



## Discontinued students in nursing education – Who and why?



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### ABSTRACT

There has been increasing interest in student nurse attrition due to the high level of attrition rates in many countries. Studies about nursing education and attrition have been conducted internationally, but only a few have explored attrition from the perspective of the students' own experiences. The purpose of this study was to describe who is a discontinued student in nursing education and the students' own experiences of reasons for leaving a nursing school. A descriptive design and qualitative approach was used. 25 nursing students were interviewed at two different universities of applied sciences in Finland. Four different types of discontinued nursing students were identified: those who moved to another school, those who faced a life crisis, those who made the wrong career choice and those who lived 'busy years'. The results show that the nursing student population is diverse, which has an effect on the students' career intentions, their learning and their ability to cope with studies. In nursing education, it is important to identify students who are at risk of discontinuing their studies and develop individual support systems to help nursing students complete their studies and enter into the workforce.

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### Introduction

High attrition rates in nursing education are a problem in many countries (Robshaw and Smith, 2004), ranging from 9% in Finland (Statistics Finland, 2014) to 24.5% in Australia (Gaynor et al., 2008), 28% in England (Buchan and Seccombe, 2011) and 50% in some nursing programmes in the United States (Brown and Marshall, 2008). From low and middle income countries there is little information available about student attrition rates (WHO, 2006). Attrition is often seen as a negative phenomenon, as it wastes financial resources and educational resources (Sabin, 2012; Sadler, 2003) and increases clinical training costs in healthcare programmes (Hamshire et al., 2012). Furthermore, attrition also has psychological costs (Sadler, 2003).

Currently, there is an international shortage of nurses driven by an aging population and the escalating demands of health care (Pitt et al., 2012). More nurses are needed than are graduating from the various programmes. Students who leave nursing education programmes perpetuate this shortage. It is important to prevent

attrition, ensure students' progress and help them complete their studies. In a steady state, the inflows into the workforce should equal the outflows. In Europe and in other developed countries, the successive generations are getting smaller. The average age of nurses is 41–45 years in EU (WHO, 2015). By 2020, there will be estimated shortage of 1,000,000 health professionals in the EU (European Commission, 2012) influencing on both public health services and private health services.

The reasons behind variations in the attrition rates are numerous and complex (Sabin, 2012). These include the lack of a common definition for attrition and the imprecise reasons for leaving (Eick et al., 2012; Glossop, 2001). Attrition is defined as a loss of students from a nursing education programme during one year of time. In Finland, attrition rates are calculated as the difference between the numbers of students beginning the programme in the autumn XXXX with respect to the number of students beginning the programme in autumn XXXX + 1. A student who has not graduated during the year or who has not re-enrolled in the following year is considered a discontinued student (Statistics Finland, 2014).

Nursing education in Finland is based on the directives issued by the European Union (2013/55/EU and 2005/36/EU) and conducted at the universities of applied sciences (later nursing school), also known as Polytechnics since late 1990s. The programme lasts for 3.5 years (210 ECTS, European Credit Transfer and Accumulation System; one ECTS consists about 27 h student's work). The degree, a

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Bachelor of Health Care, includes the registered nurse's certification to work in the field. Before, nursing education was conducted as a college level training. College-level nurses can nowadays update their qualification in the universities of applied sciences. Vocational qualification in social and health care, Licensed practical nurse comprises 180 ECVET (The European credit system for vocational education and training, 180 ECVET means three years education). Curriculum consist of theoretical studies, practical studies and on-the-job-learning carried out in workplaces. Entrance to nursing school and ability to progress one's studies in nursing education in Finland requires a secondary education, either a vocational certificate or matriculation examination from high school.

The purpose of this study was to describe who is a discontinued student (later DS) in nursing education and the students' own experiences of reasons for leaving a nursing school. In Finland there is no nursing research published on attrition. There is also a lack of research of analysis of DSs own experiences internationally. Although attrition is an international problem, it is important to describe Finnish DSs' experiences of attrition and compare whether the experiences are similar than in other countries. By providing evidence from different countries about nursing students' attrition, we can tackle the problem and advance students progress completing nursing education nationally and internationally. However, the lack of a common definition for attrition and different systems to calculate attrition rates makes it difficult to compare attrition statistics. This research also gives a new perspective about defining attrition to be used to develop common statistics in Europe.

## Literature

The existing literature has explored student attrition using a number of different methodological approaches, but few have explored DSs' own experiences (Andrew et al., 2008; Glogowska et al., 2007; Hamshire et al., 2012; O'Donnell, 2011). Previous studies identify a number of factors that affect attrition rates of those entering the nursing profession, including their career intentions and the selection procedures (Pitt et al., 2012; Salamonson et al., 2014), a realistic job preview and perceptions of nursing as a profession (Glossop, 2002), clinical experiences (Bowden, 2008; Brodie et al., 2004; Glogowska et al., 2007; Glossop, 2002; Last and Fulbrook, 2003), educational experiences (Bowden, 2008; Brodie et al., 2004; Glogowska et al., 2007; Glossop, 2002; Pitt et al., 2012) and personal reasons (Bowden, 2008; Pitt et al., 2012; Sadler, 2003). Personal reasons can be divided into three categories: family reasons (Glossop, 2002), financial reasons (Glogowska et al., 2007; Glossop, 2002) and health reasons (Bowden, 2008; Brodie et al., 2004; Glogowska et al., 2007; Glossop, 2002; Last and Fulbrook, 2003; Robshaw and Smith, 2004).

The wrong career choice and academic difficulties were among the most commonly reported reasons for leaving a nursing programme (Glossop, 2002). According to Brodie et al. (2004), students' perceptions of nursing had changed as a result of their educational and clinical experiences. Students were surprised by the high academic standards required of them. Before entering nursing education, many students underestimated the depth of knowledge required and the extent of nurses' responsibilities (Brodie et al., 2004). Negative placement experiences also have an impact on nursing students' decisions to leave (Hamshire et al., 2012). Students' attributes influence their ability to complete their studies and cope with difficult placement experiences (Eick et al., 2012). In summary, the factors affecting attrition are complex and interrelated. Furthermore, the reasons for leaving tend to be imprecise (Banks et al., 2012; Glossop, 2001; Hamshire et al., 2012). The broad range of categories used in the literature makes

it difficult to ascertain the exact causes of individual student nursing attrition.

## Methods

### Study design

A qualitative study design was used in a purposeful sample of 25 nursing students who had discontinued their studies in nursing education programmes during a single academic year, 2009–2010, and who were willing to participate in this study.

### Data collection

Data were collected in autumn 2010 from two different nursing schools in Finland. Both schools were asked to name a contact person to gather the information about students who had discontinued their studies during the academic year 2009–2010. Students' contact details were handed over to the researcher, who then contacted all of the DSs (N = 130) from both schools by sending them an information letter. Data collection was done by calling the students and asking them to participate in the study. The study population consisted of 25 nursing students: 22 females and 3 males. Their mean age was 31 years and more than half of the students had children and previous work experience in nursing (Table 1).

The data were collected via semi-structured interviews. The framework for the interviews was based on the literature review (see Table 2). The interviews began with background questions (see Table 1). Furthermore, students were asked to tell why they had discontinued their studies in nursing. During the interviews, students were also asked about the reasons that had influenced their decision to leave nursing programme.

Students were facilitated to answer each question freely and talk about their experiences, thoughts and feelings. The researcher mainly did not interrupt the students' stories by asking any further questions about different topics. Some students gave very short answers, and in these cases the researcher encouraged them to elaborate on their stories further by asking student tell more about the topic. The researcher ensured that all the topics were covered during the interviews. The interviews were recorded for later transcription and analysis with the permission of the respondents. The interviews lasted approximately 20–30 min. Saturation of data occurred after 20 interviews, as the participants' stories started to overlap and no new information was found (Grove et al., 2013). However data collection was continued up to 25 to make sure respondents from both nursing schools and all statistic groups by the Ministry of Education were covered (Statistics Finland, 2014).

### Data analysis

Data analysis was done in three phases. In phase I, the individual DSs were described and clustered into groups. Four different types of DSs were identified and named. In phase II, students' interviews were analysed using narrative analysis. In phase III, deductive content analysis was conducted by developing a categorisation matrix and students' stories were coded based on the categories in the matrix (Table 3). Data were analysed for the different categories and subcategories using principles of inductive content analysis.

**Phase I:** The data analysis process was started by describing and clustering individual DSs into groups (Grove et al., 2013). Internationally there are different ways to calculate and keep attrition statistics. In this research Finnish attrition statistic system was used. In Finland nursing schools have to divide DSs into statistic groups, which are decided upon by the Ministry of Education. This

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