**TRANSCRIPT 7**

**P7**: Participant 7

**R**: Researcher

R: Good day, sir.

P7: Good day.

R: Uh my name is Isabel Shilenge. I’m a Master’s student from the University of Pretoria. How are you doing today?

P7: I’m good thanks and you ma’am?

R: I’m good. Thank you for honoring the appointment to come for the interview. Are you still willing to…to continue?

P7: Yes, ma’am

R: Okay. As a reminder um the title of the study is ‘An exploration of support needed by nursing students to develop their professional dignity’. Do you sir, understand the term professional dignity?

P7: Yes ma’am

R: Okay, that’s good sir. Uh thank you for allowing me this time to interview you…um the main question is ‘What support do you need from others to feel dignified as a nursing student?’

P7: Ok, uh based on my clinical experience, starting from the campus I feel like lecturers should invest more time to go through the content especially cos I feel like the course has been congested. They go through…they go through a lot of things at a short time, so it’s so hard to remember some of the things and so more hard to do some of the things thoroughly…and then also again on campus basis I feel like the lecturers are not…because of the…the number of students that we are, we are then allocated a few lecturers and I feel like we don’t have that enough platform to…to be able to learn and be at…and be mentored correctly. Hence, I feel like sometimes we feel like we are less…we are students, we’re not clinically exposed from our simulation basis, and then when I get to the clinical facilities…uh the clinical facilities are a problem because of first of all the lec…most…most registered nurses they don’t support us, they don’t give us that much support and willingness to help. Sometimes you find that they are doing the wrong things, and then we just have to go with the flow because you…you can’t tell them you doing this based on this because they will tell you ‘I’ve been here for the longest time’, and then you find that…that you…actually influence or affect how you want to do things because of some of us a here to bring a change and then when you get to the field you find that people are already doing the wrong things. So, that actually affects uh the way you want to con…uh conduct yourself as a professional. So, it also affects how you see yourself as a professional, and it also affects the dignity within the profession. So, and in especially in the uh clinical area, uh the professional nurses they…some of them they don’t…they don’t wanna see students because they wanna do things…they don…they just wanna get the work done and they don’t really focus on the nursing part of it, the I care values especially because of when we leave from the theory part, we want to integrate the theory with the practical. So, when you find…when you find that you get to the clinical facilities, that opportunity to do that is not there because of…especially in the public…public sector as I can say is forever packed is forever busy so they don’t really give us that much of a support so that we can grow ourselves as professionals…especially now that we are students we have to integrate from being a student to a professional person.

R: mm okay sir I hear you. Uh just to get clarity on what you’ve just said, you saying that the professional nurses during WIL they don’t give you enough support to feel dignified as a student…

P7: Yes

R: Am I right?

P7: Yes ma’am. Uh they don’t…they don’t give you that…that platform to…to be able to…to actually take us by hand and show us that okay ‘since well you guys are here, since well you students are here let us show you how we do things, how we do things correctly’. You…you find that you get there, you find them doing the wrong things already so that when you get…okay when you there you find them doing wrong things and you are there to bring a change, you are there to do the right thing. You end up you…you end up having a lower self-esteem, lower confidence because of what you learnt you want to incorporated so that you can be able to be…to master the skill or to master whatever you’re doing or to master uh clinical practices, but when you get there you find that they’re doing the wrong things and then you can’t…some of us don’t feel okay to do the wrong things, or don’t feel uh like the…we don’t feel okay to do what they are doing so you find that uh…uh eventually it results in conflicts, in clashing of personalities because of the facto…the fact that they doing things wrong or they don’t want to show you because of they their main objective is to get things done and or…or

R: Ok, so you’re saying that when they are doing things wrong and then you want to be…to do them right you end up towing the line because of you don’t want conflict?

P7: Yes

R: How does it feel…how do you feel at the time like you fe… when you feeling low self-esteem? how do you cope with that one?

P7: Ai at the end of the day we just…we just change the mindset to being there just to get the hours done and hoping that you’ll learn some of the things in the future because of uh when such…such things happen in the clinical facility especially, it can demotivate you and get your emotions down and then at the end of the day you…you don’t have any say, you don’t have anything to say cos uh even with the experience I had, we even tried to notify the lecturers when they come and then eventually they…they just maybe do something right for just a week and the following week its back to the basics because of their main objectives is to get things done. They don’t have time to be taking someone by hand etcetera…

R: So, what support do you need from the lecturers?

P7: Uh I just believe that if the lecturers were able to have more time to accompany us especially in the clinical facilities, maybe an integration of the whole lecturers coming to the clinical facilities actually showing us how to do things because of in the…the space of the professional nurses they really don’t have the time or they don’t really show the interest to show us what is really needed. So I feel like then if lecturers were able to come and accompany us, I know that because of the number…the number of intake there is…we don’t have a lot of lecturers that can actually do that, but I feel like if it was possible, the lecturers if they could come I don’t know how many times a week but if they could actually come, because at the moment they’re coming once a week and by the time they come once a week you can’t learn something in one day actually…so, I feel like if they could come maybe I don’t know how many times a week, so that they can show us some of the things because some of the things are critical in nursing and once you miss them you can never go back.

R: So, you will like your lecturers to come more uh frequently?

P7: Frequently yah especially for the accompaniment at the clinical facilities, so that maybe because they have experience as well, maybe they can better show us uhm some of the skills especially working with a patient instead of when its simulation.

R: Okay sir, so what do you think should be done to support the nursing students to develop their professional dignity?

P7: Uh I feel like students should be given enough…the platform to…to do things, to…to make mistakes so that they can learn from them. They should be given a platform or an environment a conducive environment to be able to work and learn especially in the clinical facilities. I don’t know maybe they should be an integration between our WIL lecturers and the professional nurses so that they can be able to work together, so that they can give the students enough support in order to work and learn at the same time especially in the clinical facilities.

R: When you say integration between the lecturers and professional nurses during WIL, can you please elaborate further on that?

P7: Uh I will make an example regarding that for my elaboration. Uh there was one time I was working ok at the clinical facility, at the hospital so there was the sister…ok there was a second in charge…the sister, second in charge that uh…the…the professional nurse, the way she was so kind and generous, she actually in the morning she asked us uh ‘what are your objectives? How can I help you meet your objectives?’. The whole day she will take…after doing her rounds, after doing her…what she needs to do, she…she’d take us the whole day show us how to do things. If there is like for example an IV drip that need to be instill…instilled, she’ll like ‘no leave it, let the students come’ and showed…showed us once and then gave us a chance to do the procedure. So, I feel like that…that kind of support might…might work because of it might be an integration between the WIL lecturers and the professional nurses so that they uh the professional nurses know exactly what to do when the students get to the clinical facility.

R: What other support do you require from the professional nurses during WIL in order for you to develop your professional dignity?

P7: Uh I think the professional nurses can give us the platform to learn and work by giving us the necessary knowledge because they uh they experienced in the clinical facility. They can give us at least a platform to be able to work, to be able to learn by showing us some of the things we don’t know, by showing us some of the things that we are unable to…by…by doing so we can get the…the necessary confidence, we can build the…we can build our self…our self-esteems so that we are able to perform such…some of the things, because at the moment most of us we can’t perform some of the uh some of the…the procedures and we are…we…we are actually supposed to be competent with them already but the course is already finishing and we still not 100 percent about them. So, I feel like if they were able to give us the support, give us the um give us actually like…more like carry us by hand, just to show us some of the things…more like…I feel like…more like uh a coaching leadership style, so that we are able to do some of the things working under supervision of course.

R: So, you are saying the course is about to end and you are not feeling confident?

P7: Honestly speaking, I don’t because of I’ve done multiple procedures and at the short space of time. So, there’s some of the things that I’m still not confident about them, I’m still not 100 percent…and then uh those…some of those…some of those things are very like critical life-saving skills. So, the reason is that we couldn’t…some of them we could not…we…we could not find them at the clinical facilities that we were placed, and some of the ok we found them, but we were not given…we were not given the opportunity to excel in those skills.

R: Uh sir so when you don’t get the opportunity, do you have a support system that can uh be a go between, between you and the professional nurses at WIL?

P7: Uh there’s…ok in som…of the clinical facilities, there’s uh this CETU…student development uh mm committee, but they still not uh giving the necessary support because of we might go and tell them ‘ok we not finding the skill, and we need to find the skill and we need to do certain skills’ because of they are critical for nursing especially…and then you might find that we end up doing the s…the skill with a…with a doll instead of a human being…and some of the things doing them with a doll is not the same as doing them with the human being. It’s not like…it’s not the same as doing them in a rea…a real…a real time situation. So, ok there is a committee but, sometimes I feel like they not he…they not helpful or they not giving the necessary input to ensure that the professional nurses give us the necessary support.

R: Okay sir, I hear you. What support do you need from other healthcare members to develop your professional dignity? When I talk about the healthcare members I mean the doctors, I mean the other categories of nurses and so on.

P7: Uh I also feel like ok uh multidisciplinary team, can also support us by giving us the…the opportunity to learn and engage especially when they’re doing doctors’ rounds, because at the clinical facilities you might find that the multidisciplinary team when they get there they also wanna get their work done, they don’t have time to be explaining this and that and that so…cos I remember one time when we were doing rounds, you find that you might ask a question and then the doctor might say ‘eish, I can’t really explain this, I’m in a hurry I have to go to uh the another ward’. I might…I think uh this might be because of the fact that some clinical facilities have shortages of doctors and but in some clinical facilities the multidisciplinary team they just don’t care if…they just don’t care about students. They just wanna do what they came for and get it done.

R: So, you saying that the multidisciplinary team they don’t care about students? So how does that make you feel?

P7: Uh when you get there obviously uh it pulls your confidence down, at the end of the day you don’t…you feel like you…you…you not part of the team, you like…you feel excluded of course. So, sometimes when such situations happen you just pull yourself together and focus because of there’s nothing you can do even if you go report…feel like there’s no action taken.

R: mm…okay. How do you think the support from others will assist you in developing your professional dignity?

P7: Oh, I feel like uh the support from others will actually enhance the knowledge gain because of you might find especially in second year I will make a typical example…

R: mm

P7: …in second year we are doing a lot of conditions, and you find that those conditions are best known by the doctors. So, uh during the clinical placement, you might find that you wanna learn more about the conditions because of sometimes the book does not explain things properly. Some of…some…some of us learn by practica so that you might find that I…I learn more from a person rather than me studying a book. So, I can give an example like if I’m able to begin to ask questions and looking at the perso…at the doctor for example, treating that patient, giving the medication, giving the health education as well, I might be able to grasp because I will be able to remember. So, that’s the best support structure because of you’ll be able to remember ok, on this certain day…on this certain day I did this with this with this doctor, so I’ve managed to gain some experience and the support from there.

R: and how…what support do you require from your lecturers?

P7: Uh by lecturers…ok by lecturers uh as pa…as part of my past experience, I feel like the su…the lecturers are supportive enough. Some of the lecturers give their all, they give enough details, they try by all means to ensure that content is known and to ensure that the ca…the content is integrated especially when you come back from WIL, they will ask you ‘how was WIL? Was what I taught in a…the same as in hospital?’…so I feel like the support from the lecturers is sufficient enough according to my opinion. So, they could…they can actually maybe be more present, cos some of them are not present especially when it comes to you wanting to gain knowledge about um some of the things. You might find that they are not there they have to somewhere else.

R: mm

P7: Yah

R: Okay. Where do you feel the support should start?

P7: Um ok I fe…the support should start from our…ok when we do our clinical simulation, from the clinical simulation what I have also realized is that most of us you find that we are lost because of we have to cover lots of things in 5 days, actually it’s 4 days because of on Friday uh most lecturers wanna go by 12, so Fridays are just practice days and then you find that we are a lot, we can’t really practice enough. So, from the clinical days, uh the clinical simulation days, I feel like the support should start there, whereby we are…the lecturers are able to identify the ones that are struggling, and which one is…which one is stronghold is where because of as part of my experience the past 3 years, I feel like when you get to sim…to clinical simulation we are just all over the place. It’s more like we’ll see in the clinical facilities and when you get to clinical facilities it's like ai I’ll see when I graduate. So, some of the things we have a lot of knowledge gaps within them.

R: So, you saying that it should start during clinical simulation…

P7: …simulation

R: …here at the college

P7: …college. Yes ma’am.

R: Okay, I just wanted to clarify that one. Do you believe that as a student you are getting enough of…of that support?

P7: Uh from…ok from the lecturers yes there is sufficient support, but I feel like…I…I think uh some of the things to have loopholes and gaps is because of the number of students that are there and the allocation of the lecturers cos you might find that in the clinical su…facility, we are placed we are 21 and then the lecturer is alone. In a day she can’t really give the…the necessary…let me say the necessary support for all because of when she gets there, and the time is also are limited, she has to get there after all the nurses round especially in the morning, she can’t come at 8’o clock, she has to come maybe after 10 whereby the nurses rounds were done…and then when she gets there by th…you find that the specific procedure she came for only 4 to 5 people will practice due to time. So, uh as I’ve said as well, the…the…the time allocation or the placement that is booked, they usually come maybe once a week so that’s not enough support for some. You might find that some are grasping things easy but some do not grasp things easily so that also leaves that low confidence and that exclusion feeling that you are not supported enough.

R: As a student, what support would you require from other students?

P7: Um as a student I feel like…as a student I feel like we should help each other…

R: mm

P7: uh but with that what I have also noticed is that you find that some…some students uh prefer to work on their own, prefer to do things on their own. They don’t wanna do things in a group…they’ll tell, they’ll… you might find that they find it hard to learn in a group. I feel like as students we should support each other even though we want to do things on our own. Some of the things we have strongholds, strong points and you might find that the other person is not that strong on that point…so we show each other, integrate each other collaborate with each other so that we ensure that we are able to do things in a professional way together.

R: You talked about loops…loopholes and gaps during WIL, would you care to elaborate further on that?

P7: Ok uh during WIL ma’am, you might find that um we doing 5 skills a day for example, and then you might find that within those 5 skills you on…some of…some of us you might find that the concentration span is only limited for a few hours, so for the first 2 skills I might understand what’s going on, and then for the rest I wont be able to even remember how to do them or even remember how…what was taught. So, I feel like there’s a…a lot of loopholes and gaps there because of um we do a lot of things at the short space of time especially in…you like…maybe in 1 day, you might find that we do 4 to 5 skills and then within those 4 to 5 skills, I might be lacking on those 3 and only grasps the 2…and when I get to clinical facilities, I’m only exposed to those 2 again…the 3 I have not learnt anything…and then come when they say its summative or its formative um assessments, they ask the 3 that I was never exposed to. So, when I get to the summative or the formative then the knowledge gap or the loopholes in that kind of knowledge it starts to kick in because of when I get there, I’ll be doing things that I never did.

R: So, when you…you…you feel like your concentration span is like going down, what support will you require from the either the professional nurses or the lecturers to assist you with?

P7: Uh I think…I believe that if the professional nurses or our WIL lecturers were able to…ok let me start with the WIL lecturers…

R: mm

P7: …maybe after simulations if they were able to give us the fl…the platform to say whoever did not understand this or whoever did not get uh the…the objectives of this can come forward and let me start again with maybe some…with people who already understand gone maybe…maybe that might help because of you might find that we are a lot in the class especially and then if she explains some only if you will grasp and then some will not grasp at all…but if we limit, maybe some have already gone we break it down in groups and then she can maybe re-explain or redemonstrate what was happening and then we are able to grasp whatever or…or get the necessary support… and with professional nus…professional nurses in the…in the institutions, I feel like maybe if they were able to uh take us ok if we are 10 for example or 15, maybe if we have 5 days take a certain number per day to say ok today I’m showing this group…this group for x…tomorrow I’m showing this group and so forth, maybe we might feel…we might feel the support and we might feel…we might be able to excel in some of the things because of nursing is practical according to my experience so far…some of the things you have to learn them by doing and by seeing them.

R: mm…any other information that you’ll like to share regarding the support that you will require?

P7: Uh I think I’ve covered most of the points based on my experience.

R: Okay. Thank you, sir… um thank you for honoring the appointment once again…um please take note that the…after the publishing of the dissertation uh you are allowed to come and view it here from…at the college.

P7: No problem.

R: Okay thank you very much sir

P7: Ok.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* End of transcription\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*