain 80% (320 hours in level III and 400 hours in level IV) of hours in the subject, Psychiatric Nursing Science for clinical exposure, that student is not allowed to do the final clinical examination of a subject, SANC (Act no: 33 of 2005).

For the past three years during clinical accompaniment of students, the principal investigator has observed that there is a high rate of absenteeism among level III and level IV student nurses in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement. Absenteeism has a huge impact on student nurses, because a student who has obtained less than 80% of clinical hours in a subject is not allowed to sit in for the final examinations of a subject. The same applies to theoretical examinations. As a result, the student may have to repeat a level for a year, leading to fewer students graduating at the end of four years.

The statement above is supported by the College Campus Annual Absenteeism Report and Statistic (2016), from the college where the

Principal investigator is employed, and the report indicates a fluctuating trend of student nurse’s absenteeism rate. Figure 1.1 presents a histogram on absenteeism rates between 2013 and 2016, for level III and level IV, during PNS clinical placements.

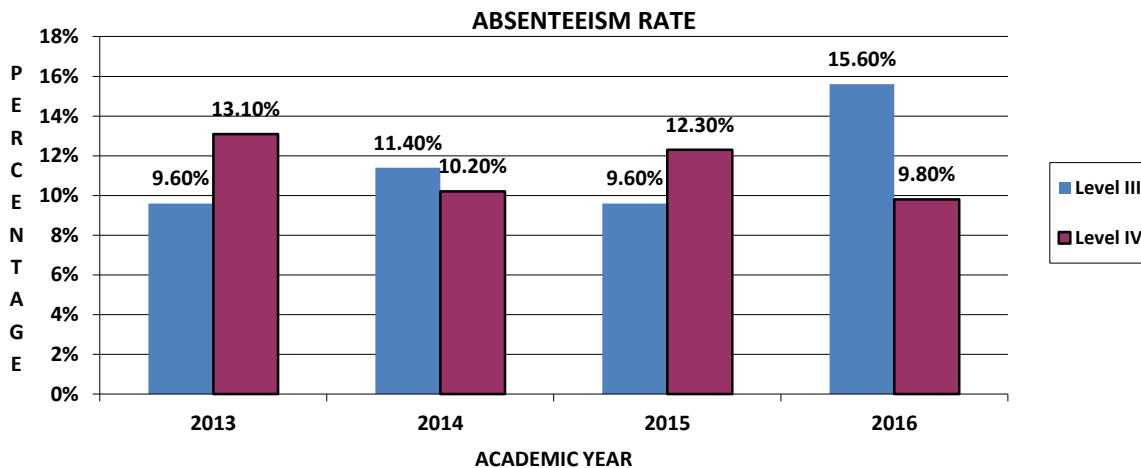


Figure 1.1 Absenteeism rates between 2013 and 2016 for level III and level IV, during PNS clinical placements (Giyani Campus Clinical Annual Report, 2016).

Based on the information provided in Figure 1.1, level IV had a higher rate of absenteeism in 2013 and 2015 than level III, whereas level III had a higher rate of absenteeism in 2014 and 2016 than level IV.

In the light of these high rates of absenteeism the study was conducted on factors leading to student nurse’s absenteeism in the Limpopo College of Nursing, during the Psychiatric Nursing Science clinical placement.

1.3. THE PURPOSE OF THE STUDY

According to Burns and Grove (2016), and Brink (2016), the research purpose is generated from the problem and it clearly and concisely states the aim of the study, it also establishes the general direction of the enquiry as well as

capturing the essence of the study. The purpose of the study was to investigate factors leading to student nurses' absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement.

1.4. THE RESEARCH QUESTION

A research question is an interrogative statement and used for the same purposes as objectives (Brink, 2016).

The research question guiding the study was:

What are the factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement?

1.5. THE OBJECTIVES OF THE STUDY

Research objectives are specific accomplishments the principal investigator hopes to achieve by conducting the study. These include answering research questions or testing research hypotheses but may also encompass some broader aims (Burns & Grove, 2016; Brink, 2016; Polit & Beck, 2017).

The objectives of this study were to:

- identify personal factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.
- investigate clinical factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.
- determine college factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.

1.6. SIGNIFICANCE OF THE STUDY

The evidence from the study must have the potential of contributing meaningfully to nursing practice and health sciences, within the context of the existing body of evidence the new study should be the right next step. (Burns & Grove, 2016; Brink, 2016; Polit & Beck, 2017).

Lecturers

In sharing the results of the study, lecturers of the Limpopo College of Nursing might obtain knowledge on factors that are leading to student nurses' absenteeism during the Psychiatric Nursing Science clinical placement, and they may then be able to deal with those factors.

Student nurses

Student nurses at the Limpopo College of Nursing might be able to express their feelings on the clinical allocation at mental health institutions, as well as working conditions. In sharing the results of the study, it may be possible to work on improving their experiences and conditions.

Mental health institutions

In sharing the results of the study, mental health institutions might obtain the scientific information on factors leading to absenteeism amongst student nurses during clinical placement and they may be able to prevent absenteeism by dealing with those factors.

The Limpopo College of Nursing

In sharing the results of the study, the college would benefit as the findings of the study might influence the curriculum review.

The Department of Health

The Department of Health might also have knowledge on factors leading to student nurses' absenteeism at Mental Health Institutions and help in reviewing policies regarding absenteeism of student nurses and then low rate of absenteeism might improve patient care.

The body of knowledge

The research might benefit as the study will add information to the body of knowledge about factors leading to student nurses' absenteeism for further research on the related topics.

1.7. RESEARCH METHODOLOGY

1.7.1 Research design and methods

A quantitative, descriptive design was used in this study. Descriptive designs are designs that are concerned with gathering information from a sample of the population and the emphasis in the collection of data is on structured observation, questionnaires and interviews or survey studies. An advantage of descriptive design is that there is no manipulation of variables

by the principal investigator (Brink, 2016). In this study, the research methods and reasons given will be discussed in detail in chapter 3.

1.7.2 Study setting

The setting is the location where the study is conducted (Burns & Grove, 2016). Polit and Beck (2017) define the research setting as the physical location and conditions under which data collection takes place in a study.

The study was conducted at the Limpopo College of Nursing that comprises of five campuses offering the four-year nursing programme. The study was conducted in three Campuses only, because Waterberg and Sekhukhune campuses train level I students only. The campuses included in the study are: the Giyani campus in the Mopani District, the Thohoyandou campus in the Vhembe District, and the Sovenga campus in the Capricorn District, all of the Limpopo Province in South Africa. A detailed description of the study setting will be outlined in chapter 3.

1.7.3 Population and sampling

Population

A Population is described as the entire group of persons or objects that the principal investigator has interest on, regarding the topic to be studied and further the group meets the criteria the principal investigator is interested in studying (Burns & Grove, 2016; Brink, 2016).

The study population was level III and level IV students registered for the R425 nursing program at Giyani, Thohoyandou, and Sovenga campuses of the Limpopo College of Nursing.

Sampling Method

Sampling is a selection process of a group of people or elements which the principal investigator will conduct the study with (Burns & Grove, 2016). Sampling occurred in two stages, namely: sampling of campuses and sampling of respondents. Details of the sampling method will be discussed in chapter 3.

1.7.4 Data collection

Data collection is the precise, systematic gathering of information relevant to the research purpose or specific objective, questions, or hypothesis of the study (Burns & Grove, 2016). In this study, data collection was done through a self-report scale in the form of questionnaires. A detailed process of this will be discussed in chapter 3.

1.7.5 Data analysis

Data analysis includes reduction, organizing, and giving meaning to the data collected (Burns & Grove, 2016). Descriptive statistics refer to numerical measures that describe and summarize data (such as, mean and standard deviation), and inferential statistics is defined as statistics that permit inferences about whether the results observed in a sample are likely to be found in the larger population (Polit & Beck, 2017).

In this study, a statistical analysis of data was done using Statistical Package for Social Sciences (SPSS) version 24. Details of the analysis will be discussed in chapter 3.

1.7.6. Ethical consideration/s

The study has adhered to the following ethical principles:

- Permission to conduct a study
- Informed consent
- Confidentiality
- Principle of justice
- Principle of non-maleficence

The principles will be explained in full in chapter 3

1.8 DEFINITION OF CONCEPTS

In this study, concepts are defined conceptually and operationally.

Absenteeism

Student absenteeism refers to instances where a student fails to attend any scheduled meetings, such as classes, lectures, tutorials, workshops or seminars or laboratory sessions without prior permission (Thekedam, 2013).

In this study, absenteeism refers to the absence of student nurses during their psychiatric clinical placement at Evuxakeni, Donald Fraser, Siloam, Hayani and Thabamoopo Hospitals.

Clinical placement

Placement in practice settings, which we also call ‘clinical placements’ or ‘practice placements’, enables nursing students to learn from clinical encounters with patients, clients, families and communities, and to meaningfully transfer learning from theory to practice (Mellish, Klopper & Bruce, 2011).

In this study, clinical placement means allocation of students at the Evuxakeni, Donald Fraser, Siloam, Hayani and Thabamoopo Hospitals.

Student nurse

A student nurse is a person who is studying, especially at university or another place of higher education (Allen, 1993).

In this study, a student nurse refers to students who are in their level III and level IV of study at Giyani, Thohoyandou and Sovenga campuses of the Limpopo College of Nursing.

1.9. THEORETICAL FRAMEWORK

Maslow, in a 1943 paper, called *A Theory of Human Motivation*, presented the idea that human actions are directed towards goal attainment. Maslow's *Hierarchy of Needs* shows an understanding of why students behave the way that they do and in determining how learning may be affected by physiological or safety deficiencies.

Absenteeism of student nurses and Maslow's Hierarchy of Needs

One of the objectives of this study was to identify personal factors leading to student nurses' absenteeism at the Limpopo College of Nursing, during the Psychiatric Nursing Science clinical placement.

According to Maslow (1943), physiological needs that are related to the identified objective are safety needs, love and belonging needs, and self-actualization needs. Without meeting these needs first, students cannot perform their duties well when placed in the clinical areas therefore they may absent themselves from work in order to try and satisfy them. The student nurse needs a good environment as a motivation to learning. A broken family can affect performance and attendance of student. On the other hand, students can feel motivated to attend clinical teachings and practical tasks if they are placed in a secure working environment that is free from harm (Sarah, Burleson, and Andrew 2013).

Students want to feel loved and cared for by lecturers and fellow students. When individuals feel deprived of love and belongingness, they hunger for affectionate relationships with people outside the institution, which can increase absenteeism (Kaur, 2013). Students have the desire to become everything that they are cable of becoming, to develop their fullest potential.

An individual is motivated by a desire for personal growth. Maslow (1943) indicates that few individuals will ever fully reach this level. Self-actualized individuals are spontaneous, problem-centered and autonomous. Self-actualized employees represent valuable assets to the organization, and should be supported in achieving their personal growth. It is also important for students to obtain support from lecturers in their personal growth, so that they are motivated to achieve more, which will reduce absenteeism (Sarah, Burleson, and Andrew 2013).

Section 2 of the questionnaire sought to find information regarding personal factors that contribute to student nurses' absenteeism. Respondents were required to indicate whether any of the factors affected them, and which may contribute to their absenteeism in the clinical areas. The section above met the objective to identify personal factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.

1.10. OUTLINE OF THE DISSERTATION

The chapters in this dissertation are organized as follows:

Chapter 1: Orientation to the study

Chapter 2: Literature review

Chapter 3: Methodology

Chapter 4: Discussion of the results

Chapter 5: Conclusion, Limitation and Recommendations

1.11. SUMMARY

This chapter presented an introduction and background to the study, purpose, research question, objectives, research methodology and significance of the study.

The following chapter presents the literature review relating to the study.

CHAPTER 2

LITERATURE REVIEW

2.1. INTRODUCTION

The purpose of the literature review in this study was to obtain information relevant to factors leading to student nurses' absenteeism in the Limpopo College of Nursing during their Psychiatric Nursing Science clinical placement. The literature review is divided into the following sub-topics: types of absenteeism, personal factors leading to student nurses' absenteeism, factors leading to student nurses' absenteeism in clinical areas, college factors leading to student nurses' absenteeism and implications of student nurses' absenteeism.

2.2. TYPES OF ABSENTEEISM

Singh (2012) classifies types of absenteeism as the following: sickness absence, authorized absence, and unauthorized absence. On the other hand, UKessays (2013) has classified absenteeism into the following types:

2.2.1. Authorized absenteeism

If an employee absents themselves from work with permission from their supervisor and having applied for leave.

2.2.2. Unauthorized absenteeism

If an employee absents himself from work without informing or obtaining permission from his supervisor, and without applying for leave.

2.2.3. Wilful absenteeism

If an employee absents himself from work wilfully.

2.2.4. Absenteeism caused by circumstances beyond one's control

If an employee absents himself from work, owing to a situation beyond their control, such as an accident or infection.

2.3. PERSONAL FACTORS LEADING TO STUDENT NURSES' ABSENTEEISM

Fayombo (2012) revealed that students are absent from lectures due to several reasons such as student-centred issues, home problems, school related issues and societal issues. Furthermore, the study revealed that amongst the two universities, gender was associated with causes of absenteeism at the University of Nigeria, and not associated with causes of absenteeism at the University of Bardados. Baloyi (2014) agrees with the study by concluding that nursing students absent themselves from class due to student-school and home-related factors. Bati, Mandiracioglu and Orgum (2013) claim that difficulty in adaptation to the college or university environment causes absenteeism amongst students.

On the contrary, Singh (2012) discovered that factors such as stress-related illnesses, absence of positive feedback from managers, high work load of nurses, and shortage of nursing staff cause absenteeism of student nurses. Furthermore, Singh (2012) also revealed that demographic variables have no effect on absenteeism. Awuah-Peasah, Sarfo and Asamoah (2013) indicate that the majority of the nursing students reported late to work, were absent from their clinical work without permission, and use mobile phones during clinical working hours. On the other hand, Singh (2015) states that there are other factors contributing to absenteeism, including dissatisfaction with organizational and personal factors, for instance, effects of HIV/AIDS, social problems, sickness presence and adapting to independent life-style. The study further indicates that when students are faced with heavy loads,

theoretically and practically, many are unable to cope which results in absenteeism. UKessays (2013) states that many causes of absenteeism are legal personal illness or family issues, but it also can be due to other factors, such as poor working conditions, or workers who are not devoted to their work.

2.4. FACTORS LEADING TO STUDENT NURSES' ABSENTEEISM IN CLINICAL AREAS

A study conducted in the United Kingdom by UKessays (2015), generalized that absenteeism from the workplace is associated with the nature of work, poor working conditions, absence of regular leave arrangements, accidents, poor control, irregular transport facilities, lack of interest, indebtedness, alcoholism and gambling habits, as well as the low level of wages. According to Suresh, Matthews and Coyne (2012), stress continues to be a problem for nurses, due to excessive workloads, and this requires urgent attention by nurse managers in order to retain staff.

Singh (2012) stipulates some of the variables that could lead to absenteeism of nurses in the workplace, as characteristics of the nurse, manager, workplace and organization, and also indicates that inconsistency of policies and procedures might create job dissatisfaction and, thus, perpetuate absenteeism. According to the study's findings, there is no relationship between demographic variables and student nurse absenteeism. Singh (2012) study also revealed that the following characteristics have no effect on absenteeism: laissez-faire management style of the nurse manager, lack of job description for nurses, poor orientation about the job, and working overtime.

Thobakgale, Lekhuleni and Kgole (2013) support the findings of the study by revealing that student nurses were absent from clinical areas, due to shortage of staff, work overload, being treated as workforce, and dealing with their own family problems. The study concluded that when learner nurses are treated as a workforce, they may absent themselves from the clinical area. Therefore, working conditions may contribute to absenteeism of nurses in the workplace.

Similarly, Awuah-Peasah, *et al.*, (2013) conclude that of students who reported late to work, some of the students were absent from their clinical work without permission and used mobile phones during clinical working hours. However, the majority of the students were committed to clinical work. The study further indicates that nursing students who are absent during clinical working hours, or report late to clinical work are likely to miss important learning opportunities. Even though, nursing students attended general rounds, they did not embark on the opportunity to interact and learn from the medical staff by asking questions.

The study conducted at the Kwazulu-Natal College of Nursing by Singh, (2015) support the study and indicates that most students did not absent themselves due to lack of resources in the teaching/theoretical area, but there is a link between absenteeism and the theoretical and clinical performance of students. Students with prolonged absenteeism performed poorly in tests and clinical assessment, compared with students who did not absent themselves for prolonged periods. It was also evident that it is difficult to predict the levels at which the student will leave, as students can terminate training due to absenteeism at any level of training. The study also revealed that some of the students were nervous during their clinical placements, but anxiety in the clinical placement negatively impacts students' learning.

Furthermore, the study also supports Thobakgale, *et al.*, (2013) report, that most students agreed that problems experienced in the clinical area, such as staff shortage, being treated as workforce, non-supervision by qualified staff members and large patient numbers are reasons why they absent themselves. Most of the factors found to affect student attendance appear to be related to circumstances outside the school administrators. However, one factor that stands out prominently is student's perceptions of the importance of attending their classes. This indicates that student nurses' absenteeism in clinical areas does not only mean being absent from work, but also means reported late to work, long tea and lunch breaks, as well as using mobile phones during clinical working hours. Problems like shortage of staff, being treated as workforce, and work overload of student nurses, seems to be most leading factors to absenteeism in clinical areas.

The South African Department of Health (2015) indicates that student nurses mostly absent themselves from clinical settings due to fear of contracting communicable diseases found in the wards, or if they are already infected, particularly in clinical areas. Many causes of absenteeism are due to personal illness or family issues, for example, but also can often be due to other factors, such as poor working environment, or workers who are not devoted to their work (UKessays, 2015).

2.5. COLLEGE FACTORS LEADING TO STUDENT NURSE'S ABSENTEEISM

Balfanz and Byrnes (2012) indicate that students, who utilize more than one type of public transport to get to school, are often absent or late, as they arrive after the lessons have started. According to West (2012), most of the students reported that a poor classroom environment led to high rate of absenteeism, especially during cold and hot days. Thobakgale (2013) agrees that absenteeism amongst pupil nurses in the nursing schools is associated

with the following factors: teaching methodology, teaching content, learning environment assessment, and social problems. Thekedam (2013) concurs and indicates that lack of interest in the course or subject, and dislike of lecturers teaching the subject, leads to absenteeism. Bati, *et al.*, (2013) claim that factors influencing student absenteeism is the presentation of lessons that are not adequately prepared by the lecturer. Gupta and Lata (2014) agree that poor teacher-student relationships cause absenteeism of students.

Dasalegn, Berhan & Berhan (2014) indicate that missing lectures were associated with the following factors: age of students, field of study, social drug use, lack of interest in the subject matter, preparation for examinations, and disliking the teaching style of the instructors. Similarly, the study conducted by Baloyi (2014), concludes that student nurse's absenteeism is due to several factors, namely, preparation for exams, home-related factors, death in the family, school-related causes, and poor infrastructure in schools. On the contrary, Singh (2015) indicates that students did not view teaching factors, content factors, learning factors, assessment factors and social factors as the reason for absenteeism but Clinical/practical area factors were the main reason student nurses absented themselves. Therefore, student nurses' absenteeism, regardless of the program, is mostly related to classroom factors, rather than clinical factors, as indicated before.

2.6. IMPLICATIONS OF STUDENT NURSES' ABSENTEEISM

According to Boore and Deeny (2012), some level of attrition is expected and reflects the reality that some of those who commence nurse education will discover that they are not suited to nursing. However, it is important to know why individuals decide to leave nursing, and to provide support to

enable those who are suited to nursing and who really wish to complete their education to enter the profession.

On the other hand, Fayombo (2012) indicates that the university of the West Indies in the examination regulation stipulates that, any candidate who has been absent from the university for a prolonged period during the teaching of a course for any reason, other than illness, may be debarred from taking any university examinations. Balfanz and Byrnes (2012) indicate that students who absent themselves from class are likely to fail the course.

On the other hand, Bradshaw and Lowenstein (2014), from the results of clinical assessments, note that most students who absented themselves in the clinical area, also failed their clinical assessments. Issues such as unsafe clinical practice, unprofessional behaviors, attendance, and inability to implement appropriate interventions, falsification of patient's records, omissions in documentation, non-therapeutic communication, and errors in medication administration are all examples of critical elements of practice that may results in clinical practice failure. Several researchers indicate that student nurse absenteeism is increasing at nursing colleges, causing a growing shortage of nurses in most countries, staffing and professional nurses, and it has become a daily challenge for health care administrators (Thobakgale, *et al.*, 2013; Dasalegn, *et al.*, 2014; Singh, 2015). In South Africa, a study conducted at the Kwazulu-Natal College of Nursing, indicates that student nurse absenteeism has a huge impact on training, and that students with prolonged absenteeism are terminated from training (Singh, 2015).

Kumar and Rao (2013), and Gupta and Lata (2014), both claim that students that score lower marks in the test are those who missed the explanation and examples of the content given by the lecturer in class. Lochmiller (2013) supports that student absenteeism tends to result in

future unemployment. Similarly, Singh (2015) notes that there were 14 terminations of student nurse training due to absenteeism, from the three campuses involved in the study. Many nursing students usually leave in the first year of training, usually due to misinformation about nursing. Most did not know that nursing entails a lot of theory and studying, long hours of duty and difficult working conditions.

Bradshaw and Lowenstein (2014), from the results of clinical assessment, agree, and note that most students, who absented themselves in the clinical area, also failed their clinical assessment. Issues such as unsafe clinical practice, unprofessional behaviors, attendance, and inability to implement appropriate interventions, falsification of patient's records, omissions in documentation, non-therapeutic communication, and errors in medication administration are all examples of critical elements of practice that may result in clinical practice failure.

Singh (2015) concurs that student nurse absenteeism has an impact on training and that students with prolonged absenteeism were terminated from training. The study further concludes that since students are absenting themselves due to issues in the clinical area, they were inefficient in their clinical practice, as evidenced by the clinical assessment marks. The study further revealed that some even absented themselves when their clinical assessments were due. Students who absent themselves do not gain valuable knowledge, skills, and experience. Singh (2015) further states that absenteeism is costly, and more effective retention strategies need to be looked at to allow students to complete basic nurse training and become professional nurses. This will assist with the shortage of trained nurses. However, it was noted from the findings that terminations occurred from first year to fourth year. Students appear to be experiencing problems which result in termination at all levels of training.

2.7. SUMMARY

This chapter presented a review of literature on factors leading to student nurses' absenteeism from studies conducted internationally, nationally, and provincially. In the following chapter, the research methodology used in the study will be discussed.

CHAPTER 3

RESEARCH METHODOLOGY

3.1. INTRODUCTION

This chapter presents the study methodology which comprises the research design, the study setting, study population, sampling process, data collection, research instrument used, validity and reliability, data analysis, and ethical considerations.

3.2. RESEARCH DESIGN

Quantitative

A quantitative research design was suitable for this study, since the purpose was to investigate factors leading to student nurses' absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement.

Relevant data related to factors leading to student nurses' absenteeism in Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement was collected. The respondents were given enough time (30 minutes) to complete questionnaires consisting of structured questions in four sections, since this method was a quick way of obtaining data from a large group.

Descriptive

A descriptive research design was used in this study through self-report questionnaires to investigate factors leading to absenteeism of level III and level IV student nurses during Psychiatric Nursing Science clinical placement in Limpopo College of Nursing.

The respondents were given enough time (30 minutes) to describe factors leading to absenteeism of level III and level IV student nurses during Psychiatric Nursing Science clinical placement in Limpopo College of Nursing through questionnaires.

3.3. STUDY SETTING

The study was conducted at the Limpopo College of Nursing that is situated in the Limpopo Province. In Limpopo College of Nursing, there are five (5) campuses offering the four-year nursing programme, which comprises the following subjects: General Nursing Science, Community Nursing Science, Midwifery Science, Psychiatric Nursing Science, Social Science, Biological Nursing Science, and Pharmacology. College campuses were used to access students, since it was an easy way of accessing them.

The study was conducted following the Psychiatric Nursing Science clinical placement for at least six (6) weeks for a particular academic year. The campuses are: Giyani campus in the Mopani District, Thohoyandou Campus in the Vhembe District, and Sovenga Campus in the Capricorn District, of Limpopo Province in South Africa. The study was conducted on three Campuses only, because the Waterberg and Sekhukhune campuses train

level I students only, who are not placed in a PNS clinical area. The setting for data collection was in a classroom for each level on each campus.

3.4. STUDY POPULATION AND SAMPLING

3.4.1. Population

In this study, the population was level III and level IV students registered for the R425 nursing program at Giyani, Thohoyandou, and Sovenga campuses of Limpopo College of Nursing, since Psychiatric Nursing Science is studied at level III and level IV only.

Table 3.1 Total population of student nurses at Giyani, Thohoyandou, and Sovenga campuses of Limpopo College of Nursing.

LEVEL	NUMBER OF STUDENTS PER CAMPUS			TOTAL
	GIYANI	THOHOYANDOU	SOVENGA	
Level III	53	49	18	120
Level IV	28	17	41	86
TOTAL	81	66	59	206

Based on the information provided in Table 3.1, the total population of Limpopo College of Nursing students is two hundred and six (206) for both level III and level IV.

The total number of 206 students, from level III and IV who was/were once absent from the clinical area in Giyani, Thohoyandou, and Sovenga campuses of Limpopo College of Nursing, was/were identified and sampled to participate in the study as these are only campuses that place students in Mental Health Institutions. Level III students were one hundred and twenty (120) and level four students were eighty six (86) and were all included in the study as respondents.

3.4.2. Sampling method

In this study, probability purposive sampling was used. The purposive sampling method is based on the judgment of the principal investigator regarding subjects or objects that are typical or representative of the topic being studied or who are especially knowledgeable about the question at issue (Burns and Grove, 2016).

Sampling occurred in two stages namely; sampling of campuses and sampling of respondents.

Sampling of campuses

In this study, campuses were selected through purposive sampling and the following criterion was also used: only campuses that place students in PNS clinical areas, and train level III and level IV students. The study was conducted in Limpopo College of Nursing situated in Limpopo Province, since the principal investigator is employed at one of these campuses. In Limpopo College of Nursing there are five (5) campuses offering the four-year nursing programme as discussed in study setting. College campuses were used to access students, since it was the easy way of accessing them.

Therefore, the study has been conducted in three Campuses only because Waterberg and Sekhukhune campuses train level I students only.

Sampling of respondents

Purposive sampling method was used whereby the principal investigator selected respondents based on the level of study and this involved all readily available respondents who were willing to participate in the study. A total population of two hundred and six (206) respondents was sampled from the three campuses, since the number was minimal. Level III was eighty one (81) students. Level IV was one hundred and twenty five (125) students.

3.4.3. Inclusion criteria

Students who were selected were registered for the R425 nursing program at Limpopo College of Nursing. Those students were from Giyani, Thohoyandou, and Sovenga Campuses. All respondents were Psychiatric Nursing Science students' level III and IV who were placed in the mental health institutions for at least six (6) weeks in a particular academic year.

3.5 DATA COLLECTION PROCESS

3.5.1. Recruitment

Since the eligible respondents were already identified, the respondents were visited in their respective classrooms to recruit them a day before the study. The potential respondents were informed about the purpose and nature of the study as outlined in the respondent's information sheet. See annexure E

3.5.2. Preparation

The principal investigator obtained permission from the campus Vice Principals in the three campuses, Psychiatric Nursing Science HODs and lecturers. The principal investigator went to all three campuses on the appointment days separately. The venues were already prepared as the study was conducted in their usual classrooms. A note was written and pasted on the door of the classroom to show that research is in progress to avoid distraction. Oral instructions were given to the respondents regarding questionnaires. The nature and purpose of the study was explained in full again, including ethical considerations according to the information sheet, see Annexure E. The respondents who volunteered to participate in the study were given a consent form to sign before taking part in the study to indicate that they understand the nature and process of the study and that they were participating willingly. General rules on how to complete the questionnaire and the importance of filling in all questions were included.

3.5.3. Data collection

The questionnaires were administered in the respondents' classrooms. The respondents filled in the questionnaire which comprised our sections, while the principal investigator was waiting in the classroom to provide support and clarify where respondents did not understand.

3.6. DATA COLLECTION INSTRUMENT

A self-report scale in the form of questionnaires was used to collect data as they were a quick way of obtaining data from a large group. The questionnaire was constructed using different formats of samples from the

internet. A questionnaire was used in the study to encourage respondents to be more honest by providing anonymity. And it was also easy for the responses to be administered and score.

According to Burns and Grove (2016), and Polit and Beck (2017), a questionnaire is an effective tool for collection of data on a large scale. It allows respondents to write their responses and views in a way that suits them, and in their spare time, without being intimidated by the principal investigator.

Structured close ended questions were used in the questionnaire.

The questionnaire consisted of four (4) sections:

Section 1- Student's demographic data

Section 2- Personal factors leading to absenteeism

Section 3-Factors in the clinical area that leads to student nurses' absenteeism

Section 4- College factors leading to students' absenteeism

The questionnaire was in English, based on the common spoken language of the target group. See Annexure I₂.

3.7. RELIABILITY

According to Brink (2016), and Polit and Beck (2017), reliability of data-collection instrument is the degree to which the instrument can be depended upon to yield consistent results if used repeatedly over time on the same person or used by two researchers and refers to the accuracy and consistency of information obtained in the study.

The research instrument was checked and modified by the supervisor and the panel in the department of health and school of higher degree during

presentations and the principal investigator made changes as advised. The same questionnaires were used to all groups that were involved in the study and it was used the same way for all respondents.

3.8. VALIDITY

According to Brink (2016), validity seeks to ascertain whether an instrument accurately measures what it is supposed to measure.

Burns and Grove (2016), and Polit and Beck (2017) define validity as the degree to which an instrument measures what it is supposed to measure.

The instrument questions met the objectives of the study.

Face validity

According to Brink (2016), face validity refers to whether the instrument appears to measure what it is supposed to measure based on an intuitive judgment made by experts in the field.

The questionnaire was presented to the supervisors, departmental seminars, and higher degrees' committee to ensure face validity. The instrument was modified according to the feedback received. The instrument met the objectives, since questions in all sections were meant to identify, investigate and determine factors leading to student nurses' absenteeism.

Content validity

Content validity is an assessment of how well the instrument represents all components of the variable to be measured (Brink, 2016).

To test for content validity, the questionnaire was constructed after an extensive literature review. The tools that were used in studies with similar interests as the study being conducted were reviewed. The instrument was presented at several panels of research seminars to evaluate the content validity, among the panel there were supervisors and lecturers from the Department of Health Science. The feedback was used to modify the instrument. The principal investigator was objective and did not allow subjective feelings and thoughts to influence data collection questions to prevent bias.

3.9 PRE-TEST

According to Polit and Beck (2017), pre-test is the trial administration of a newly developed instrument to identify flaws or assess time required for collection of data. The aim of the pre-test was to detect any possible problems and gaps from the instrument, and amend the questionnaire before the main study is conducted.

A pre-test of the questionnaire was done to ensure its accuracy by identifying and rectifying problems prior to main study. See Annexure I₁.

The instrument was pre-tested to 10% (23) of students who did not take part in the main study, but share the same characteristics as the main study population. Nine 4% (9) students from level III and fourteen 6% (14) students from level IV and the consent was obtained. The completed

questionnaires were presented to the supervisor and colleagues in a workshop for validity, and gaps were identified.

According to the findings, the pre-test questionnaire had section 1 of demographic data which includes marital status and it was debated on, and the results revealed that there is no connection between students' absenteeism and marital status. The section was removed from the questionnaire. The pre-test questionnaire had four aspects to indicate students answer which were: agree, strongly agree, neutral, disagree and strongly disagree. Those changes were made and the corrected questionnaire only had two aspects (yes and no). Some of the questions were two in one and that was also corrected. Some of the questions were ambiguous in a pre-test questionnaire and clear questions replaced them. See Annexure I₁.

3. 10. DATA ANALYSIS

In this study, data was analyzed using statistics. The Statistical Package for Social Sciences (SPSS) software version 24 was used to analyze data. Descriptive and inferential statistics were performed to analyze data.

3.11. ETHICAL CONSIDERATIONS

Ethical considerations were ensured throughout the study to protect the rights of the respondents. The research proposal was submitted to the Department of Health, Higher Degrees Committee then later to Research Ethics Committee of the University of Venda for approval. Respondents gave consent by signing consent forms before participating in the study.

Anonymity and confidentiality were maintained throughout the study. These are described below

Permission to conduct the study

The permission was sought from the following stake holders:

University Higher Degree Committee. See Annexure A.

Research Ethics Committee of the University of Venda. See Annexure B.

The Limpopo Province Department of Health. See Annexure C.

The Vice Principals of Giyani, Thohoyandou and Sovenga campuses. See Annexure D.

Informed consent

Information about the study was given to respondents before the consent form was signed, as indicated in the information sheet. See Annexure E. Respondents signed a consent form before taking part in the study to indicate that they understand the nature and process of the study and that they were participating willingly. They were assured that they can withdraw even after consenting to cooperate in the research.

Non-maleficence (No harm to respondents)

Non-maleficence was ensured by eliminating questions which provoke individuals or belittle or demean respondents. The environment in which questionnaires were administered was safe for respondents since it was in their usual classroom.

Principle of justice

In this study, manipulating the respondents based on status was avoided. The principal investigator was respecting any agreements made with them including punctuality per time agreed upon.

Confidentiality

The information provided by respondents was not shared with anyone. Confidentiality was also ensured by safe keeping of questionnaires.

Anonymity

The respondents were requested not to write their names on the questionnaire because those who are often absent from work might feel uncomfortable to answer some of the questions because they might think that the questionnaire is designed to assess their behaviour.

3.12. SUMMARY

In this chapter, the study methodology which comprises the research design, the study setting, and theoretical framework that guided the study, study population and sampling process, data collection, research instrument used, data analysis, validity and reliability and ethical considerations were presented. In the following chapter discussion of the results will be presented.

CHAPTER 4

DISCUSSION OF THE RESULTS

4.1 INTRODUCTION

This chapter presents findings of the study. Responses from study respondents were compiled into frequency tables and converted into percentages and presented in charts, bar graphs and tables. This was done to facilitate easy analysis and understanding of data of the study that sought to investigate factors leading to student nurses' absenteeism in the Limpopo College of Nursing, during the Psychiatric Nursing Science clinical placement.

Data was analysed based on the study specific objectives and results related to specific study objectives are presented in the subsequent sections. Two hundred and six (206) questionnaires were distributed to respondents who consented to participate in the study and 204 questionnaires were satisfactorily filled in and returned, thus the response rate was 99%.

4.2 DEMOGRAPHIC INFORMATION

In order to gather demographic information of study respondents, questions on issues such as age, gender, levels of study, number of days respondents were absent in PNS clinical areas were asked in the first section of the questionnaire.

Respondent's demographic information

Age of respondents

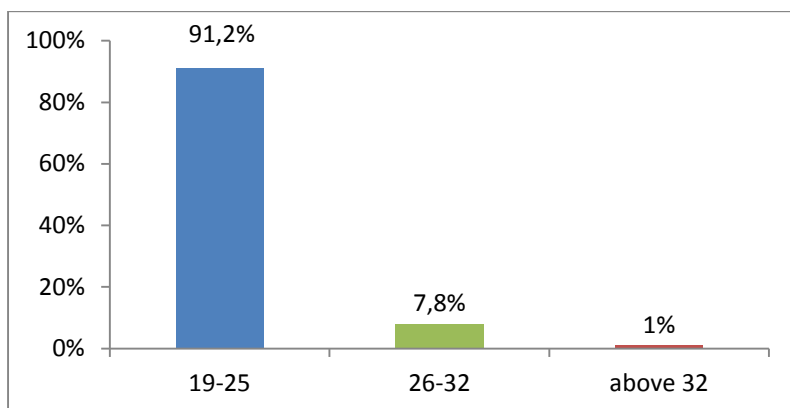


Figure 4.1 Age distribution of respondents (N=204)

Of 204 respondents, with regards to age, the majority of them 186 (91.2%) were of the age group 19-25 years, while 16 (7.8%) were in the age group 26-32 years. However, only 2 (1%) respondents were above 32 years old. It is evident from the findings that majority of the nursing students are 19-25 years old, while there are few students who are above 32 years old. Similarly, Singh (2015) indicates that the majority of the respondents 62% were between ages of 19-25, whilst 26, 2% fell into the 26-32 year age group.

Based on the information of respondents provided in Figure 4.1, respondents varied from adolescents to young adults. Berhan and Berhan (2014) support the study by indicating that missing lectures were associated with the following factors: age of students, field of study, social drug use, lack of interest in the subject matter, preparation for examinations, and disliking the teaching style of the instructors.

Gender of respondents

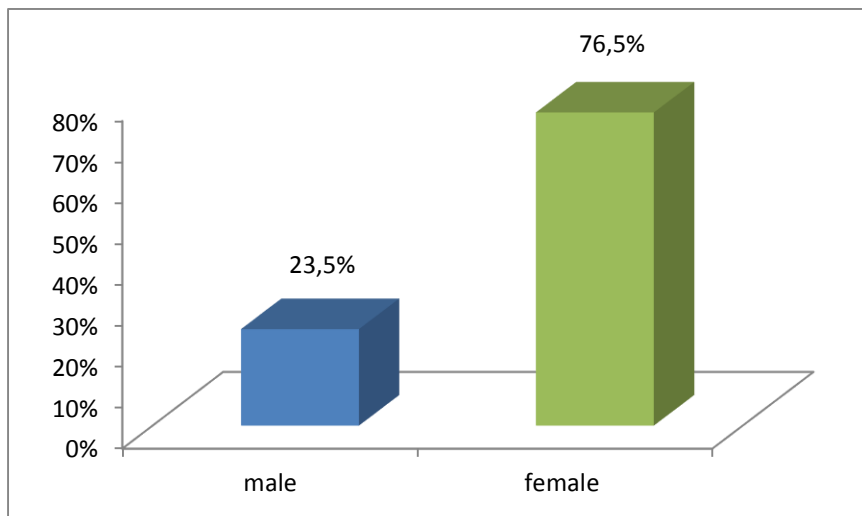


Figure 4.2 Gender distribution of respondents (N=204)

Of the 204 respondents, majority 156 (76.5%) are female students, while 48 (23.5) are male students, as indicated in Figure 4.2. From these findings, it is clear that most nursing students who participated in this study are females. Singh (2015) indicates that the majority of respondents, 73, 4 % were females whilst 26, 6% were males.

Based on the information of respondents provided in Figure 4.2, female respondents were more than male respondents in number.

Levels of study

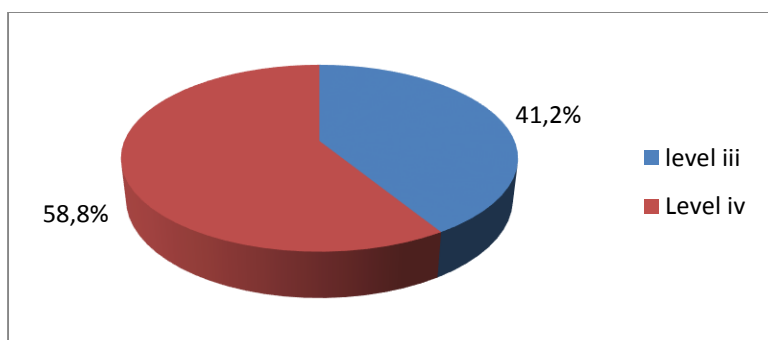


Figure 4.3 Respondents level of study (N=204)

Of the 204 respondents, majority 120 (58.8%) are in level III, while 84 (41.2%) are in level IV of their nursing studies. It is evident that most of the nursing students who were respondents in this study are in level IV.

Based on the information of respondents provided in Figure 4.3, level III respondents were more than level IV respondents in number. Baloyi (2014) states that from the analyses it was evident that the age of students and student lack of interest in the studies demonstrated a negative relationship. Moreover, the level of study and student absenteeism also shows a moderate negative relationship. The study concludes that students in higher levels of study experience less of lack interest in their studies than lower level students.

Number of days respondents were absent in PNS clinical areas

Table 1 below indicates that of the 204 respondents, most 116 (57%) respondents have been absent for a day in PNS clinical areas. Furthermore, some 32 (16%) respondents were absent for 2 days, while some 21 (10.2%) were absent for 3 days in the PNS clinical areas. Moreover, few 11 (5.2%) respondents were absent for 4 days, while few 14 (7%) respondents were absent for 5 days from PNS clinical areas. With regards to respondents who were absent for 6, 7, 10 and 11 days, only few 3 (1.4%), very few 1 (0.4%), very few 2 (0.9%) and few 4 (1.9%) respondents were absent in the PNS clinical areas respectively. However, none of the respondents were absent for 8 and 9 days in the PNS clinical areas.

Table 4.1 Distribution of number of days respondents were absent in PNS clinical areas

Number of days	Frequency	(%)
1 day	116	57
2 days	32	16
3 days	21	10.2
4 days	11	5.2
5 days	14	7
6 days	3	1.4
7 days	1	0.4
8 days	0	0
9 days	0	0
10 days	2	0.9
11 days and more	4	1.9
Total	N=204	100

4.3 PERSONAL FACTORS LEADING TO STUDENT NURSES' ABSENTEEISM

Section 2 of the questionnaire sought to find information regarding personal factors that contribute to student nurses' absenteeism. Respondents were required to indicate whether any of the factors affect them by indicating whether they have them or not, of which may contribute to their absenteeism in the clinical areas. The data is presented per question to reflect the responses of question items according to the questionnaire for the purpose of relate analysis and interpretation.

I have a medical condition

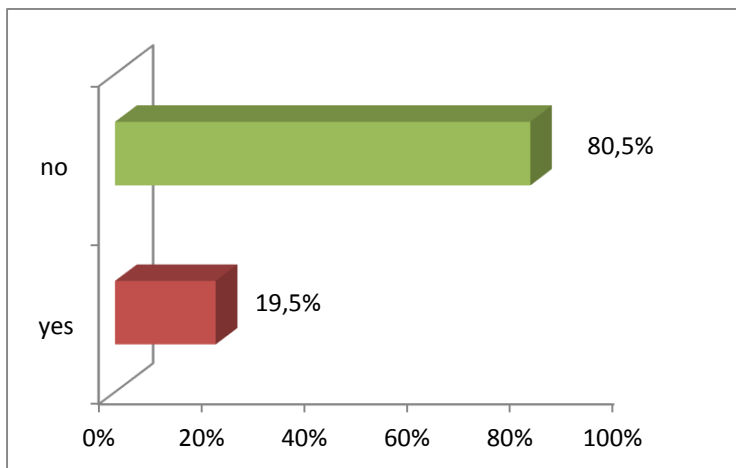


Figure 4.4 Respondents' responses on medical condition as a personal factor leading to students' absenteeism (N=200).

Of the 204 respondents, 200 (98%) responded to the question of this subsection, of which the majority 161 (80.5%) respondents indicated that they do not have a medical condition, while 39 (19.5%) suffer from a medical condition. It is evident from the findings that the majority of 161 (80.5%), of the respondents do not have any medical condition which may lead to their absenteeism in PNS clinical areas.

Based on the information of respondents provided in Figure 4.4, few 39 (19, 5%) respondents were absent due to a medical condition.

The findings indicate that respondents do not have personal factors which may cause them to be absent from PNS clinical areas. However, Desalegn, Berhan and Berhan (2013) indicate that there are several studies indicating a link between absenteeism and lack of subject matter interest, ill health and sleeplessness. On the other hand, Singh (2015) states that there are other factors contributing to absenteeism including dissatisfaction with organizational and personal factors, for instance effects of HIV/AIDS, social problems, sickness presence and adapting to independent life-style.

Bam and Naidoo (2014) state that studies need to focus on nurses who are HIV infected in order to understand their needs and how their positive status impacts on the care they give to patients with HIV. Nurses who are HIV positive also require support during the course of their duties and understanding the needs of HIV positive nurses should improve patient care outcomes and reduce absenteeism.

I have relationship problems

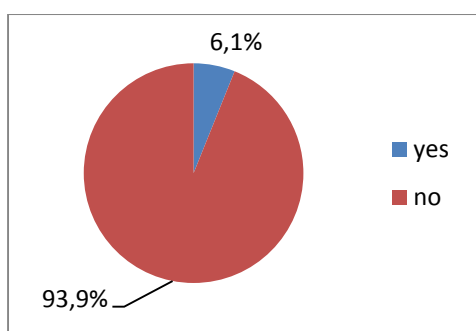


Figure 4.5 Respondents' responses on relationship problems as a personal factor leading to students' absenteeism (N=197)

Of the 204 respondents, 197 responded to this question of which the majority 185 (93.9%) indicated that they do not have, while few 12 (6.1%) stated that they have relationship problems. The findings might indicate that respondents do not have relationship problems which may cause them to be absent from PNS clinical areas.

Based on the information of respondents provided in Figure 4.5, few (6,1%) respondents were absent due to relationship problems.

I have Family problems

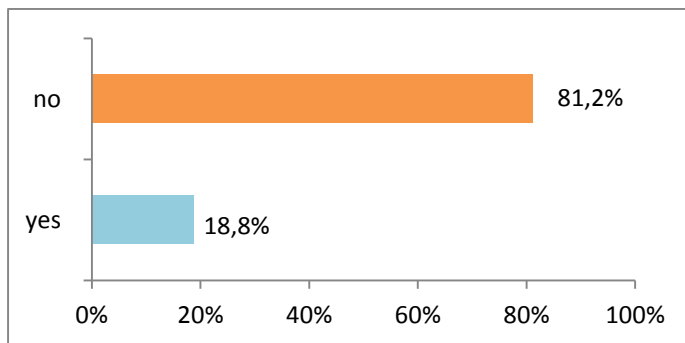


Figure 4.6 Respondents' responses on family problems as a personal factor leading to students' absenteeism (N=197)

Of the 197 respondents, majority 160 (81.2%) of the respondents indicated that they do not have family problems, while some 37 (18.8%) claimed that they had family problems which lead to absenteeism. The findings might indicate that most respondents do not have family problems affecting them, therefore, their absence in the PNS clinical areas cannot be associated with family problems as a factor contributing to students' absence in the clinical area.

Based on the information of respondents provided in Figure 4.6, few (18,8%) respondents were absent due to family problems. On the contrary, Kaur (2013) indicates that Love and belonging needs include friendships, peer support, family relations as well as the ability to give and receive love. Students want to feel loved and cared for by lecturers and fellow students. In the organization, employees should be encouraged to participate in social events like picnics and get-togethers as a group for them to feel as if they are family. When individuals feel deprived of love and belongingness, they hunger for affectionate relationships people outside the institution which can increase absenteeism.

I have an Alcohol abuse problem

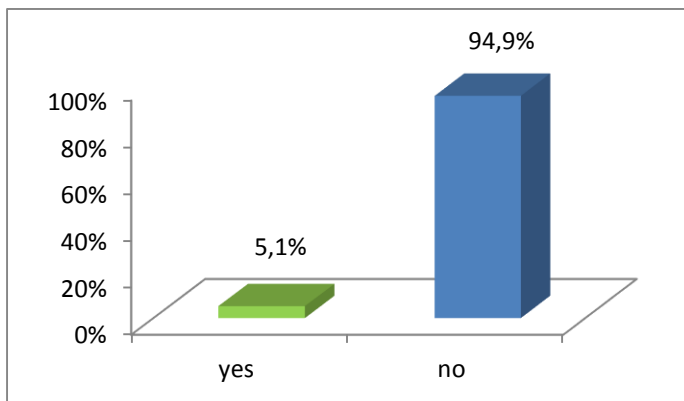


Figure 4.7 Respondents' responses on an alcohol abuse problem as a personal factor leading to students' absenteeism (N=197)

Of the 197 respondents, the majority 187 (94.9%) respondents reported not to have an alcohol abuse problem, while few 10 (5.1%) respondents have an alcohol abuse problem. From these findings it can be said that most respondents do not have alcohol abuse problem as a personal factor leading to student nurses' absenteeism in the PNS clinical areas.

Based on the information of respondents provided in Figure 4.7, few (5, %) respondents were absent due to an alcohol abuse problem. On the contrary, a study conducted in United Kingdom by UKessays (2015) generalized that absenteeism at workplace is associated with nature of work, poor working conditions, absence of regular leave arrangements, accidents, poor control, irregular transport facilities, lack of interests, indebtedness, alcoholism and gambling habits, as well as low level of wages.

I have a drug abuse problem

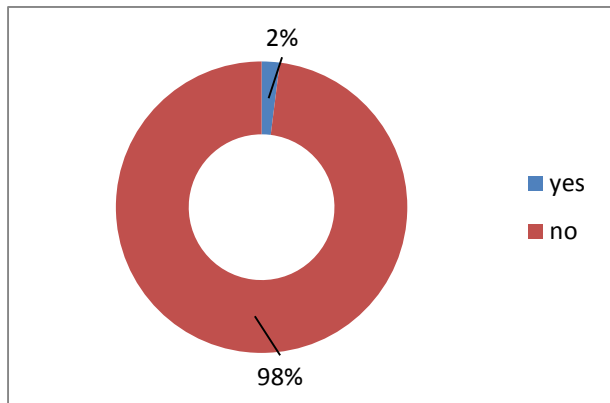


Figure 4.8 Respondents' responses on a drug abuse problem as a personal factor leading to students' absenteeism (N=197)

Of the 197 respondents, majority 193 (98%) of the respondents indicated that they do not abuse drugs, while very few 4 (2%) suffer from a drug abuse problem as indicated in Figure 4.8. From these findings, it is evident that respondents do not have drug abuse problem as a personal factor leading to their absenteeism in the PNS clinical areas.

Based on the information of respondents provided in Figure 4.8, few (2%) respondents were absent due to a drug abuse problem. Dasalegn, Berhan and Berhan (2014) support the study by indicating that missing lectures were associated with the following factors: age of students, field of study, social drug use, lack of interest in the subject matter, preparation for examinations, and disliking the teaching style of the instructors.

I have a financial problem

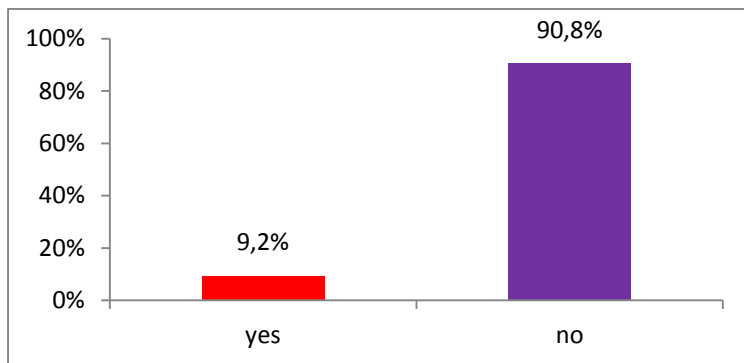


Figure 4.9 Respondents' responses on financial problem as a personal factor leading to students' absenteeism (N=195)

Of the 195 respondents who responded to this question majority 177 (90.8%) respondents had no financial problem, while 18 (9.2%) have a financial problem as a factor leading to student nurses' absenteeism in the PNS clinical areas. It is evident from the findings that respondents do not have financial problem to make them absent in the PNS clinical areas.

Based on the information of respondents provided in Figure 4.9, few (9,2%) respondents were absent due to a financial problem. On the other hand, Ozguner and Ozguner (2014) indicate that the organization helps individuals satisfy their basic needs by providing salaries, benefits, and good working conditions because once these basic needs are satisfied to a reasonable degree, the individual then becomes aware of higher-level needs thus increases morale resulting in lower rate of absenteeism.

Other personal factors contributing to absenteeism

In this subsection, respondents were required to mention any other personal factors not mentioned in the questionnaire, which may contribute to their absence in the clinical areas.

Table 4.2 Other personal factors contributing to students' absenteeism (N=3)

Factors	Frequency	%Total
Sports	1	33.3
Being left by the bus	1	33.3
Studying for supplementary exam	1	33.3
Total	3	100

Of the 204 respondents, few 3 (1.4%) of them responded to this question of which, few 1 (33.3%) mentioned sports as his/her personal factor, while another 1 (33.3%) respondent mentioned being left by the bus as his/ her personal factor leading absenteeism in the clinical areas. On the other hand, another 1 (33.3%) respondent mentioned studying for a supplementary exam as his/her personal factor.

Based on the information of respondents provided in Table 4.2, few (1.4%) respondents were absent due to other personal factors. Similarly, a study conducted in United Kingdom by UKessays (2015) generalized that absenteeism at workplace is associated with nature of work, poor working conditions, absence of regular leave arrangements, accidents, poor control, irregular transport facilities, lack of interests, indebtedness, alcoholism and gambling habits, as well as low level of wages.

4.3.8 A cross tabulation of demographic characteristics and personal factors leading to students' absenteeism

Table 4.3 Association between respondents' demographic characteristics and personal factors leading to students' absenteeism

Variables	Personal factors leading to students 'absenteeism		
	yes	no	P value
age			
0.304			
19-25	8	172	
26-32	2	13	
Above 32	0	2	
Gender			
0.219			
male	4	43	
female	6	144	
level of study			
0.137			
Level iii	2	82	
Level iv	8	105	

Table 4.3 indicates that the relationship between age and personal factors leading to students' absenteeism is not statistically significant ($P > 0.05$). Furthermore, Table 4.3 indicates that the relationship between gender and personal factors leading to student nurses' absenteeism is not statistically significant ($P > 0.05$). Moreover, Table 4.3 also indicates that the relationship between level of study and personal factors leading to students' absenteeism is not statistically significant ($P > 0.05$).

4.4 FACTORS IN THE CLINICAL AREA LEADING TO STUDENT'S ABSENTEEISM

Section 3 of the questionnaire sought to collect information on the views of respondents regarding factors in the clinical areas that may cause students to be absent in those clinical areas.

There is adequate teaching of necessary practical skills

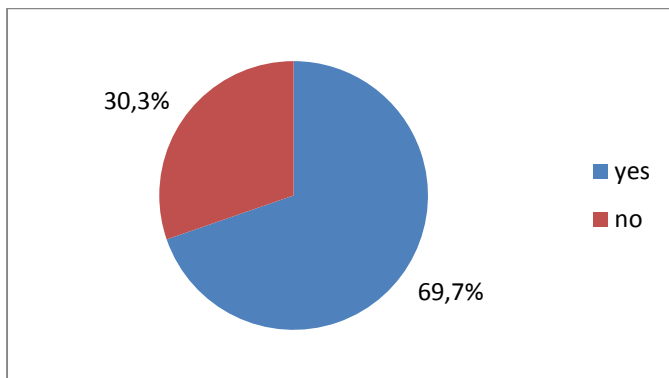


Figure 4.10 Respondents' responses on adequate teaching of necessary practical skills (N=195)

Of the 204 respondents, 195 (95.5%) of them responded to this question. From 195 respondents who responded to the question, the majority 136 (69.7%) indicated that necessary practical skills are adequately taught, while some 59 (30.3%) are of view that necessary practical skills are not adequately taught as shown in Figure 4.10. From these findings, it can be said that respondents view necessary practical skills as adequately taught in their campuses.

Based on the information of respondents provided in Figure 4.10, some (30, 3%) respondents were absent due to inadequate teaching of necessary

practical skills. On the contrary, the study conducted at Kwazulu-Natal College of Nursing indicates that most students did not absent themselves due to lack of resources in the teaching/theoretical area but there is a link between absenteeism and the theoretical and clinical performance of students. Students with prolonged absenteeism performed more poorly in tests and clinical assessments than students who did not absent themselves for prolonged periods.

Students are treated as a workforce in the clinical area

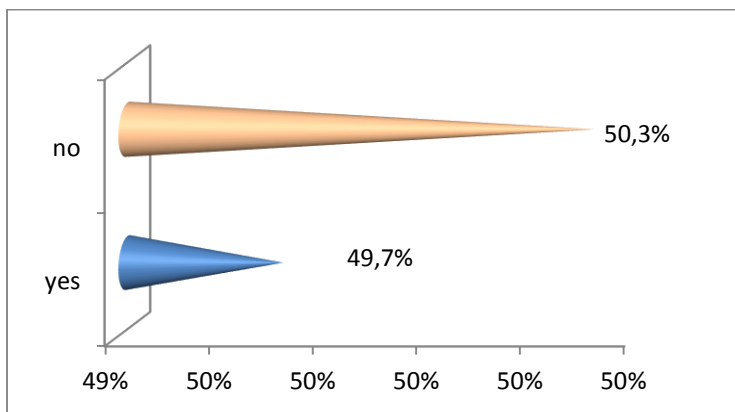


Figure 4.11 Respondents' responses on students treated as workforce in the clinical area (N=199)

Of the 199 respondents, the majority 100 (50.3%) of them are of view that students are treated as a workforce, while some 99 (49.7%) are of view that students are treated as a workforce in the clinical areas. Based on these findings, it can be said that in some clinical areas students are treated as workforce, while other clinical areas do not treat students as work force.

Based on the information of respondents provided in Figure 4.11, some (49, 7%) respondents were absent due to being treated as a workforce in the clinical area. Singh (2015) supports Thobakgale, *et al.*, (2013) that most

students agreed that problems experienced in the clinical area such as staff shortage, being treated as workforce, non-supervision by qualified staff members and large patient numbers are reasons why they absent themselves. Most of the factors found to affect student attendance appear to be related to circumstances outside the school administrators. However, one factor that stands out prominently is student’s perceptions of the importance of attending their classes.

Professional nurses are approachable in the clinical area

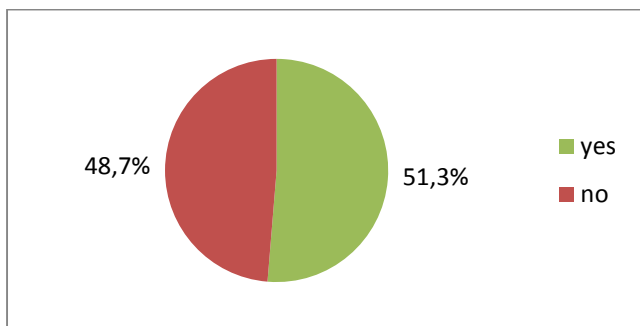


Figure 4.12 Respondents’ responses on whether professional nurses are approachable in the clinical area (N=197)

Of the 197 respondents who responded to this question, the majority 101 (53.6%) indicated that professional nurses are approachable while some 96 (48.7%) indicated that professional nurses are not approachable. From the findings it is evident that in some clinical areas, professional nurses are not approachable by students’ nurses while in other clinical areas professional nurses are approachable by the student nurses.

Based on the information of respondents provided in Figure 4.12, some (48,7%) respondents were absent due to unapproachable professional nurses.

There is a Shortage of staff in the wards

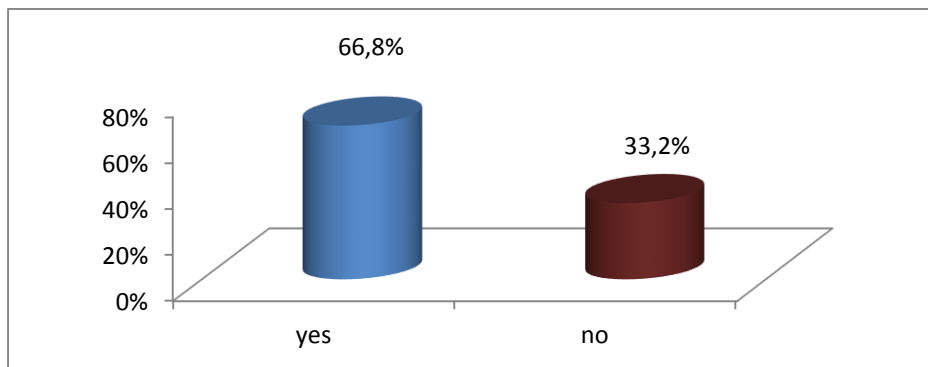


Figure 4.13 Respondents' responses on shortage of staff in the wards (N=193).

Of the 193 respondents who responded to this question, the majority 129 (66.8%) of them indicated that there is a shortage of staff in the wards, while some 64 (32.2%) indicated that there is no shortage of staff. It is evident from the findings that there is a shortage of staff in the wards of which may cause students to be absent from in the PNS clinical areas because they may be faced with huge patient load alone.

Based on the information of respondents provided in Figure 4.13, most (66, 8%) respondents were absent due to shortage of staff. Similarly, Thobakgale, *et al.*, (2013) indicate that most students agreed that problems experienced in the clinical area such as staff shortage, being treated as workforce, non-supervision by qualified staff members and large patient numbers are reasons why they absent themselves.

Adequate supervision by professional nurses

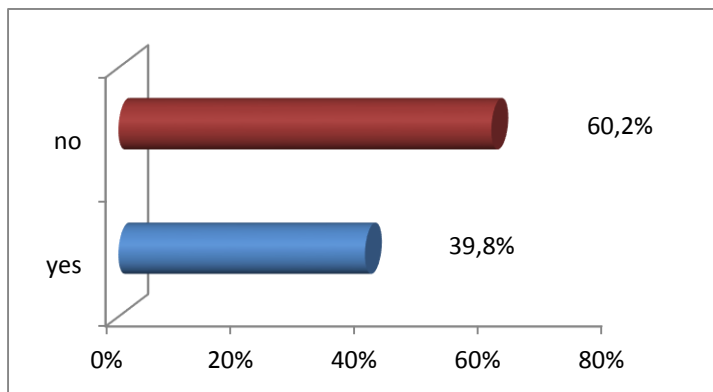


Figure 4.14 Respondents' responses on where there is an adequate supervision for students by professional (N=196).

Of the 204 respondents, most 118 (60.2%) of them reported that there is no adequate supervision, while some 78 (39.8%) indicated that there is adequate supervision by professional nurses. From the findings, it is evident supervision for students by professional nurses in the clinical areas are rarely provided as most of the respondents indicated, as presented in Figure 4.14.

Based on the information of respondents provided in Figure 4.14, most (60, 2%) respondents were absent due to inadequate supervision by professional nurses. Similarly, Thobakgale, *et al.*, (2013) indicate that most students agreed that problems experienced in the clinical area such as staff shortage, being treated as workforce, non-supervision by qualified staff members and large patient numbers are reasons why they absent themselves.

I am able to cope with patients' load in the ward

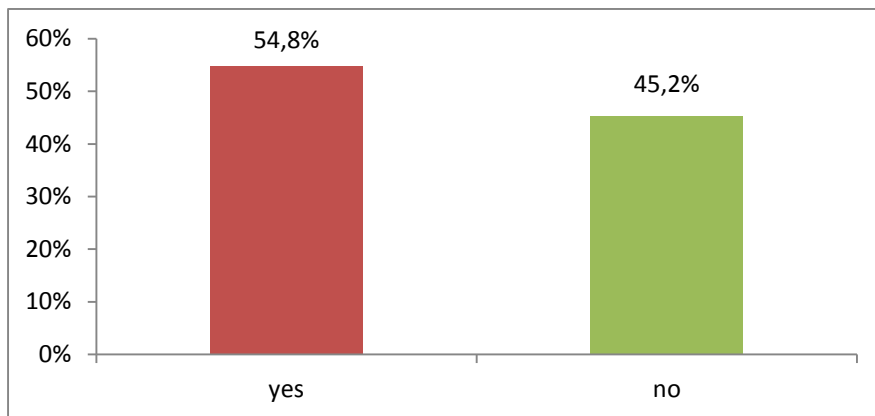


Figure 4.15 Respondents' responses on whether they are able cope with patients' load in the award (N=197).

Of the 204 respondents, 197 (96.5%) of them responded to this question, the majority 108 (54.8%) indicated that they are able to cope, while 89 (45.2%) indicated that they are unable to cope with patients' load in the ward. It is evident from the findings that most students are able to cope with patients' load in the wards, as almost 55% of the respondents reported being able to cope with patients' load.

Based on the information of respondents provided in Figure 4.16, some (45, 2%) respondents were absent due to unable to cope with patients' load in the ward. Singh (2015) indicates that when students are faced with heavy loads, theoretically and practically, many are unable to cope which could result in absenteeism.

My request for days off is considered

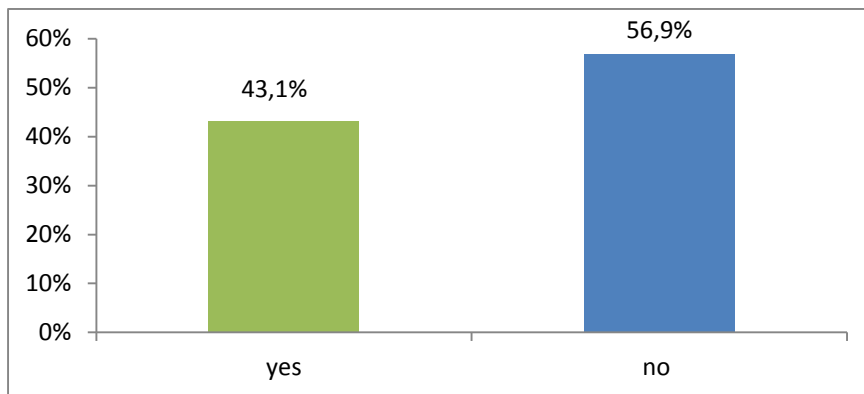


Figure 4.16 Respondents' responses on whether their requests for days off are considered (N=197).

Of the 197 respondents, the majority 112 (56.9%) respondents indicated that their requests for days off are not considered, while some 85 (43.1%) indicated that their request for days off are considered.

Based on the information of respondents provided in Figure 4.16, most (56,9%) respondents were absent due to inconsideration of request for days off.

I Work long hours in the ward

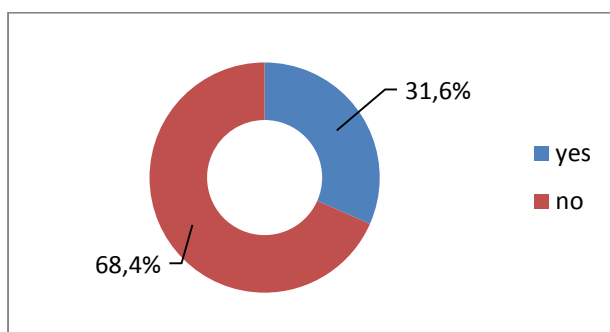


Figure 4.17 Respondents' responses on whether on whether the hours they work for long hours (N=196).

Of the 197 respondents who responded to this question, the majority 134 (68.4%) indicated that the working hours are not long for them, while 62 (31.6%) indicated that the working hours are long for them. It is evident from these findings that most respondents view working hours as not long for them as student nurses.

Based on the information of respondents provided in Figure 4.17, some (31, 6%) respondents were absent due to working long hours in the ward. Thobakgale, *et al.*, (2013) indicate that most students agreed that problems experienced in the clinical area such as staff shortage, being treated as workforce, non-supervision by qualified staff members and large patient numbers are reasons why they absent themselves.

Lecturers are polite during accompaniment

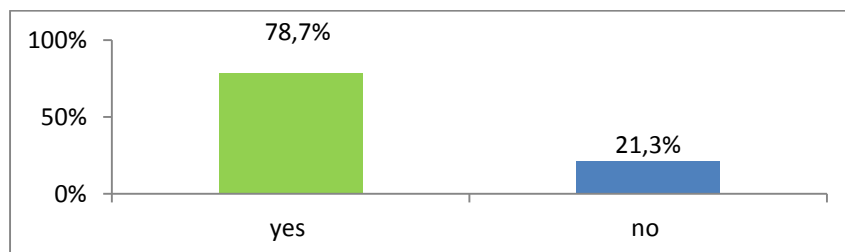


Figure 4.18 Respondents' responses on whether lecturers are polite during accompaniment (N=197).

Of the 197 respondents, most 155 (78.7%) of the respondents indicated that lecturers are polite during accompaniment, while some 42 (21.3%) indicated that lecturers are not polite during accompaniment. From these findings, it is evident that lecturers are polite during clinical accompaniment.

Based on the information of respondents provided in Figure 4.18, some 42 (21, 3%) respondents were absent due to rudeness of lecturers during accompaniment. Singh (2015) supports Thobakgale, *et al.*, (2013) and indicate that student nurse's absenteeism in clinical areas does not only mean being absent from work but also mean reported late to work, long tea and lunch breaks as well as using mobile phones during clinical working hours. Problems like shortage of staff, being treated as workforce and work overload of student nurses seems to be most leading factors to absenteeism in clinical areas.

Furthermore, Singh (2015) indicates that students did not view teaching factors, content factors, learning factors, assessment factors and social factors as the reason for absenteeism but Clinical/ practical area factors were the main reason student nurses absented themselves. Therefore, student nurse' absenteeism regardless of the program is mostly related to classroom factors than clinical factors as indicated before.

4.5. COLLEGE FACTORS LEADING TO STUDENTS' ABSENTEEISM

Section D of the questionnaire sought to collect information on the views respondents regarding college factors that may cause students to be absent in the clinical areas.

Student's certainty of all procedures in the college

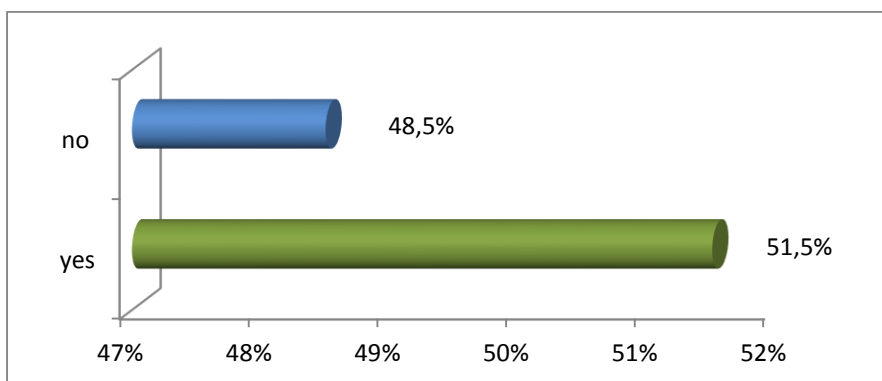


Figure 4.19 Respondents' responses on whether they are sure of all college procedures (N=194).

Of 194 respondents who responded to this question, the majority 100 (51.5%) viewed themselves as being certain of all college procedures, while 94 (48.5%) respondents are not certain of the all college procedures. It is evident from the findings that most students are certain of all college procedures.

Based on the information of respondents provided in Figure 4.19, some (48, 5%) respondents were absent due to student's uncertainty of all procedures taught in the college. Bati, *et al.*, (2013) support that factors influencing student absenteeism is the presentation of lessons that are not adequately prepared by the lecturer. Gupta and Lata (2014) agree that poor teacher-student relationships cause absenteeism of students.

I have a lot of theoretical work to be studied

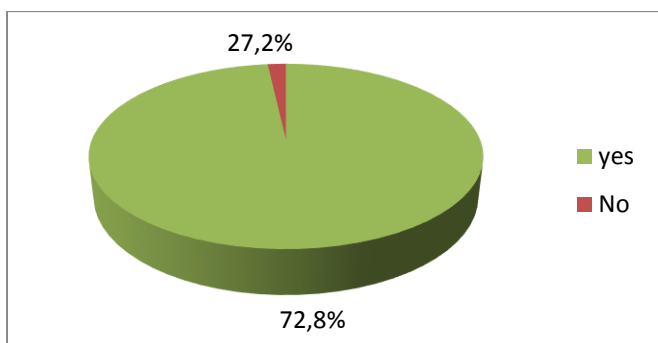


Figure 4.20 Respondents' responses on whether they have a lot of theoretical work to be studied (N=195).

Of the 204 respondents, only 195 (95.5%) responded to this question. Of the 195 who responded, the majority 142 (72.8%) indicated that they have a lot

of theoretical work to be studied, while 53 (27.2%) indicated that theoretical work to be studied is not a lot to them. From these findings, it can be said that most respondents view colleges as giving them a lot of theoretical work to be studied.

Based on the information of respondents provided in Figure 4.20, most (72, 8%) respondents were absent due to student's lot of theoretical work to be studied. Similarly, the study conducted by Baloyi (2014) concludes that student nurse's absenteeism is due to several factors namely, preparation for exams, home-related factors, death in the family, school-related causes, and poor infrastructure in schools.

Shortage of college transport to take students to clinical areas

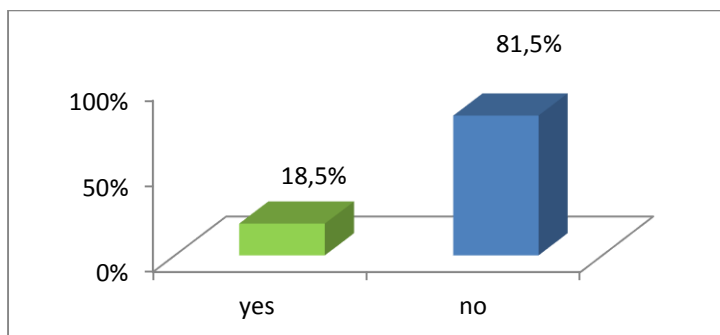


Figure 4.21 Respondents' responses on whether there is a shortage of college transport to take students to clinical areas (N=195).

In this subsection, of the 195 (95.5%) respondents who responded, the majority 159 (981.5%) of them indicated that there is no shortage of college transport to take students to clinical areas, while few 36 (15.5%) indicated that there is shortage of college transport to take students to clinical areas. From these findings, it evident that colleges provide transport to the students to clinical areas as majority of the respondents indicated as presented in the figure 4.21.

Based on the information of respondents provided in Figure 4.21, some (18, 5%) respondents were absent due to shortage of transport to clinical area. Similarly, Balfanz and Byrnes (2012) indicate that students who utilize more than one type of public transport to get to school are often absent or late as they arrive after the lessons have started.

Clinical placement is too long

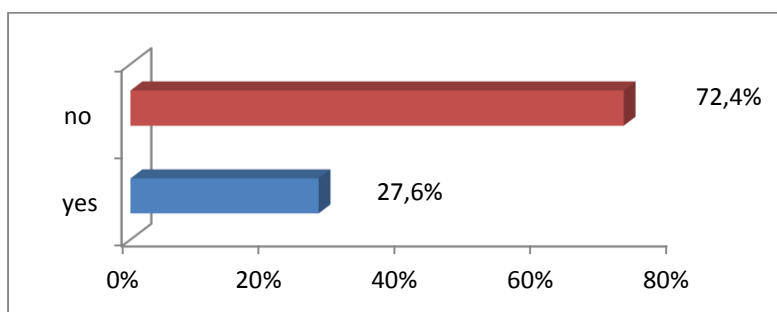


Figure 4.22 Respondents' responses on whether clinical placement is too long (N=192).

Of the 192 respondents in this subsection, most 139 (72.4%) respondents indicated that clinical placement is not too long, while 53 (27.6%) indicated that clinical placement is too long. It is concluded from the findings that most respondents indicated that clinical placement is not too long as the graph in Figure 4.22 supports this inference.

Based on the information of respondents provided in Figure 4.22, some (27, 6%) respondents were absent due to long clinical placement. Thobakgale, *et al.*, (2013) support that most of the factors found to affect student attendance appear to be related to circumstances outside the school administrators.

There is adequate accompaniment in the clinical areas by lecturers

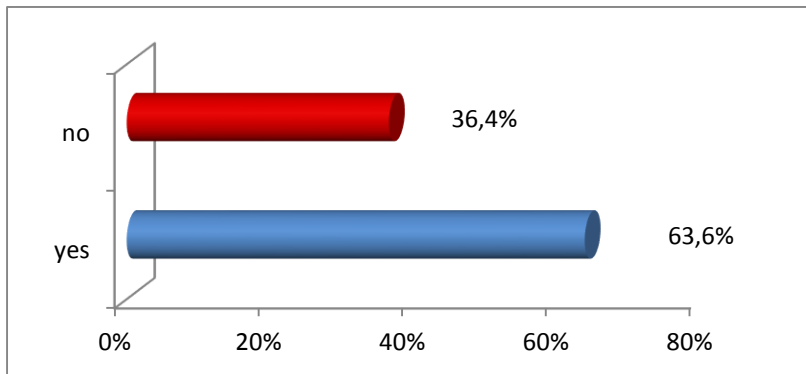


Figure 4.23 Respondents' responses on whether there is adequate accompaniment in the clinical areas by lecturers (N=195).

Of the 195 respondents, the majority 124 (63.6%) indicated that accompaniment in the clinical areas by lecturers is adequate, while 71 (36.4%) are of the view that accompaniment in the clinical areas by lecturers not adequate. From these findings, it can be said that most respondents view accompaniment in the clinical areas by lecturers as adequate.

Based on the information of respondents provided in Figure 4.23, some (36, 4%) respondents were absent due to inadequate clinical accompaniment by lecturers. Thobakgale, *et al.*, (2013) agree with the study and revealed that absenteeism amongst pupil nurses in the nursing schools is associated with the following factors: teaching methodology, teaching content, learning environment, assessment, and social problems.

I was orientated to absenteeism policy for clinical areas

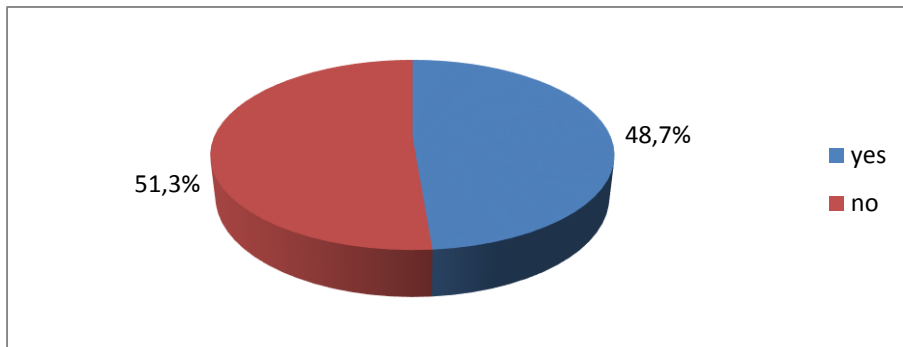


Figure 4.24 Respondents' responses on whether they were orientated to the absenteeism policy for clinical areas (N=195).

Of the total number of 204 respondents, 195 responded to this item and most 100 (51.3%) of these indicated that they were not orientated to the absenteeism policy for clinical areas, while some 95 (48.7%) indicated that they were orientated. It is evident from the findings that most students were not orientated to absenteeism policy for clinical areas.

Based on the information of respondents provided in figure 4.24, most (51, 3%) respondents were absent due to not being orientated to the absenteeism policy for clinical areas.

Students stay away from clinical areas to study for test and examination

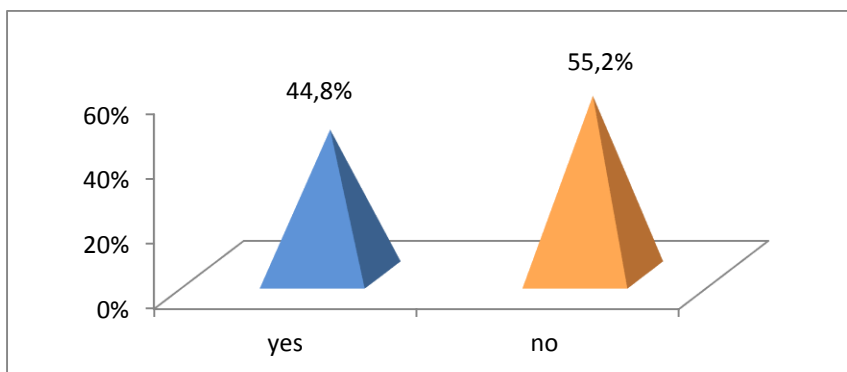


Figure 4.25 Respondents' responses on whether they stay away from clinical areas to study for test and examination (N=194).

Of the 204 respondents, 194 were able to respond to this item, most 107 (55.2%) indicated that they do not stay away, while some 87 (44.8%) indicated that they stay away from clinical areas to study for test and examination. It is evident from the findings that most respondents do not stay away from clinical areas because of studying for test and examination.

Based on the information of respondents provided in figure 4.25, most (55, 2%) respondents were absent due to study for test and examination. Similarly, the study conducted by Baloyi (2014) concludes that student nurse's absenteeism is due to several factors namely, preparation for exams, home-related factors, death in the family, school-related causes, and poor infrastructure in schools.

4.6. SUMMARY

In this chapter, results of data analysis were presented. Results revealed both positive and negative responses on factors leading to student nurses' absenteeism in the Limpopo College of Nursing in three campuses. The following chapter will present a discussion of the research findings, conclusion, and limitations of the study, as well as recommendations from the study.

CHAPTER 5

CONCLUSION, LIMITATIONS AND RECOMMENDATIONS

5.1 INTRODUCTION

This chapter concludes the study about factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement. It includes conclusion, limitations of the study, as well as the recommendations.

5.2 EVALUATION OF THE STUDY

The purpose of the study was to investigate factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement. Two hundred and six (206) questionnaires were distributed to respondents, who consented to participate in the study, and 204 questionnaires were satisfactorily filled in and returned, thus the response rate was 99%.

The study objectives were to:

- identify personal factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.
- investigate clinical factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.

- determine college factors leading to student nurses' absenteeism in the Limpopo College of Nursing during the Psychiatric Nursing Science clinical placement.

The above objectives were met, as factors leading to student nurses' absenteeism were identified, investigated and determined.

5.3. CONCLUSION

According to the findings, the following were identified as clinical factors leading to student nurses' absenteeism: student nurses being treated as a workforce in the ward; a shortage of staff in the wards; inadequate supervision of student nurses in the ward by professional nurses; as well as a lack of consideration towards student nurses' requests for days off.

With regard to the students being treated as a work force in the wards, the findings of the study indicated that half of the respondents (50, 3%) indicated that they were treated as a workforce in most of the clinical areas. This was supported by a study conducted at the Capricorn District Nursing School, which found that most pupil nurses indicated that when they are treated as a workforce; they may absent themselves from the clinical area (Thobakgale, *et al.*, 2013).

Shortage of staff in the wards was identified as a critical clinical factor leading to student nurses absenteeism, where 66, 8% of the respondents indicated that the cause of absenteeism is due to there being a high shortage of staff in the ward. Thobakgale, *et al.*, (2013) support the findings of the study by revealing that student nurses were absent from the clinical area due to shortage of staff, work overload, being treated as workforce, and solving their own family problems.

Regarding inadequate supervision of student nurses in the ward by professional nurses, most of the respondents, 60, 2% indicated that supervision for students by professional nurses in the clinical areas is rarely provided. This is supported by Thobakgale, *et al.*, (2013), and Singh (2015), who indicate that most students agreed that problems experienced in the clinical area, such as staff shortage, being treated as workforce, non-supervision by qualified staff members and large patient numbers are reasons why they absent themselves. A lack of consideration towards student nurse's request for days off was also identified as leading to student nurses absenteeism, where 56, 9% of respondents indicated that their requests for days off were not considered.

This is supported by a study conducted in the United Kingdom by UKessays (2015) which reported that absenteeism at workplace is associated with the nature of work, poor working conditions, absence of regular leave arrangements, accidents, poor control, irregular transport facilities, lack of interest, indebtedness, alcoholism and gambling habits, as well as low level of wages.

The findings of the study also identify college factors leading to student nurses' absenteeism, where most (72, 8 %), respondents indicated that they absent themselves from clinical areas due to a lot of theoretical work to be studied. Some respondents (44, 8%), indicated that they absent themselves from clinical areas due to needing to study for tests and examinations. This is supported by a study conducted by Baloyi (2014), which concludes that student nurse's absenteeism is due to several factors, namely, preparation for exams, home-related factors, a death in the family, school-related causes, and poor infrastructure in schools.

Singh (2015) concurs that student nurse absenteeism has an impact on training and that students with prolonged absenteeism were terminated from training. The study concludes that since students are absenting themselves due to issues in the clinical area, they were inefficient in their clinical practice, as evidenced by the clinical assessment marks. The study further revealed that some even absented themselves when their clinical assessments were due. Students who absent themselves do not gain valuable knowledge, skills, and experience. Furthermore, Singh (2015) points out that absenteeism is costly and more effective retention strategies need to be looked at to allow students to complete basic nurse training and become professional nurses. This will assist with the shortage of trained nurses.

5.4. LIMITATIONS OF THE STUDY

If the study was conducted using qualitative approach, a follow up was going to be made to get deeper feelings of student nurses on factors leading to absenteeism of student nurses during psychiatric clinical placement. With quantitative approach, there was no follow up session made.

5.5. RECOMMENDATIONS

Based on the results of the study, the following recommendations are made:

- The college should make provision of one (1) week of study for student nurses between the period of PNS clinical placement and final examinations, as most of the respondents indicated that they have a lot of theoretical work to be studied as the main reason for their absenteeism and some of the respondents indicated that they absent themselves due to needing to study for tests and examinations.

- The Department of Health should appoint enough nurses at the hospitals so that students are not overworked due to shortage of staff in the wards, as most of respondents indicated that they are treated as a workforce. Due to this reason, the highest percentage of students' absenteeism is due to being treated as part of the workforce, as well as a lack of students' supervision by professional nurses in the ward.
- Regular clinical meetings should be held between hospital managers, staff members, lecturers and students, so that clinical areas become aware of the problems that student nurses come across during PNS clinical placement. For this reason, managers of clinical areas will also become aware of the unfavorable working conditions and poor relations between students and professional nurses, and this could lead to the development of strategies to improve conditions for the students.

5.6. FURTHER RESEARCH

This study recommends that a further study should be conducted using qualitative approach so that a follow up is made to get the feelings of students on student nurses' absenteeism in psychiatric clinical placement.

Students with long period of absenteeism from the clinical area accumulate less than the required hours than students with 0% of absenteeism. Therefore, Strategies should be developed to reduce absenteeism of student nurses when placed in PNS clinical area for students to accumulate necessary required hours leading to completion of training in time, thus reducing shortage of professional nurses in the country.

5.7. SUMMARY

In this chapter, which is the final chapter of the study, the following were presented: conclusion; limitations of the study; as well as recommendations of the study.

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ANNEXURE A

UNIVERSITY OF VENDA

OFFICE OF THE DEPUTY VICE-CHANCELLOR: ACADEMIC

TO : MR/MS T.C MASUTHA
SCHOOL OF HEALTH SCIENCES

FROM: SENIOR PROFESSOR L.B KHOZA
DEPUTY VICE-CHANCELLOR: ACADEMIC

DATE : 22 MARCH 2018

DECISIONS TAKEN BY UHDC OF 22ND MARCH 2018

Application for approval of Master's research proposal in Health Sciences. T.C Masutha (16001564)

Topic: 'Factors leading to Student Nurses' Absenteeism in Limpopo College of nursing during Psychiatric Nursing Science Clinical Placement.'

Supervisor	UNIVEN	Dr. M. Maluleke
Co-supervisor	UNIVEN	Ms. K. Netshisaulu

UHDC approved Masters proposal


Senior Professor L.B. Khoza
ACTING DEPUTY VICE-CHANCELLOR: ACADEMIC

ANNEXURE B

RESEARCH AND INNOVATION
OFFICE OF THE DIRECTOR

NAME OF RESEARCHER/INVESTIGATOR:
Mrs TC Masutha

Student No:
16001564

PROJECT TITLE: Factors Leading to Student Nurses' Absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science Clinical Placement.

PROJECT NO: SHS/18/PH/14/1406

SUPERVISORS/ CO-RESEARCHERS/ CO-INVESTIGATORS

NAME	INSTITUTION & DEPARTMENT	ROLE
Dr M Maluleke	University of Venda	Supervisor
Mrs K Netshisaulu	University of Venda	Co - Supervisor
Mrs TC Masutha	University of Venda	Investigator - Student

ISSUED BY:
UNIVERSITY OF VENDA, RESEARCH ETHICS COMMITTEE

Date Considered: June 2018

Decision by Ethical Clearance Committee Granted

Signature of Chairperson of the Committee: 

Name of the Chairperson of the Committee: Senior Prof. G.E. Ekosse

UNIVERSITY OF VENDA DIRECTOR RESEARCH AND INNOVATION 2018 -06- 15 Private Bag X5050 Thohoyandou 0350



University of Venda

PRIVATE BAG X5050, THOHOYANDOU, 09600, LIMPOPO PROVINCE, SOUTH AFRICA
TELEPHONE (015) 982 8504/8313 FAX (015) 982 3080

"A quality driven financially sustainable, rural-based Comprehensive University"

ANNEXURE C



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH

Enquiries: Stander SS (015 293 6650)

Ref: LP_201806_013

Masutha TC
University of Venda

Greetings,

RE: Factors leading to student nurses absenteeism in Limpopo College of Nursing during Psychiatric Nursing science clinical placement.

The above matter refers.

1. Permission to conduct the above mentioned study is hereby granted.
2. Kindly be informed that:-
 - Research must be loaded on the NHRD site (<http://nhrd.hst.org.za>) by the researcher.
 - Further arrangement should be made with the targeted institutions, after consultation with the District Executive Manager.
 - In the course of your study there should be no action that disrupts the services, or incur any cost on the Department.
 - After completion of the study, it is mandatory that the findings should be submitted to the Department to serve as a resource.
 - The researcher should be prepared to assist in the interpretation and implementation of the study recommendation where possible.
 - The above approval is valid for a 3 year period.
 - If the proposal has been amended, a new approval should be sought from the Department of Health.
 - Kindly note, that the Department can withdraw the approval at any time.

Your cooperation will be highly appreciated.


Head of Department

06/08/2018
Date

Private Bag X9302 Polokwane
Fidel Castro Ruz House, 18 College Street, Polokwane 0700. Tel: 015 293 6000/12. Fax: 015 293 6211.
Website: <http://www.limpopo.gov.za>

The heartland of Southern Africa – Development is about people!

ANNEXURE D₁



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA



**DEPARTMENT OF HEALTH
LIMPOPO COLLEGE OF NURSING: GIYANI CAMPUS**

14-08-2018

**TO: MS. MASUTHA TC
UNIVERSITY OF VENDA**

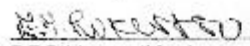
PERMISSION TO CONDUCT RESEARCH AT GIYANI CAMPUS: YOURSELF

Permission is hereby granted as requested. Please ensure adherence to ethical standards and make arrangements beforehand in order not to disrupt learning activities.

Hoping for your cooperation.

Yours Truly

Vice Principal


E.T. Rikhotso (Mrs.)

Private Bag X9658 GIYANI, 0826
Tel: (015) 812 0330/1/2 or (015) 812 0123/0213 Fax: (015) 812 0123
Website: <http://www.limpopo.gov.za>

The heartland of Southern Africa – Development is about people!

ANNEXURE D₂



LIMPOPO
PROVINCIAL GOVERNMENT
REPUBLIC OF SOUTH AFRICA



DEPARTMENT OF HEALTH LIMPOPO COLLEGE OF NURSING - THOHoyANDOU CAMPUS

To: Ms Masutha TC

FROM: Acting Vice Principal

Thohoyandou Campus

ENQ: Nyelisani M.

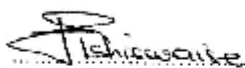
DATE: 15 August 2018

RE: PERMISSION TO COLLECT RESEARCH DATA

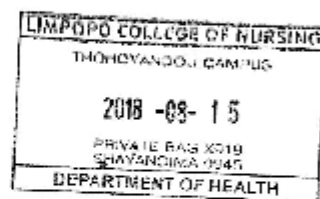
1. The above matter bears reference
2. Permission to conduct research at Thohoyandou Campus
3. Research should be conducted in such a way as not to Interfere with the college programmes and learning of students

Hoping that the outcome will be positive

Regards,



Acting Vice Principal



ANNEXURE E - RESPONDENT INFORMATION SHEET

Description

My name is Thingahangwi Cecilia Masutha. I am a student at the University of Venda enrolled for M cur study. One of the requirements of the course is to conduct research. The topic of the research proposal is “Factors leading to student nurses’ absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement”.

Purpose

The purpose of the study is to determine factors leading to absenteeism amongst student nurses in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement.

Procedure

Your participation will include answering few predetermined questions from the questionnaire.

Risks and benefits

There are no anticipated risks. The benefits of the study are to inform the policy makers on the findings with the aim of making recommendations to reduce absenteeism of student nurses at Mental Health institutions. A small token in the form of compensation for transportation fees will be given to each participant.

Confidentiality of data

The information will be kept confidential by ensuring your anonymity. The results will be available to the supervisor and may be published. You will be allowed to withdraw at any time without being penalized.

Any questions about your rights as participants may be directed to:

Name: Thingahangwi Cecilia Masutha (principal investigator) Contact no:
0763154651

Name: Dr Maluleke M (Supervisor)

Contact no: 076394975

ANNEXURE F- CONSENT FORM

Title of the research

Factors leading to student nurses' absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement.

I have read the information on the research proposal. I was given enough opportunity to ask questions and adequate time to rethink the issue. The aims and objectives of the study are clear to me. I have not been pressurized to participate in any way.

I understand that participation in this study is completely voluntary and that I may withdraw at any time without supplying reasons. This will have no influence on my performance in class and in clinical area.

I know that this study has been approved by the research ethics committee of the University of Venda and the Vice Principal of Giyani campus, Thohoyandou campus and Sovenga campus. I am fully aware that the results of this study will be used for scientific purposes and may be published. I agree to this provided my privacy is guaranteed

I hereby give consent to participate in this study

Name of participant

Signature

Date

Statement by the principal investigator

I provided verbal and written information regarding this study. I agree to answer any future questions concerning the study as best as I can. I will adhere to the approved protocol

Name of principal investigator

Signature

Date

ANNEXURE G

University of Venda

P.O Box X5050

Thohoyandou 0950

PROVINCIAL DEPARTMENT OF HEALTH

Private bag x 9302

Polokwane, 0700

RE: PERMISSION TO CONDUCT A STUDY IN THREE CAMPUSES OF LIMPOPO COLLEGE OF NURSING

I am Thingahangwi Cecilia Masutha, an M cur student at the University of Venda. I am employed as a Lecturer at Limpopo College of Nursing in Giyani Campus teaching Psychiatric Nursing Science.

I request permission to conduct a study at three campuses entitled **“Factors leading to student nurses’ absenteeism in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement”**.

The principal investigator observed that there is a high rate of absenteeism amongst student nurses during Psychiatric Nursing Science clinical placement in the Limpopo College of Nursing.

Therefore, the purpose of the study is to determine factors leading to absenteeism amongst student nurses in Limpopo College of Nursing during Psychiatric Nursing Science clinical placement.

I understand that the consent is voluntary. The data will be accurately transcribed and if no longer needed, the transcripts will be destroyed.

Kind regards Masutha T C

Contact number: 0763154651

E-mail: thingamasutha71@gmail.com

Head of Department

Date

ANNEXURE H: EDITORIAL LETTER

**Dr Catherine Hutchings
Freelance Editorial Services**

51 Bathurst Road
Kenilworth
7708
Cape Town
Western Cape
South Africa

Telephone/Fax: + 27 21 7618522
Mobile: + 27 82 9702219
E-mail: catherinehutchings@gmail.com

To whom it may concern.

**I hereby confirm that I edited
THINGAHANGWI CECILIA, MASUTHA'S**

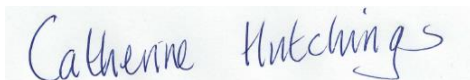
MCur dissertation,

Title:

**FACTORS LEADING TO STUDENT NURSES' ABSENTEEISM IN
LIMPOPO COLLEGE OF NURSING DURING PSYCHIATRIC
NURSING SCIENCE CLINICAL PLACEMENT**

in October 2018.

I wish this student well in their endeavours.



Catherine Hutchings

ANNEXURE I₁

OLD QUESTIONNAIRE

Dear participant

A request is made that you kindly spare some minutes to answer the questions set out below.

INSTRUCTION

1. Do not write your name or number on any part of this questionnaire.
2. Do not tear any page.
3. Read and answer all questions
4. Mark with an **X** in the appropriate space, for an example:

X

SECTION 1

Demographic data

1.1. Age

Below 19	
19-25	
26-32	
Above 32	

1.2. Gender

Male	
Female	

1.3. Marital status

Married	
Single	

Indicate your agreement that the following aspects play a part in why you stay away from clinical area:

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
<u>SECTION 2</u>					
Personal factors leading to absenteeism					
2.1. I have a medical condition.					
2.2. I have relationship problems					
2.3. I have family problems					
2.4. I have an alcohol abuse problem					
2.5. I have a drug abuse problem					
2.6. I have a financial problem					
<u>SECTION 3</u>					
Factors in the clinical area leading to students' absenteeism					
3.1. Lack of accompaniment in the clinical areas by lectures.					
3.2. Hospital qualified staff					

are unapproachable and rude					
3.3. There is shortage of staff in the wards and I am treated as a work force					
3.4. There is lack of supervision by qualified staff, therefore I feel incompetent					
3.5. I was not orientated to absenteeism policy for both classroom and clinical areas					
3.6. I cannot cope with patients' load in the ward					
3.7. My request for days off/vacation leave is not considered; and it makes me stay away as I need to attend to other matters.					
3.8. I am stressed out in the clinical area.					
3.9. We work long hours in the clinical area.					
<u>SECTION 4</u> College factors leading to students' absenteeism					
4.1. Necessary practical skills are not taught adequately; therefore, I am unsure of certain procedures					
4.2. I have a lot of theoretical work to study; therefore, I stay away from clinical area					

to study for test and examination.					
4.3. There is college transport shortage for me to go to clinical area.					
4.4. Clinical placement is too long; therefore, I get tired in clinical area.					
4.5. Lecturers are not polite during accompaniment; I fear them.					

ANNEXURE I₂

NEW QUESTIONNAIRE

Student name: Masutha Thingahangwi Cecilia
16001564

student Number:

UNIVERSITY OF VENDA- SCHOOL OF HEALTH- MCUR DEGREE

Dear participant

Thank you for agreeing to participate in the study.

Since you have already signed a consent form, a request is made that you kindly spare ten (10) minutes to answer the questions set out below.

INSTRUCTION

1. Do not write your name or student number on any part of this questionnaire.
2. Do not tear any page.
3. Read and answer all questions
4. Mark with an **X** in the appropriate space, for an example:

X

SECTION 1

Demographic data

1.1. Age

19-25	
26-32	
Above 32	

1.2. Gender

Male	
Female	

1.3. Level of study

Level III	
Level IV	

1.4. Number of days absent in PNS clinical areas

1	2	3	4	5	6	7	8	9	10	11+

Please answer the following questions by YES or NO using an X; indicating that the following aspects are reasons you stay away from clinical area:

	YES	NO
<u>SECTION 2</u>		
Personal factors leading to absenteeism		
2.1. I have a medical condition		
2.2. I have relationship problems		
2.3. I have family problems		
2.4. I have an alcohol abuse problem		
2.5. I have a drug abuse problem		
2.6. I have a financial problem		
2.7. Other- If yes, please specify		
<u>SECTION 3</u>		
Factors in the clinical area leading to students' absenteeism		
3.1. Necessary practical skills are taught adequately		

3.2. I am treated as a work force		
3.3. Professional nurses are approachable		
3.4. There is shortage of staff in the wards		
3.5. There is adequate supervision by professional nurse		
3.6. I can cope with patients' load in the ward		
3.7. My request for days off is considered		
3.8. I work long hours in the clinical area.		
3.9. Lecturers are polite during accompaniment		
3.10. Other- If yes, please specify		
<u>SECTION 4</u> College factors leading to students' absenteeism		
4.1. I am sure of all procedures		
4.2. I have a lot of theoretical work to study		
4.3. There is college transport shortage for me to go to clinical area		
4.4. Clinical placement is too long		
4.6. Adequate accompaniment in the clinical areas by lectures		
4.7. I was orientated to absenteeism policy for clinical areas		
4.8. I stay away from clinical area to study for test and examination		
4.9. Other- If yes, please specify		