

**GUIDELINES FOR THE IMPLEMENTATION OF TRANSNATIONAL
NURSING EDUCATION: A COLLECTIVE CASE STUDY
APPROACH OF INSTITUTIONAL PERSPECTIVES AND
PRACTICES**

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Faculty of Health Sciences at the Durban University of Technology

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Declaration

This is to certify that the work is entirely my own and not of any other person, unless explicitly acknowledged (including citation of published and unpublished sources). The work has not previously been submitted in any form to the Durban University of Technology or to any other institution for assessment or for any other purpose.

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Abstract

Background

In recent times, the internationalization of nursing education and the collaboration with international academic partners has become a priority of academic institutions' strategic plans and visions. This coupled with the fact that the world has entered a critical period in terms of addressing health and preparing nurses to address health needs has made this study timeous. In view of these historical challenges, nursing education institutions, nursing colleges and universities with nursing faculties in South Africa have, in recent years, engaged in international partnerships. These collaborative partnerships have influenced the delivery and facilitation of transnational nursing education (TNE) or cross-border nursing programmes, both nationally and internationally. Challenges raised with regards to TNE delivery systems are often related to issues revolving around academic design and implementation. Further issues such as the differences between the host institution's general goals, the academic programs, student characteristics and social and cultural dimensions as compared to the awarding institution, add to these challenges.

Aim

The aim of this study was to explore the perspectives and practices and experiences of nursing education institutions, academic leaders and graduates, who were involved in TNE. Based on the findings of this study, the ultimate aim was to develop guidelines for the implementation of TNE in NEIs.

Methodology

A qualitative multiple case-study approach was employed to explore institutional perspectives and practices related to TNE. The population comprised nursing education institutions, academic leaders and nursing graduates that were

involved in TNE programs. In order to draw comparison between South African TNE practices and perspectives with international best operating practices relating to TNE, other global academic leaders and institutions involved in this type of education were invited to participate in the study. Institutional records were analysed for descriptions and patterns related to conceptual issues, structures and processes that are known to impact either negatively or positively on TNE.

Results

The study findings revealed that access to 'importing' and 'exporting' of nursing programs are still faced with many challenges by all stakeholders. It was also revealed that the lack of guidance during TNE ventures allude to cross-border nursing education being a 'for profit' arrangement. From the findings the researcher was able to propose and develop guidelines for the implementation of TNE for nursing education institutions, academic leaders and students. It is hoped that these guidelines will be considered as a tool to improve TNE delivery in terms of quality assurance, accreditation, registration, and qualification recognition.

Key Concepts

Cross-border education, exporting of education, transnational nursing education (TNE).

Dedication

I dedicate this dissertation to both my beloved husband Mickey and my children Shivaan and Veantha. Their support and encouragement gave me the strength, courage and hope to go on and their faith and belief in me made my goals a reality. For willingly “sharing” me with others and allowing me to fearlessly chase my dreams. For finding and knowing me, even when I could not know or find myself. For listening to me when I was angry, hugging me when I was sad and laughing with me when I was happy (sometimes at me!).

To my precious family...THANK YOU ALL for just being a part of my life. I LOVE YOU.

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Glossary of Terms

Cross-border education: includes distance education (e-learning) and comprising franchise courses or degrees. It does not necessarily require the physical movement of the consumer or provider (Altbach and Knight 2007: 291).

Exporting of education: a term referred to educational services that are delivered in various ways such as students travelling abroad to receive their education, or education being delivered through distance learning and educational institutions from one country providing onsite classes in another country (Baumann and Blythe 2008: 4).

Transnational education: refers to a type of education in which the learners are located in a country different from the one where the awarding institution is based (Miliszweska 2008: 79).

Transnational nursing education (TNE): It is a term used to describe nursing courses or programmes and individual study modules which are offered abroad essentially for students from the respective host country or region. The learners are located in a country different from the one where the awarding institution is based but remain under the main academic responsibility of a university or nursing education institution in another country (Wilson 2002: 418).

List of Acronyms

Acronym	Full word/sentence
CEO	Chief Executive officer
CHE	Council on Higher Education
DUT	Durban University of Technology
EHEA	European Higher Education Area
HEQC	Higher Education Quality Committee
ICN	International Council of Nurses
MDG	Millennium Development Goals
NAAC	National Assessment and Accreditation Council
NEI	Nursing education institutions
NMMU	Nelson Mandela Metropolitan University
SANC	South African Nursing Council
TNE	Transnational Nursing Education
UCT	University of Cape Town
UNESCO	United Nations Educational Scientific and Cultural Organization
UKZN	University of KwaZulu-Natal
UP	University of Pretoria

A LESSON IN LIFE

*To say Goodbye, is the hardest of all things I ever had to do
Even though we are separated by distance and far of places
And even though, we may never see each other again,
I will always remember your kind smiles and loving faces.
I know our time together was short, but even though we may be on
the other side of the world, across the wide open seas,
You have no doubt, made a big and lasting impact in my life.
I value your courage, your honesty, your humility, so don't ever
changeplease!
You smiled, when I told you, you were not coping
You refused to be down and kept holding on and hoping.*

*They say that life is a journey, with a long and winding road,
Remember, you will always reap what you have sowed.
I know this year was very intense and there were times you were tired
and burnt out...
But each of you had an inner courage that made you hold on
You had strength to go on, even when you thought you could not.*

*Now, when I look at how far you have come and how you have all
grown.....
And when I see warm smiles and confident faces looking back at me,
I know now that God must have sent me his precious angels
Across another continent, when HE brought you all to me.
I will never forget you and I hold you close to my heart*

*Now even as I say Goodbye.....I realise, I came here to teach, but, it
was I who was TAUGHT!*

THANK YOU FOR BEING A PART OF MY LIFE!!

(Written by educator who was involved in coordination and facilitation of
cross- border nurse education - Vasanthrie Naidoo)

CHAPTER 1 : OVERVIEW OF THE STUDY

1.1 INTRODUCTION AND BACKGROUND

As higher education in nursing adopts new trends and shifts towards its first world counterparts, countries world-wide are paying greater attention to the regulation and promotion of quality within its sectors. Faced with rapid globalization and economic uncertainty, governments and educational leaders are endeavouring to ensure that the quality of their higher education systems meets international standards. According to Villanueva (2012: 1), education quality is often associated with policies that are aimed at promoting economic development and equity.

In recent times, the internationalization of nursing education and collaboration with international academic partners has become a priority of academic institutions' strategic plans and visions. This coupled with the fact that the world has entered a critical period in terms of addressing health and preparing nurses to address health needs has made this study timeous. The scarcity of qualified health personnel, including nurses, has being highlighted as one of the biggest obstacles to achieving the Millennium Development Goals (MDGs). According to Kylvänen and Spasic (2010: 1), competence in nursing is essential, as employers, consumers, and other health care stakeholders have heightened expectations of nursing practice. The authors state that globalization, rapid technological development and increased scientific innovations in health sciences as well as demands of cost-effectiveness have created an interest in understanding competence in nursing and finding new ways of making it measurable.

Shortage of nurses is not just an organizational challenge or a topic for economic analysis, but also has a major negative impact on health care. Failure to deal with a nursing shortage whether it is local, regional, national or

global will lead to a failure in maintaining or improving health care (Khamisa, Peltzer and Oldenburg 2013: 2214).

In view of these historical challenges, nursing education institutions (NEIs), nursing colleges and universities with nursing faculties in South Africa have in recent years, engaged in international partnerships. These collaborative partnerships have influenced the delivery and facilitation of transnational nursing education (TNE) or cross-border nursing programmes. Cross-border education refers to the movement of people, programmes, providers, knowledge, ideas, projects and services across national boundaries. A report prepared by Knight (2006: 19) for the Commonwealth of Learning and the United Nations Educational Scientific and Cultural Organization (UNESCO), described cross-border, education as a term that is often used interchangeably with transnational education, offshore education and borderless education. Another study conducted by Zeleza (2012: 2) that explored the opportunities and challenges of internationalization of education concluded that scholars sometimes disagree on the meaning of the term 'internationalization' because of the diversity and complexity of its rationales, activities, stakeholders, and providers at the national, sectoral, and institutional levels. However, other terms are used interchangeably with internationalization including transnational education, borderless education, offshore education, and cross-border education.

A study by Knight (2008: 1) found that the proliferation of TNE has created concerns regarding curriculum quality and the need to standardize professional education. While it can be argued that the theory that underpins nursing education is generally global in nature, challenges raised with regards to TNE delivery systems are often related to issues revolving around academic design and implementation. Further issues such as the differences between the host institution's general goals, the academic programs, student characteristics and social and cultural dimensions as compared to the awarding institution, adds to these challenges.

Transnational nursing education includes all types of higher education study programmes, or sets of courses of study, or educational services in which the learners are located in a country different from the one where the awarding institution is based, but remain under the main academic responsibility of a university or nursing education institution in another country (Wilson 2002: 418). Transnational courses offered by universities in South Africa are commonplace and there have been a large number of health science programs that have been facilitated off-shore in the last decade. However, findings in a study done by Moleki (2008:19), which examined distance learning amongst nursing students has revealed that there is an apparent lack of evidence related to the practices of distance education or TNE in South African NEIs. Another study done by education Nguyen (2012: 14) revealed that quality development in this type of educational endeavours is more than the formal quality assurance processes that policymakers like to focus upon when they speak about quality in higher education. A study by Bednarz, Schim and Doorenbos (2010: 253) found that successful delivery of TNE is the sum of many methods of institutional development, ranging from competitive hiring procedures, creating appropriate funding opportunities and facilitating communication between disciplines and supporting innovative initiatives through institutional incentives.

The surplus and shortage of nurses in various parts of the world has shifted periodically from one country to another. According to Baumann and Blythe (2008: 3), to address this issue education has become a business in the globalized world and is seen as both an investment and an export commodity. The exporting of specialised types of education such as nurse education is commonly occurring in various countries and various disciplines and specialisations of nursing. The globalisation of higher education manifests itself in various forms, one of which is TNE. TNE is a term used to describe nursing courses or programmes and individual study modules which are offered abroad essentially for students from the respective host country or region. The learners are located in a country different from the one where the awarding institution is based but remains under the main academic

responsibility of a university or nursing education institution in another country (Miliszweska 2008: 79). Wilson (2002: 418-420), who explored the different models of TNE programs, states that while conducting these programs can be a very rewarding activity for a NEI, it can have clear long-term implications for the nature and structure of nursing educational provision nationally and internationally.

Although the internationalization or globalization of nursing education poses numerous challenges, there are many benefits to be gained from these ventures with the most significant being greater cross-cultural understanding and improved practices in workplaces across countries. However, the way in which nursing education, nursing and nurses contribute to the international agenda is crucial to maintaining standards of education and nursing in relation to availability and effectiveness of technologies, tutors support and student expectations. According to Baumann and Blythe (2008: 418), standards are crucial in regulated professions, such as nursing, where, lives depend on the possession of specific competencies. There appears to be a keen interest by NEIs in TNE and this could be due to a number of factors. Some of these factors include changes in student and programme mobility, long distance educational delivery, and the global trend of economic and educational partnerships. However, the increasing interest in this type of cross-border education extends beyond changes in student nurse demographics and new nursing education delivery models.

A study conducted by Qiang (2003: 250) that analysed higher education internationalization agrees that educational projects abroad not only increases employability and mobility of students and educators, but also improves the skills, knowledge, attitudes and expertise of students, staff and faculty, which aids in the development of international curricula and educational programs. This study also revealed that there was increased global awareness of the vital role that TNE played in building national capacity and enhancing mutual understanding amongst cultures. According to Chetro-Szivos (2010: 5), scholars believe that sharing of knowledge can influence social and economic

progress within a country through the intellectual growth of its nursing and medical population.

There are many other contemporary trends that merit the consideration of the potentials and positives of cross border education. These are globalization of economies, the shift from an industrial to a knowledge based society and internationalization of nursing education. These leading factors aid in the successful outputs of TNE with regards to sharing of medical knowledge. It has been noted by Czanderna (2013: 2), who examined the challenges and experiences with cross border education in a study that related to global experiences of healthcare workers, that in the last two decades the world witnessed significant growth in cross-border nursing educational service delivery modes. This has created an increased awareness as to how this type of education is being conceptualized and seen as being more than just an exchange of students and faculty.

Advancements in technology have made cross-continental delivery of education possible. In addition, many nursing colleges and universities are changing their mission and vision statements to incorporate an international focus. Nursing institutions regard TNE as a dynamic approach to building mutual understanding and assisting other countries in capacity development. Generating revenue and answering the need for educated and skilled nurse practitioners in response to the demands of a globalized society as well as being recognized as an important means of achieving rapid production of skilled human capacity are other benefits cited by Czanderna (2013: 102).

However, Chetro-Szivos (2010: 10) argues that parallel to the opportunities TNE provides, there are a number of challenges and potential pitfalls that can threaten its delivery. Some of these include factors such as low quality providers or NEIs that offer invalid or non-accredited courses or degrees, resistance to change and a lack of cultural sensitivity. The study also agrees that even though the internationalization process should be shaped to lead to quality improvement of education, it is subject to much debate, mainly

because the quality of education is still fragmented. The act of educating nurses in another country affects the values, ethics, and attitudes of the student. This is a challenge institutions face as well as policy makers and stakeholders. Those paying for education often question what job opportunities exist upon graduation. A study conducted by Mishra (2007: 10) revealed that although attempts were made to establish international standards that allowed for reconciliation of intercontinental standards with cultural diversity, critical issues in TNE included the absence of a body that has the international authority to monitor educational standards worldwide. The South African Nursing Council (SANC) is a regulatory body which sets standards for the establishment and outcomes of nursing education and training programs, including clinical learning programs (SANC 2012: 2). The body also approves such programmes that meet the requirements of the Nursing Act No. 33 of 2005 (Republic of South Africa 2005). A literature search of South African nursing resources has not yielded any reference to the delivery of nursing programs abroad. Other professional nursing education bodies in South Africa such as the Nursing Education Association (NEA) that supports nursing education also has no available literature generated from within their own ranks on TNE.

While the Council on Higher Education (CHE) in South Africa supports and encourages international cooperation, with regards to higher education and training and acts as a custodian of quality assurance for higher education published reports from the CHE do not allude to, or provide any information regarding the provision and practice of cross-border nursing education. Reports from the CHE concluded that programs offered to other developing countries were often seen as opportunistic and driven by profit motives, rather than quality considerations (Council on Higher Education [CHE] 2015: 25-29). In accordance with this and whilst making recommendations in its policy briefing reports on accreditation of institutions for health professional education, the World Health Organization (WHO) is of the view that health professional education might also benefit from the strong educational quality

frameworks on which national higher education accreditation systems are based (WHO 2013: 12).

Any country wishing to develop and maintain a successful TNE system must rely on relevant research. Implementing such systems is complex in any context, but a number of recent studies highlight the additional challenges of implementing and maintaining effective nursing education systems in a developing context (Kufoniyi 2010: 107). At the same time the higher education accreditation systems may also benefit from the strong professional focus of health professional education (WHO 2013: 12). An in-depth study of institutional perceptions and practices related to TNE could help to create better understanding of the possible opportunities for and potential challenges to implementing this type of nursing education. One of the functions of the SANC is to accredit NEI's and the training programmes presented by those institutions and the SANC is empowered in terms of legislation to perform these functions.

1.2 RESEARCH PROBLEM

Delivery of quality nursing education will always remain a main focus in any NEI. The grave shortage of nursing specialists in South Africa has also lent a hand in so-called 'exporting' of nursing education in an attempt to train and recruit nurses to South Africa. Maintaining equivalent standards for any transnational or off-shore nursing education program is vital as graduates will receive the same award, professional recognition or both. There is always a risk of inappropriate delivery of programs of teaching and learning in off-shore environments. It is therefore, essential that outcomes are consistently controlled and governed by best operating practices. Maintenance of nursing, educational and subsequent practice standards is a continuous challenge with TNE. Even though South African universities and NEIs have been actively involved in these types of nursing programs, the researcher has not identified research studies that have focused on best operating practices relating to TNE in South Africa. Research is therefore, critical to guiding policymakers and stakeholders regarding the best way forward. The decision to formulate

and implement guidelines needs to be informed by a clear understanding of how TNE is perceived both locally and abroad. This information will provide the understanding of key factors and issues that are relevant to the development and implementation of clear and safe practice TNE guidelines.

1.3 AIM

The aim of this study was to explore the perspectives and practices and experiences of nursing education institutions, academic leaders and graduates, who were involved in TNE. Based on the findings of this study, the ultimate aim was to develop guidelines for the implementation of TNE in NEIs.

1.4 OBJECTIVES OF THE STUDY

The objectives of the study were to:

- Explore the views of academic leaders and graduates regarding TNE experiences.
- Determine best operating practices in the provision of TNE nationally and internationally.
- Identify functional deficits and challenges related to facilitation of TNE nationally and internationally.
- Develop TNE guidelines that will meet the needs of the service provider and the student.

1.5 RESEARCH QUESTIONS

The following questions guided this qualitative research in the form of a multiple case study design:

- How TNE is conceptualized within nursing education institutions?
- How does the nursing education institution currently ensure best practices when facilitating TNE?
- What are the factors that impact on the implementation of TNE?
- What are the existing control mechanisms that govern facilitation of TNE?

1.6 SIGNIFICANCE OF THE STUDY

It is hoped that the findings of this research study will help to guide stakeholders and policymakers in deciding whether the present Nursing Act, 2005, section 42, should be repealed, amended, or implemented as is. With the changing nature of nurse education, particularly in the development of more flexible approaches to TNE, it is, therefore, important to examine whether this type of learning and teaching would be strengthened by strict adherence to guidelines and protocols that would allow for successful implementation of such a programme off-shore (Parker and McMillan 2007: 128).

1.7 OPERATIONAL DEFINITION OF TNE

This type of nurse education includes all types of nursing courses or higher education nurse study programmes, or sets of courses of study, or educational services (including those of distance education) pertaining to nursing in which the learners are located in a country different from the one where the awarding institution is based. Such programs may belong to the educational system of a country different from the one in which they are offered or may be offered independently of any national system.

1.8 PARADIGMATIC PERSPECTIVE

A paradigm directs human behaviour related to one's thinking and interpretation of activities. It can also enhance philosophical ideas on which the research is based (Joubish et al. 2011: 2084). These authors further define a paradigm as a pattern of beliefs, values, techniques and theories shared by members of a scientific community. Ritchie and Lewis (2003: 6) view paradigms as ideas about the world and the nature of knowledge in social reality. These worldviews are representative of a predictive or envisaged set of beliefs, and include methodologies, theories and traditions that guide research. According to Joubish et al. (2011: 2084), a paradigm can be regarded as a worldview or a way of thinking that makes sense of the complexities of the real world and one that provides a theoretical perspective

or orientation that can frequently guide the researcher's approach towards the topic. In research, paradigmatic perspectives are related to two main assumptions that underlie social research: the positivist also referred to as the logical empiricism and interpretive paradigm that is the socially constructed knowledge claim paradigm (Creswell 2007: 19).

1.8.1 Positivist paradigm

In the positivist view, science is seen as the way to get the truth, to understand the world well enough so that it can be controlled by a process of prediction. Positivists seek facts or causes of social phenomena (Ritchie and Lewis 2003: 9). This paradigm posits that knowledge is based on careful observation and measurement of the objective reality that exists out there in the world. The positivist sees scientific work as neutral and free from human emotion, beliefs, value judgments, attitudes, distortions and prejudices, allowing the collected data to be based on objective facts. According to Polit and Beck (2008:14), positivism does not take into consideration cultural influences on interpretations and meaning of data. Instead, it is stated by the above authors that a fundamental assumption of positivists is that there is a reality out there, that can be studied and known.

1.8.2 Interpretive/socially constructed knowledge paradigms

The researcher selected the interpretive paradigms as being appropriate for this particular study. According to Creswell (2007: 24), research is classified as interpretive if it is assumed that the knowledge of reality is gained through social construction such as language, consciousness, shared meanings, documents, tools and other artifacts. In this study the use of interpretive research was aimed at understanding the context of transnational nurse education and the process whereby it influenced and was influenced by its stakeholders. The principle of context is based on insight that there is an inevitable difference in understanding between the interpreter and the author of a text, for instance, and while studying the text the researcher or reader

tries to absorb or get an understanding of how its parts can relate to its whole (De Vos et al. 2011: 8).

With an interpretive paradigm, the role of the researcher as the co-creator of meaning in the individual's experiences becomes more valuable, both in collecting and in analyzing data. The interpretive paradigm seeks to produce a descriptive analysis to provide a deep interpretation and understanding of cross-border or transnational nurse education. This ties in with the focus of this research, as its purpose was to explore perspectives and practices of NEIs as well as that of graduates and their experience of TNE. The enquirer in this study achieved this through the analysis and interpretation of the text to look for the way in which the participants made meaning of their experiences.

1.8.3 Paradigmatic assumptions

All research paradigmatic perspective whether positivistic or interpretive, encompasses a set of philosophical assumptions that guide one's approach to the inquiry (Creswell 2007: 19).

1.8.4 Assumptions underlying the study

Assumptions are basic principles that are accepted as true on the basis of logic or reasoning without proof or verification (Grove, Burns and Gray (2013: 41). In research, assumptions are embedded in the philosophical base of the framework or study. These assumptions influence the development and implementation of the research process. In this regard it was assumed that the subjective reality of TNE could only be understood within the context of the perspectives and practices of each participant or participating institution. Qualitative research is strengthened by reporting faithfully on these realities and on the voices and interpretations of participants (Polit and Beck 2012: 17). The researcher approached the study with an open mind with a pre-set theoretical framework that was used to provide focus to the study. In this study, assumptions from adult learning theories on interpretive paradigm perspectives were selected in response to the interaction with the research

field that directed the thinking and activities thereof. In so doing, the researcher did not describe or predict the outcome or pre-empt any theory (De Vos et al. 2011: 8).

1.8.5 Conceptual framework

According to Grove, Burns and Gray (2013: 41), a conceptual framework provides a rationale or structure that guides the development of the study. It forms an understanding on which the study is based. Furthermore, a conceptual framework enables the researcher to link the findings of the study to the existing body of knowledge and conceptualize this in practice. It is made up of propositions, sets of concepts and statements integrated into a meaningful configuration.

1.9 CONCEPTUAL FRAMEWORK THAT GUIDED THE STUDY

Figure 1 is adapted from a model drawn up by the National Assessment and Accreditation Council (NAAC) of India. This model serves as a basis for accreditation of higher education in that country.

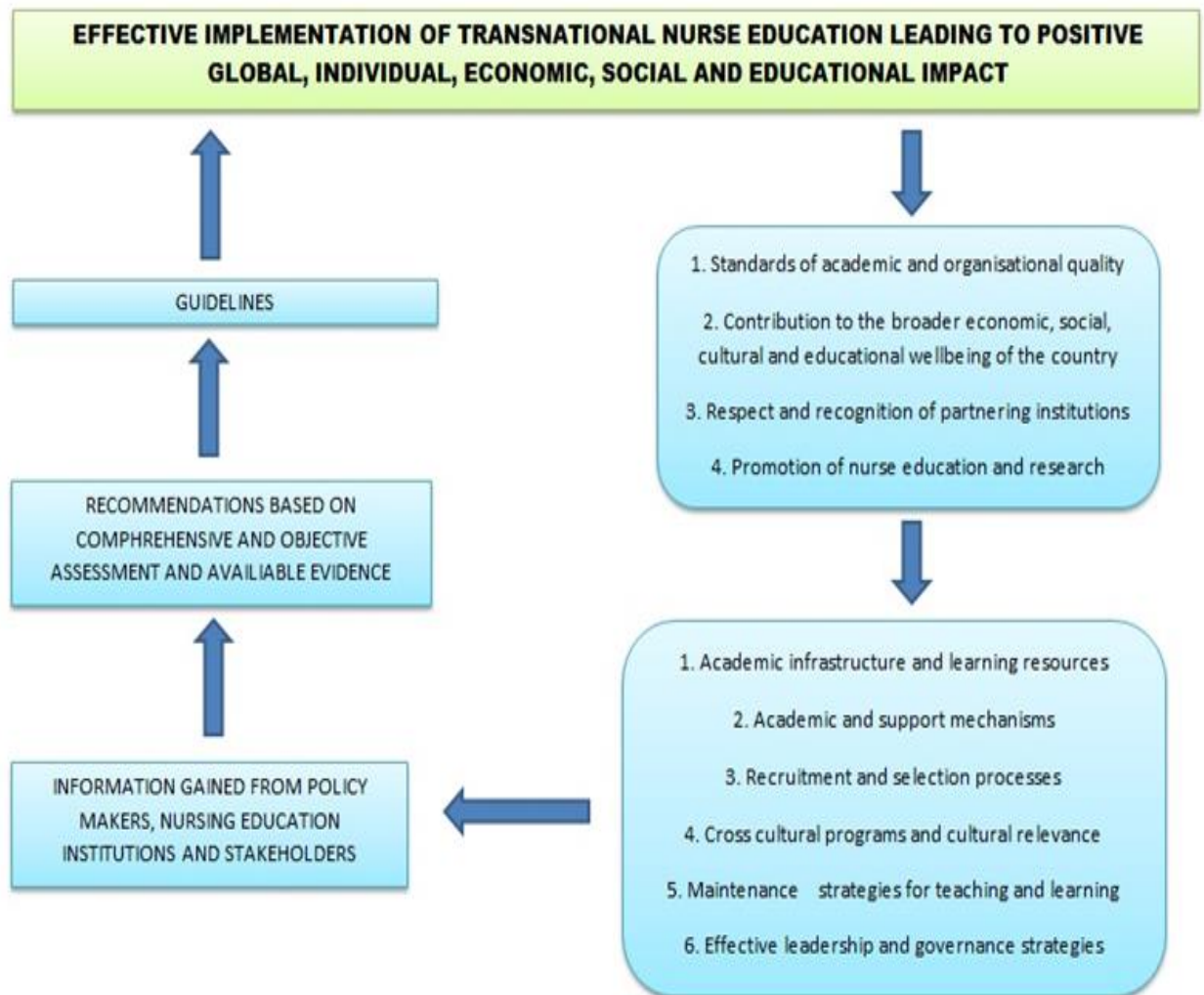


Figure 1: Implementation of TNE guidelines having a positive effect on its service delivery and implementation

Source: (adapted from the National Assessment and Accreditation Council (NAAC) for Quality and Excellence in Higher Education in India)

The schematic diagram in Figure 1 illustrates how the formulation of guidelines assists in generating quality standards in nurse education. It further clarifies certain factors that needed to be taken into consideration when formulating these guidelines, which will ultimately result in effective implementation of TNE.

1.10 STRUCTURE OF THE THESIS

Chapter 1 provides an overview and background to the current study, together with an illustration and explanation of the conceptual framework that guided the study.

Chapter 2 describes and discusses literature on TNE in a conceptual and contextual manner as related firstly to higher education and then to nursing education. The discussion then moves on to the internal quality assurance structures and practices associated with TNE delivery both in the national and the international arena. Other relevant literature pertaining to stakeholder accountability and responsibility and TNE challenges as well as best operating practices is presented.

The research design, methodology and research process is the focus of **Chapter 3**. Here the research design, researcher bias and impact, study population, sample size, method and the selection criteria is discussed. An overview of the type of approach used for this qualitative study, interview sites, and interview techniques is presented. Data collection methods and data analysis methods are also discussed.

Chapter 4 presents the data analysis of the study and highlights this information in the form of themes and sub-themes that emerged after data was analysed and as per participants' responses and record reviews. Evidence will be presented to back up the generated themes and underpinned by quotes from the transcribed data of the actual interviews of participants.

Discussion of the key findings and the link between these and the literature is presented in **Chapter 5**. Chapter 5 also discusses the interrelationships between the literature and the findings and identifies challenges and best practices in the delivery of TNE.

Proposed guidelines for implementation of transnational nurse education will be the focus of **Chapter 6** and this chapter will take into consideration the findings of the current study and as discussed in Chapter 5. The proposed guidelines will be discussed through inductive and deductive reasoning from the conclusions drawn.

The thesis concludes with **Chapter 7** which presents limitations, conclusions and recommendations and an articulation of the key contributions of the thesis to knowledge and professional nursing education and practice.

1.11 CONCLUSION

Nursing education institutions are agents of social responsibility and they can expand this mandate by forging collaborative ventures to produce the worldwide leaders in the health care sector. These international partnerships related to nursing education can instil in future nurse leaders the values and knowledge to build a sustainable future. The significance of international cooperation for the transfer of knowledge across the borders is critical in meeting the needs of people across the globe. In order for cross-border nursing education to be truly effective it can no longer remain unidirectional. At the time of the study it was noted that a minimum of five NEIs in South Africa were involved in TNE. However, it was apparent that there was an absence or lack of a coordinating body and regulations to guide the processes. This then resulted in significant variations in curriculum, academic policies, and practices among institutions. The NEIs of the world have rich knowledge and perspectives to share so we may all address the future with the greatest amount of collective knowledge. Such an effort would make new found knowledge more accessible to more people. Enabling transnational or cross border nursing education to be delivered in a collaborative model that can generate new forms of knowledge and innovation benefitting all societies.

CHAPTER 2 : LITERATURE REVIEW

2.1 INTRODUCTION

Following the advent of globalization in the last decade of the last millennium, the growth of TNE has reached huge proportions, and today it has become an integral part of almost all nursing education institutions. TNE not only builds international partnerships between universities and nursing institutions globally but is known to instil in future leaders the values and knowledge to build a sustainable future. The significance of international cooperation for the transfer of knowledge across border is critical in meeting the needs of people across the globe. Parallel to these opportunities are an equal number of challenges for service delivery providers (Chetro-Szivos 2010: 7). A study by Baumann and Blythe (2008: 2) revealed that the demand for higher education has increased worldwide and the proliferation of nursing educational courses has targeted international clientele. However, there are still concerns about quality and consistency relating to students falling victim to misleading guidance and information by disreputable providers of off-shore nursing education, which in turn can lead to qualifications of limited validity and decreased standards of nursing education.

This chapter therefore seeks to explain the impact of transnational education on different aspects of higher education before discussing TNE. The chapter identifies the current approaches adopted towards TNE nationally and internationally. It is hoped that this information will add to existing knowledge relevant to cross-border or borderless nursing education programmes. By contextualising transnational education and TNE and further discussing the related governance, facilitation and control, this chapter aims to understand issues relevant to nursing students, nurse educators, nursing workforce planners, and the tertiary educational institutions offering nursing programmes.

2.2 EMERGING PATTERNS OF TRANSNATIONAL EDUCATION

Transnational education appears to have had and will continue to have profound and far-reaching implications for all those involved. Notably, the challenges represented by transnational education impact at the local, regional, national and international levels. It is important that reactions to these multi-level challenges result in changes or responses for its betterment. Transnational education should be viewed as a positive set of opportunities and not something to be feared. It has become a permanent reality in the life of higher education. The emerging patterns of transnational education nationally and internationally are supported by findings from a study conducted by Altbach and Knight (2007: 291) where it was found that at times transnational education impacts unevenly on different sectors and is largely confined to business subjects such as information technology, computer science and the teaching of widely spoken languages including Spanish, German and English. Another study conducted by Kehm and Teichler (2007: 261) concluded that much of transnational educational activity is delivered in the non-university 'applied' sectors, particularly for continuing education qualifications. It was also noted that the globalisation of the different professions is likely to intensify these trends where professions like commerce and accountancy are rapidly moving towards global standards.

2.3 MAIN FACTORS DETERMINING THE SUPPLY OF TRANSNATIONAL EDUCATION

Various factors have given rise to the internationalization of higher education. The global globalizing economy and the development of knowledge societies is probably the biggest issue, together with the rise of new information and communication technologies. These processes are heightened by the demand for higher education. These factors have given rise to the mobility of students, academics and educational programs. The contemporary world can now boast a greater diversification of educational service providers, the privatization and marketization of institutions of higher education, and the

emergence of new forms of transnational knowledge production (Zezeza 2012: 3).

Supplies of transnational education are determined by certain factors such as costs of facilitation of programmes, the needs of the national market and the existence of legal regulation and controls. The motivation for any transnational educational program comes directly from the need to raise income by 'for profit' and traditional state education providers. However, it was noted that the latter were increasingly seeking new ways to increase their funding for such ventures. This was noted in the literature search regarding European providers of such a type of education and could possibly explain the dominance of transnational education in this country. It can also be concluded that the supply of transnational education provision is complimented by the surge in technology and the internet in recent years allowing students to become more internationally knowledgeable and interculturably skilled (Qiang 2003: 250).

In some countries, there seems to be an increased awareness and demand for transnational education. Evidence from a study conducted by Adam (2001: 5) shows that in Southern Europe a high demand for transnational education exists and this often acts as a bridge to higher education and the acquisition of internationally recognised qualifications. It was also noted in this study that despite transnational education being complex, it linked the educational provision in Europe by the way it impacted on related areas such as globalization, the 'marketization' of education, lifelong learning, consumer protection, 'recognition' and 'transparency' and quality. It was also apparent that the more rigid the education system, the more it attracted transnational providers. There was often a clear pattern that focused on factors such as:

- Cost of the programme;
- Brand name of the provider and product;
- Value-added from the programme;
- Reputation, quality and perceptions of the programme;
- The national/international recognition of the programme;

- The convenience and nature of delivery; and
- The level of competition.

There also appears to be other factors that lure or attract students such as a flexible system which responds to the needs of its citizens. Other factors that repel or turn students away from 'home' providers of education include national education systems offering qualifications that have less relevance, quality, access and international recognition. There is clear evidence that the demand for alternative sources of education is increasing. The European and global education market is becoming more competitive and nation states need to ensure that their domestic systems compete. Perhaps the best way to achieve this is to learn from the competition and make systems flexible and responsive to the needs of citizens.

2.4 GOVERNANCE OF TRANSNATIONAL EDUCATION

A study conducted by Djelic and Anderson (2009: 396-397) compared the importing of fashion items and clothing to the so called of 'importing' of education. The same study that investigated the dynamics of regulations that governed transnational education revealed that the effects of a 'transnationalizing' world are felt throughout the world on a daily basis. Educational institutions around the world are going through multiple certification processes and are bound to various categories of standards, efficiency, and quality. Some of these processes border on ethical or environmental issues. These only provide further evidence of the impact of transnationalization in our daily lives. According to Djelic and Anderson (2006: 2), a transnational world is not about the disappearance of rules and order; if anything it increases the scope and breadth of regulatory and governance activities of all kinds. The authors explored the institutional dynamics of regulation related to transnational governance and show that organizing and monitoring activities represent another important dimension of contemporary governance.

Beerens (2008: 409), in a study that focused on European Higher Education and research, stated that higher education and research in Europe are predominantly activities in the public domain. People however do cross borders in order to receive or provide these public services and they collaborate in order to produce new knowledge. Therefore, the most important and obvious indicators for transnational activity in Europe are the mobility of individual students and academics and collaboration and exchange between academics. The study also concluded that an important task for many regulatory organizations is to issue rules but they may also be involved in elaborating and activating processes to monitor adoption and implementation of those rules. Although intense governance activity takes place between and across nations, regulatory boundaries do not necessarily coincide with national boundaries. Austin and Jones (2015: 189) concluded that although cross-border education or transnational education is a catch-all phrase that provides a platform for international cooperation and exchange, it is often plagued by financial constraints, risk aversion, intense competition and stringent regulatory frameworks. The authors further conclude that ongoing debates between partnering institutions as to whether a branch campus should be subject to the same academic standards, practices and regulations as the 'home' campus still prevail. Governance processes appear to be complicated further due to operating in different national environments with different cultures, languages and academic traditions. The result is that the international higher education sector is under continuing pressure to rethink, reassess, refine, re-engineer, and review TNE policies and practices.

2.5 FACILITATION OF TRANSNATIONAL EDUCATION

Harden (2006: 22) describes internationalization or transnationalization of education as one of the most important forces in higher education in the modern world. The facilitation of TNE lies in a move toward international and interconnected approaches, which emphasize the mobility of students, teachers, and curriculum across the boundaries between countries, emphasizing a transnational approach in which internationalization is integrated and embedded within a curriculum, involving collaboration between

a numbers of schools in different countries. The dynamics of acquisition of a tertiary qualification can therefore be challenging, as many students nowadays travel overseas to study for an international qualification. Students can now also pursue foreign degrees in their home, or with local institutions through collaborative arrangements with degree-awarding institutions from major education-exporting countries. These students, referred to as transnational education students, study for foreign qualifications in any manner of ways. The most commonly understood delivery method is through international branch campuses and sub-campus. Partnerships that include the franchising, twinning or validating of degree programmes for teaching institutions and other organizations include countries such as Australia and Great Britain (Harden 2006: 22).

Recent studies which were conducted in Turkey that analysed the country's level of preparedness for TNE found that transnational delivery options are often and at times confusing. Issues related to quality control, assessment and student learning outcomes can be vague and unstructured. This can sometimes present problems and a range of questions related to document verification and institutional recognition (Erguvan 2015: 227). A study conducted by Keok (2005: 17-22) further explored the implications of transnational education and agreed that some of the more common arrangements of transnational education facilitation included the following:

- Articulation;
- Branch campus;
- Distance delivery or 'flexible and distributed learning';
- Franchising;
- Joint degree;
- Dual degree;
- Progression agreement or sequential degrees;
- Degree validation; and
- Course-to-course credit transfer.

2.5.1 Articulation

Articulation is where an awarding institution reviews the provision of the program of another organization and agrees that the curriculum is of an adequate standard for the award of specific credit. Students are made aware from the outset that they will qualify for advanced standing at a particular institution upon completion of the partner section of the programs.

2.5.2 Branch campus

This is defined as a foreign degree-granting location of an institution of higher education. As simple as this definition seems, what exactly constitutes a branch campus seems to have become something of a moving target.

2.5.3 Distance delivery or ‘flexible and distributed learning’

The phrase ‘flexible and distributed learning’ is used to include both distance learning and e-learning. In both cases, the awarding institution delivers courses through independent-learning materials or via distance technology such as online material directly to the student without the need for a partnering institution.

2.5.4 Franchising

A process by which an awarding institution agrees to authorize another organization or institution to deliver (and sometimes assess) part or all of one (or more) of its own approved programmes. Here, the awarding institution is directly responsible for the program content, the teaching and assessment strategy, the assessment regime and quality assurance. The teaching institution often needs to affiliate itself with a degree-awarding institution.

2.5.5 Joint degree

This program is taught in collaboration between two or more universities with set times and periods of study at each of the locations.

2.5.6 Dual degree

Programs like this are taught in collaboration with two or more universities with set times and periods of study at each of the locations, but with the award of two or more certificates and transcripts. Each institution has responsibility for its own degree.

2.5.7 Progression agreement or sequential degrees

Students studying at named partners have to enrol and complete another, related, programme at the second partner institution once they have earned a specified first degree, even though they have met the admission requirements.

2.5.8 Degree validation

The partner delivers its own programmes to its own students at its own centres. The awarding institution validates the programs because the partner either lacks degree-awarding powers or the power to make awards at a particular level. This also occurs if the partner lacks degree-awarding powers in a given disciplinary area. Students will then receive an award or certificate with the awarding institution logo alongside the partner's name.

2.5.9 Course-to-course credit transfer

Recognition of prior learning occurs whereby pre-arranged recognition of the equivalency of specific courses at one institution is validated to the corresponding course at another institution.

2.6 CHALLENGES OF TRANSNATIONAL EDUCATION

The challenges presented by transnational education are not all unsolvable or life-threatening. These challenges vary between programs and continents. Literature search related to these challenges indicate that the current impact of transnational education is huge globally but has both national as well as international impact.

The challenges and consequences of internationalization are controversial. For many, while internationalization of higher education may have opened up new opportunities, it has also served to reinforce and reproduce unequal divisions in the political economy of global education (Villanueva 2012: 22). Villanueva (2012: 22) also points out that it has engendered intense pressures for institutional competition and collaboration, convergence and fragmentation. Cross-border education has also raised serious questions about quality control, the development and enforcement of quality assurance mechanisms, and transferability and recognition of qualifications (Knight 2008: 2).

According to Miliszewska (2008: 80), while advances in technology have created new ways of delivering education, provision of transnational programs has been seen as by many service providers as an economic alternative to face-to-face teaching. Findings by Harden (2006: 22) reflect that this type of teaching and learning in TNE cannot be regarded as a suitable alternative and the tension between traditional classroom learning and e-learning seems to underpin discussion and debate related to these issues. The high cost of the delivery of transnational programs has tended to further skew discussion in terms of the benefits of TNE programs. Harden (2006: 22) also states that autonomy in higher education can and will then be challenged on a larger and more severe scale. Knight (2008: 2) reveals that although many individuals may hold a divided and so called 'schizophrenic' approach to transnational education; it is both welcomed and feared across the world. The same author found that a positive view towards TNE improved access to higher education, widened choices and promoted networks. However, despite all of this the author concluded that there were still perceived negative effects which challenged standards, traditional educational values and consumer rights.

There are multi-level challenges of transnational education that exist in higher education or tertiary education provision. These should be seen in the context of change, or as a manifestation of globalisation of education. It is also important to note that no university has closed its doors due to shortcomings,

nor is this likely in the foreseeable future. However, it should be noted that problems and challenges have to be addressed timeously to prevent aggravation. A study which was conducted in France in 2012, that investigated the delivery and monitoring of international higher education, reflected that providers have to decide how they will approach transnational education, whether it is from a national, or a global perspective (Lancrin and Pfotenhauer 2012: 10). The same study concluded that both approaches, however, have an intrinsic potential to clash or conflict with other national or global interests related to this mode of educational delivery or methodologies such as student and customer protection as well as the transparency in procedures of assessment, registration, and licensing for providers.

2.6.1 Challenges at the national level

Micro-level challenges impact on the development of educational programs. Challenges include organisation and structure of programs, modes of educational delivery, quality assurance and control and regulation and governance impact on the viability delivery outcomes of the program. National educational providers sometimes focus on competition and marketing of their institutions and neglect to pay heed to quality of educational outputs and protection of learners (Burnett 2008: 28).

2.6.2 Global challenges

The Bologna Process is a series of ministerial meetings and agreements between European countries designed to ensure comparability in the standards and quality of higher education qualifications. The Bologna Process does not aim to harmonise national educational systems but rather to provide tools that connect them. The main intention is to allow the diversity of national systems and universities to be maintained while the European Higher Education Area (EHEA) improves transparency between higher education systems, as well as implementing tools to facilitate recognition of degrees and academic qualifications, mobility, and exchanges between international educational institutions (Bauman and Blythe 2008:4-5).

Macro-level challenges are very similar to micro level challenges. Transnational education delivery, despite following the provisions set out in the Bologna process, carries with it many threats, opportunities and benefits. Many international providers are often left to decide on transformation strategies to promote foreign partnerships educational endeavours. Asian countries such as India and Malaysia nowadays want to position their 'national' education within the wider background of 'first world country education' in an attempt to promote professional growth and development of participants of TNE. These educational strategies however will have to be marketed to the outside world with a clear identity, presumably associated with quality, relevance and cultural diversity and build a common approach to the new reality (Knight 2008: 15-19).

2.7 CONTEXTUALIZING TNE

2.7.1 Stakeholders of TNE

In most developing countries it is accepted that cross-border higher education can provide much-needed education in professional disciplines and emerging health specializations. There is the awareness that cross-border providers can energize local institutions through both example and competition resulting in multiple benefits to the developing countries such as internationalization of nursing curricula, improvement of infrastructure and resources in the health service with the development of a quality culture by having qualified clinical nurse specialists and a general uplifting of academic standards. A South African study undertaken by Mupakati (2012: 25) which investigated transnational linkages between Africa and the United Kingdom found that varying of educational delivery systems across borders creates a host of teaching and learning challenges.

A study conducted by Miliszewska (2008: 80) revealed that competition for students in the transnational education arena is intense. The study also acknowledges Australia as being one of the main providers of transnational education in South East Asia that satisfies the needs of highest demand

disciplines in the region. With the growing number of transnational education offerings, students are able to choose more widely and can demand high quality programs. The author also states that this power of consumer choice drives universities to acknowledge and respond to student needs, forcing universities to increasingly consider the effectiveness of their educational offerings in terms of their value to students.

2.7.2 TNE a new phenomenon

Transnational education is not a new phenomenon but the pace of its global expansion is. It is this growth that brings with it increasing levels of competition both within and between countries. It is complex. Firstly, by the way it links to the unique pattern of educational provision in Europe and secondly, by the way it impacts on a number of related areas including globalisation, the 'marketization' of education, lifelong learning, consumer protection, 'recognition' and 'transparency'. Therefore, this type of education should be viewed as a positive set of opportunities that needs to be fully exploited. Any threats that it might represent should be recognised and countered by sensible strategies. Burnett (2008: 31) summarizes TNE or cross-border education as a catch-all phase that provides a platform for international cooperation and exchange that can lead to the delivery of degree and non-degree programs. This can be conducted in foreign locations that include staff and student mobility, cross border accreditation as well as research collaboration.

2.7.3 Trends affecting growth of transnational education

According to Rumbley, Altbach and Reisberg (2012: 3), transnational education projects have been powerful and pervasive forces at work within the higher education arena in and around the world in the last two decades. Their study found that very few countries or higher education institutions remained immune to the call to internationalize in some fashion. Thus, the process, practical applications and conceptual understandings of internationalization have evolved in significant leaps and bounds in recent

years. Today internationalization is a core issue of concern to higher education enterprises such as universities and colleges. Factors that question social and curricular relevance, institutional quality and prestige, national competitiveness, and innovation potential still, however, remain.

2.8 TNE AND QUALITY ASSURANCE

According to Mishra (2010: 10) there is still much debate regarding whether the provision of tertiary education effectively addresses individual and societal needs. The author concluded that most developing countries, due to the scarcity of resources, waste their time and money on institutions and endeavours involving importation of education. The author proposed having quality control mechanisms or systems in all facets of education assisted with international best operating practices and development. Non-compliance with quality control and accreditation issues are just some of the challenges facing successful implementation of TNE programs. Ensuring quality in TNE delivery can be subjective and Powar (2003: 9) in his study examined world views on cross-border higher education and argued that there is concern regarding the fact that the calibre of education provided by foreign providers is highly variable and sometimes indifferent.

One needs to begin by addressing the fundamental question “What do we mean by quality?” Zwanikken et al. (2013:2) conceptualized the deliverance of quality nurse education as simply being “fitness for purpose at minimum cost to society” and state that ‘quality’ is an elusive, subjective concept. Villanueva (2012: 38), who explored the relationship between higher education and quality assurance, concurred by stating that even though the understanding of quality is subjective, it has not stopped researchers, policymakers or academics from trying to measure and improve on this seemingly obscure concept. Martin and Stella (2007: 11) referred to the application of best educational practices in an educational establishment as “the policies and mechanisms implemented by an institution or programme to ensure that its purposes and standards are met”.

2.8.1 Regulation and monitoring of TNE-Internationally and nationally

TNE implies the crossing of cultural, linguistic, legislative as well as national and often intercontinental borders. Adam (2001: 3) in a study that explored the expansion of TNE stated that the essential issue concerning TNE was that there was not a general legal framework which harmonized the different educational structures and values of the TNE institutions and qualifications.

Guidelines that assist and support the implementation of such a process have to be first developed. Baumann and Blythe (2008: 4) examined the globalisation of higher education in nursing and observed that attention still needs to be focused on the education of health professionals involved in TNE, to assure consistent and high quality standards. Organizations such as the International Council for Nurses (ICN) and the WHO can be used as collaborating bodies. The study refers to these bodies as potentially strong accrediting bodies because their overarching global organization can assure international educational standards.

A report by the European Association for Quality Assurance in Higher Education summarizes the purpose of guidelines in higher education, stating that guidelines provide a source of assistance and guidance to both higher education institutions in developing their own quality assurance systems and agencies undertaking external quality assurance. Guidelines can contribute to a common frame of reference which can be used by institutions and agencies alike. The intention of such guidelines is not to dictate practice or be interpreted as prescriptive or unchangeable (Bilsland, Nagy and Smith 2014: 145-157).

In order for any South African NEI to implement policies and control mechanisms relating to educational projects, internal and external control mechanisms must be in place. Policies on recruitment of foreign nurses and foreign nursing qualifications are monitored by the SANC. The SANC regulates the practice and registration, or enrolment, of nurses into the Council database as presented in the Provisions of the Nursing Act No 33 of

2005 as amended and as per regulations regarding the registers and rolls for enrolled nurses and midwives (R3588 and R3589).

The proposed guidelines in this study will not only enhance the understanding of the importance of safe and adequate provision in cross-border nursing education, but will also encourage international cooperation, and protect students and other stakeholders involved in the initiative. Globally, it will impact on the country's social, economic and cultural and educational needs.

2.8.2 TNE in the global context

Globalization is a contested term that evokes a range of images and responses depending on the context in which it is used and who is using it. A study conducted by Baumann and Blythe (2008:4) that not only explored globalisation issues in nursing, but also the exporting of nurse education, agreed that while there was no single definition of the term itself, there were many common threads such as economic, technologic, social, cultural and political that wove themselves around such a term. These common threads provided a framework for understanding the meaning of globalization and its potential impact on education. The above study also revealed that globalization had increased opportunities for learning from diverse sources and with diverse content outside of traditional education programmes.

Similarities were found with regards to cross-border nursing education and a study by Czanderna (2013: 41) revealed that outcomes from the educational endeavours as described above do attest to personal and professional gain for all stakeholders or participants. There appeared to be a deep appreciation of the knowledge and experience gained. Enhanced cultural sensitivity and awareness such as a broader global perspective and the development of a collaborative working relationship with healthcare teams fostered transformational learning. Czanderna (2013: 42) stressed in the same study that transformational learning was imperative for the growth and development of nursing leadership. The TNE benefits described in these accounts highlight the value of cultural experiences to professional practice as indicated by

improved understanding of a healthcare system different than one's own as well as prevalent disease conditions and their outcomes across continents, enhanced nursing assessment skills, critical thinking, and problem-solving abilities learned through nursing research and debriefing exercises added to the TNE globalization process. It was apparent that professional practice and educational efforts were made by nurses to address the healthcare needs related to the effects of globalization of nursing education and training. It was also noted that these undertakings were instituted to establish a foundation of understanding related to global healthcare immersion experiences such as coping with cross-cultural diversity. However, despite these efforts and educational endeavours, setbacks such as stress, language, skill and cultural differences still persisted amongst nursing students. Findings by Seaton (2010: 67), who examined cultural care in nursing and global health, noted that the terms culture and global health were the chief goals of international nursing programs and orientation programs. The main aim of these orientation programs which often spanned a period of weeks to months was to assist both the learner and the educator. The above author also concluded that globalization of nursing built relationships and developed partnerships, with mutual goal setting between partnership entities.

A study by Njuguna and Itegi (2013: 752-759), which examined cross-border higher education in Africa revealed that the benefits of cross border higher education are international security, maintenance of economic competitiveness, fostering human understanding across nations, flow of technology, promotion of knowledge based economy and establishing of regional networks to compete with other regions of the world. Research literature also presents evidence that cross-border education develops opportunities to construct collaborative relationships designed to promote values and knowledge among students necessary to build a sustainable future (Chetro-Szivos 2010; Mishra 2007; Powar 2003).

2.9 PRACTICES OF TNE

2.9.1 International institutional nursing educational practices

Shaffer and Dutka (2013: 11-16) state that the need for global standards in nursing education has arisen for several reasons such as the increasing complexities in health-care provision, the increasing number of health professionals at different levels, and the need to assure more equitable access to health care for all citizens of a country. The selection criteria for educational programs for professional nurses and midwives around the world vary and many countries still consider initial education programs at secondary school level to be sufficient. Other countries specify university education qualification as an entrance requirement into a nursing programme. According to the WHO (2013: 6-10), the move globally to raise the qualification requirements of initial education programs for professional nurses and, in some cases for midwives, to a higher-education level appears to be gaining momentum.

The first known university-based education program for nurses was implemented in New Zealand as long ago as the 1920s. Thereafter several other countries around the world introduced nursing programmes at universities. It was not until the 1950s that university-level programs became commonplace in North America and the 1980s saw to some Western Pacific countries and parts of Europe follow suit (Knight 2008: 2). Egypt opened a faculty for nursing education in 1954. Despite having nursing programs offered at university or higher education institutions, facilitation and co-ordination of programs offered in the same country as the institution or outside remains problematic. There appears to be many disparities in the nursing programmes currently being offered in different parts of the world such as the length of the courses offered, the types of nursing programmes offered and the combination of nursing programmes. Some countries offer nursing programmes but not midwifery programmes in the higher education sector. Others offer comprehensive nursing programmes that combine nursing and midwifery while other countries may see midwifery and nursing

as two separate professions. In developing the global standards for the initial education of professional nurses and midwives, close attention has been paid to the above differences by the WHO. The WHO strives to ensure that all countries meet the global standards for initial nursing education programmes and has stated that it is the task of policy-makers in each country to determine adherence to policies and protocol that surround the issues of nursing education such as co-ordination and facilitation (WHO 2013: 1-3).

2.9.2 South African institutional nursing educational practices

The legislative framework for the review of scopes of practice for different categories of nurses to ensure that nursing and midwifery practice in South Africa is aligned to the needs of the healthcare system is governed by the Nursing Act No. 33 of 2005 (Republic of South Africa 2005). The strategic framework set out by the Department of Health (DoH) related to its Strategic Plan for 2015-2019, articulates how nursing education and training, practice, resources, social positioning, regulation and leadership should dovetail to support the nation's health system. This framework also sets out the strategic policy priorities and plans for the next five years and the plan is intended to serve as a blueprint and roadmap for provincial plans over the next five years. Some of the goals of this strategic policy-making endeavour aimed to address the critical shortage of health personnel in the country. Goals such as establishing strategies to monitor compliance to national norms and standards and increasing the capacity for training of health professionals in the country, formed part of the Department of Health's plan to alleviate the shortcomings in the healthcare industry (Department of Health 2015/2019).

South Africa has seen major reforms related to healthcare in the last two decades and nursing education is critical to enable nurses and midwives to provide competent patient care and meet the health needs of South Africans. An improved nursing education system will enrich current and future generations of nurses and midwives ensuring safe, quality, and patient-centred care across primary health care and hospital settings. However, studies conducted by Moleki (2008: 127) reflect that the existing outputs of

NEIs do not match the health and service demands for nurses and midwives. A study conducted by de Beer, Brysiewicz and Bhengu (2011: 6) that investigated nursing in the South African intensive care units revealed that South Africa currently faces a shortage of nurses and midwives across all healthcare services and in particular the speciality fields such as intensive care nursing, operating theatre nursing and primary health care (PHC) nursing. Uniform norms and standards are required to assess the real shortage and quantity of nurses for each category. Meeting the demand for these differently skilled nurses is the responsibility and challenge of many NEIs (Knight 2008:3). New policy implementations in South Africa in recent years have attempted to re-engineer the PHC approach to try and drastically increase the need for nurses with specialist qualifications, namely advanced midwives, child care nurses and family practice nurses (Baumann and Blythe 2008:4).

Due to the increased need to improve the image of nursing and to promote nursing as a career of choice, mainstreaming of ethics programs at NEIs, aimed at rebuilding the professional ethics, nobility and image of the nursing professionals is a vital component of a nursing program. Such strategies aimed at improving the image of nursing and nursing education are often developed to complement the current developments in the healthcare system of the country.

2.10 EXPERIENCES WITH TNE

2.10.1 International facilitation / co-coordination

The preparedness of academics, coordinating, teaching or facilitating international students, may not have kept abreast with the growth in universities' student enrolments in transnational teaching programs, as stated by Martin and Stella (2007: 28) who explored educational planning of international institutes. Zhou (2014: 2-8) studied the viewpoints of academia as well as Chinese nursing students related to TNE and states there is a need for educators to develop specific strategies to ensure positive student

experiences and learning and outcomes for international students as well as positive teaching experiences on the part of the coordinator and facilitator. A Malaysian study revealed that educational ideologies should be considered when teaching students from different cultural backgrounds in order to ensure the success of TNE ventures (Arunasalam 2013: 38). Evidence from a study conducted by Seaton (2010: 65-67) has emphasized the importance of addressing the cultural sensitivities associated with teaching international students and a literature search affirms the need for educators to challenge traditional approaches to teaching and identify culturally appropriate methodologies to ensure the success of programs delivered to international students.

2.10.2 South African facilitation / co-coordination

A South African study conducted by Moleki, (2008: 129) highlighted the challenges experienced between lecturer and student during distance education and revealed that at times physical distance between the students and the lecturer was perceived as a lack of support and guidance as support and motivation are prompted by face-to-face and contact with the lecturer. The lecturer on the other hand had increased pressure to create opportunities for visibility and to be accessible to the student despite challenges such as time differences. Findings in this study identified teaching challenges such as increased pressure on the lecturer's teaching responsibilities, whereby the teacher had to create a balance between supporting and guiding the student, but at the same time be careful not to create dependency, but rather promote a learning culture for the student that instilled qualities of self-sufficiency, self-directedness and independence.

2.10.3 Student experiences with TNE

Nurses' motives for enrolling in TNE programs were mainly to obtain the high status of a Western degree and the extrinsic benefits of financial incentives and promotion. However, drawing on their resilience, some nurses did develop self and professional independence and transformation (Miliszewska

2008: 81). It was noted in the same study that most students involved in these programs also depended on teachers or facilitators and book knowledge as authoritative sources. Based on the findings of the same study, students verbalized that they became aware of the value of being a critical reader and writer when the teacher or educator was not present.

According to Arunasalam (2013: 34), cross-border nursing education students reiterated that being only taught the theory without application was not appreciated as there was no link of theory to practice. Some students, in the same study, complained that throughout the program they were primarily focused on attending the classes or undertaking on-line sessions to complete their assessments for achievement purposes. The above author also reiterated that not giving the application of TNE knowledge in clinical practice any serious consideration, allowed for the awareness that the lack of a clinical practice component inhibited their ability to apply the learning in practice on completion of their course. This resulted in a theory-practice gap with a reluctance to adopt theory and blend it into their own culture, as they preferred to retain their original cultural values. It further highlights the importance of culturally sensitivity and awareness in cross border nursing education.

2.11 CONCLUSION

This chapter emphasizes what literature has to offer with regard to TNE nationally and internationally. Scholarly literature that relate to academic and student views and experiences with cross border nursing programs formed the basis for this chapter. Literature that was reviewed was relevant to the issue of internationalization, 'importing' and 'exporting' of nursing education. According to Altbach and Knight (2007: 290), efforts to monitor international initiatives and ensure quality are integral to the international higher education environment. This chapter has also attempted to identify the best operating practices of TNE that is an imperative determinant to ensure success of national and international nursing education projects. The following chapter provides a description of the research methodology for this study. It explains

the research design, setting, population and procedures used to collect and analyse the data.

CHAPTER 3 : RESEARCH METHODOLOGY

3.1 INTRODUCTION

The purpose of this study was to explore nursing education institutions' perspectives and practices related to TNE as well as the graduates' experiences of TNE. Chapter 3 describes and discusses the strategies that were implemented to gather such information. This chapter also presents the research design, researcher bias and impact, as well as the study population, sample size and method and the selection criteria. An overview of type of approach used for this qualitative study, interview sites, and interview techniques will be described. Data collection methods and data analysis methods are also included for discussion in this chapter.

3.2 RESEARCH DESIGN

According to Grove, Burns and Gray (2013: 195), a research design is a detailed plan according to which the research is conducted. The study was based on a qualitative, multiple case study research design. The following common characteristics of qualitative studies were therefore, adhered to as suggested by Creswell (2007: 73-75). Qualitative studies seek to gain in greater insight and understanding of the dynamics of a specific situation. The researcher therefore, sought to provide a rich description of participants' perspectives regarding concepts of transnational education quality, practices, with the prospect of developing guidelines with regards to facilitation and implementation of TNE. These guidelines were intended to assist all stakeholders to make informed decisions and relied on an interpretive paradigm. According to De Vos et al. (2012: 309), interpretivism allows the researcher to absorb or get inside the views and perspectives of the participants, in order to understand how its parts will relate to its whole. In qualitative studies, the researcher enters the research site with no explicit expectations or interest in controlling variables.

A case study research was chosen as it helped to provide a true picture of institutional practices and implementation in the context of transnational nurse education. Yin (2009: 240) conceptualised case study research as a strategy of inquiry, methodology or a comprehensive research. He further refers to a case study as an empirical inquiry that investigates a contemporary phenomenon or situation, in depth and within its real-life context. The same author states that case study research compliments a validity-seeking humanistic approach to research methodology which helps to provide crucial patterns or contextual bodies of data. Meyer (2001: 330) adds that the strength of case study research lies in its ability to tailor the design and data collection procedures to the research questions. According to Baxter and Jack (2008: 555), a case study design is employed to gain an in-depth understanding of the situation and meaning for those involved. The interest is in process rather than outcomes, in context rather than a specific variable, in discovery rather than confirmation. Most suitable issues for case study research are those that are potentially problematic and deeply connected to the contexts of the case. Baxter and Jack (2008: 555) conclude that a qualitative case study also addresses the uniqueness of individual cases and contexts. Therefore, there is an expectation of thick descriptions, experiential understanding and multiple realities of the situation in question with the use of this method in this study.

Multiple case studies are commonly referred to as collective case studies, cross-case, multi-case, multi-site studies, or comparative case studies (Baxter and Jack 2008: 556). In a collective case study, as in the case with this research, a number of cases were studied jointly in order to investigate a phenomenon, population, or general condition (Yin 2009: 240). In this study, each institution was treated as a case. The topic under study is TNE and the population comprised nursing education institutions in South Africa. Within each individual case, the perceptions of academic leaders, internal facilitators of the nursing programs, structures and processes and relevant contextual issues were explored. Although there was an interest in understanding the perceptions, practices, and context of delivery of TNE, the individual the

patterns and trends of the overall population as well as how TNE is delivered and received was studied.

In order to draw a comparison between best international operating practices and current South African nursing education practices, international academic leaders who have been involved in either facilitating or coordinating such programs were invited to participate in the study.

3.3 RESEARCH POPULATION

Population also referred to as the target population is all elements, individuals, objects or substances which meet specific criteria to be included in the study (Grove, Burns and Gray 2013: 44). The population comprised national and international NEIs, academic leaders and nursing graduates involved in TNE programmes.

3.4 SAMPLING PROCESSES

Grove, Burns and Gray (2013: 352-371), define sampling and explain the process to be a selection of a small group of people who represent the entire population for the study. Simple random sampling is a basic probability sampling method where sample members are selected from a sampling frame through completely random procedures. Qualitative studies allow for the purposive selection of convenient and accessible samples that can provide information richness. Therefore, the sample that was utilized in this study, focused on the practices and perspectives of South African nursing education institutions. In order to draw a comparison between the South African TNE practices and perspectives and international best operating practices relating to TNE, other global academic leaders of nurse education organisations that have engaged in this type of education were be purposively selected to participate in the study. Purposive sampling is defined by Polit and Beck (2008: 17) as a process whereby the researcher selects participants because of their characteristics and is based on the assumption that the researcher wants to discover, understand, and gain insight and therefore must select a sample from which the most can be learned.

There were three samples in this study. These were selected in accordance with the objectives of the study.

3.4.1 Sample 1: Academic leaders from national NEIs

Sample 1 comprised academic leaders such as Rectors or Vice Rectors, Deans or Vice Deans, Directors of International Nursing Education Projects, College Heads, Heads of Departments of Nursing Faculties, Lecturers and Nurse Educators. Three national NEIs and their respective academic leaders were invited to participate in this study. Permission was granted by one national NEI, which included respective academic leaders (Appendix 2b). and Appendix 3b).

3.4.2 Sample 2: Academic leaders from international NEIs

Sample 2 comprised of academic leaders and international nursing educational institutions that were invited to participate in the study. In addition to differences in nursing education, the nursing profession varied by country in how it is regulated. Although the intention was the same, the way the process was carried out varied from country to country. Given the international focus of this study, it was important to gain insight regarding international standards of cross border nurse education by interviewing academic leaders of other international nursing educational institutions who had been involved in the facilitation and delivery of TNE. The sample comprised a minimum of three purposively selected international NEIs with their academic leaders. Permission was again granted by one national NEI, which included respective academic leaders (Appendix 3b).

3.4.3 Sample 3: Nursing graduates

Nursing graduates involved in this type of nurse training were considered to be direct recipients of TNE. Sample 3 therefore, comprised a purposive sampling strategy, whereby nursing graduates (both local and international),

who had undergone nurse education and training, were invited to participate. Data in this regard, was therefore gathered by means of online Skype interviews.

3.4.4 Criteria for purposive sampling

3.4.4.1 The academic leader's/graduate's position within the institution

The perspectives of persons fitting the description of academic leaders or graduates of the TNE program was sought within the educational system because of their potential impact on policy decisions and policy regarding implementation of transnational education. Additional participants were considered if they had any responsibility or accountability for some aspect of quality assurance or implementation of an off-shore programme within a participating institution.

3.4.4.2 The academic leader's/graduate's understanding of the institution

It was assumed that sometimes persons in charge of health sciences faculties may not necessarily be involved in with the implementation of guidelines or policy-making practices at their institutions. Therefore, all role-players that had direct involvement in operationalization of off-shore cross border or TNE programs such as chief executive officers (CEOs) were invited to participate. Those graduates who were thought to be able to best meet the objectives of the study were selected with the assistance of the nursing educational institutions and interviewed. Graduates were then interviewed until data saturation was reached. Data saturation in research studies occurs in sampling whereby the researcher samples to the point where no new information is obtained and redundancy is achieved (Polit and Beck 2012: 521).

3.4.4.3 The academic leader's / graduate's knowledge of regulatory bodies

It was vital that academic leaders or graduates that were interviewed had a broad understanding of the educational system that governed nursing practice and education.

3.4.4.4 The type of NEIs

Only NEIs that had embarked on TNE programs other than their normal nursing curriculum were invited to participate in the study.

3.5 SETTING

The study was only commenced after the study design, and procedures had been approved by the University Research Ethics Committee (Appendix 6) and only when approval was granted by the participating academic institutions. Selecting a suitable setting is a vital component for effective data collection in a research study and according to Grove, Burns and Gray (2013: 373), qualitative studies conducted in a natural setting means that the researcher cannot manipulate or change the environment of the study and allows for a rich mix of the processes, people and interaction that can assist in addressing the research questions of the study. This study utilised selected learning environments of the participating NEIs, whereby permission was sought, granted and approved (Appendices 2a, 2b, 3a and 3b). The practice environments where international and national academic leaders and graduates were working was also utilised as the setting. The interviews were scheduled so that they were conducted at the time and convenience of the academic institution and participant.

3.6 DATA COLLECTION

The first step in data gathering was to obtain access and permission (Appendix 1). This step allowed the researcher to become familiar with people and places. It also allowed potential participants and others to learn about the

nature of the case study and the specifics of the research design (Yin 2009: 95). Updated names and contact information for eligible participating NEIs and potential participants was obtained from the SANC. A letter of request for institutional approval was sent to each potential participating NEI detailing the relevant information about the study and addressed to the person or committee responsible for approving research.

3.7 PRE-TESTING OF THE DATA COLLECTION TOOLS

Meyer et al. (2009: 361) define a pre-test as one that is conducted to test, validate and refine the developed data collection instruments. For the purposes of this research study, a pre-test study was conducted with five academic leaders and five graduates that had been involved in TNE. These participants were not included in the main study. The objectives of the pre-test were to ensure that the data collection tools had good face validity. No changes to the data collection tools were necessary after the pre-test.

3.8 DATA COLLECTION METHODS

Two data collection strategies that are typically used in case study research, namely interviews and record reviews, were used in this study. The aim of using multiple strategies in this study was to increase the validity of its findings and ensure a thorough understanding of each case. Various methods of data collection methods were employed.

3.8.1 Interviews

Interviews as method of data collection are known to capture the unique experiences and special stories of the interviewees and produce data as words (Grove, Burns and Gray 2013: 271). Thus the researcher's task with the case study method was to use this information to portray multiple views of the case. According to Yin (2009: 102), interviews are good sources of data for case studies because they focus directly on case study topics and provide additional insight into them. Autonomy was maintained by obtaining informed consent from the participants (Appendix 4). Semi-structured interviews were

conducted and most of the questions were open-ended in nature. An interview schedule was used to guide the interviews with all samples included in the study (Appendices 5a, 5b, 5c). The interview questions were designed to address the research questions. Interview questions focused on organizational structures and core processes related to transnational facilitation of nursing education such as curriculum development, faculty evaluation and development and assessment of student learning. The interviews were recorded by audiotape to provide an unobtrusive and accurate record of the participant's comments and were scheduled for thirty to forty-five minutes for each participant. The number of interviews was guided by data saturation. In the case of interviewing academic leaders, this was reached after four interviews were conducted but the researcher continued with two more interviews in order to confirm data saturation. A total of six interviews were conducted with this sample. During the interviewing of graduates, data saturation was achieved after six interviews. The researcher, however chose to interview a further four participants, which again was intended to confirm data saturation. All interviews were later transcribed by the researcher with the permission of the participants.

3.8.2 Record reviews

The researcher also used documents such as manuals, guidelines on transnational education that provided insight into institutional policies or processes. Yin (2009: 94), noted that as part of a case study approach to research other sites of information such as relevant documentation can be used to enhance data collection and analysis. The author further argued that with this method of data collection, other strategies such as interviews can be corroborated or participants will be asked to provide the investigator or researcher with documents such as existing manuals, policies or guidelines that could help to promote an understanding of the institution.

3.9 DATA ANALYSIS

3.9.1 Analysis of data from interviews

Interviews were transcribed and documents will then be reviewed. According to Thomas (2003: 3), the process of data analysis is described as a complex action of moving back and forth between data and concepts and as well as between description and interpretation. The author also concluded that, two types of reasoning, namely inductive and deductive are used with theming. Polit and Beck (2012: 62) assert that themes are recurring patterns of meaning and are likely to identify both a matter that concerned the participant and the meaning that this matter of concern conveyed to the participant. Therefore, Tesch's methodology of data analysis was used to analyse data to get an understanding of the conceptual and contextual issues. Tesch's eight steps were applied as follows (Tesch 1992: 141):

- Reading through all transcripts to get a general impression of the collected data.
- Writing in the margin thoughts that emerge from the data.
- Making a list of all topics. Similar topics were clustered together.
- Abbreviated topics were written as codes next to the corresponding segments of the data. Any other topics or codes that emerged were also written next to the appropriate segment of the text.
- The most descriptive wording for the topics were used and turned into themes
- Grouping together of the related topics and emerging list of categories.
- Preliminary analysis of data was accomplished by assembling data that belonged to each category from which themes emerged.
- Existing data was recorded.

By re-describing the meaning units into psychological language and by searching for essential or dominating meanings in each unit, the researcher then related each meaning unit to the topic under study. This again was conducted so that the meaning of the participants' perspective was not changed, but at the same time unimportant meanings in the participants' viewpoints, perspective or situation was discarded. This was followed by cross-case synthesis by looking at perceptions, structures, processes and contexts across all the cases to probe issues and categorize data. The final stage of analysis was a synthesis of the major themes and patterns and their applicability to the research questions as related to the study.

3.9.2 Analysis of data from record reviews

Documents in this study was analysed for descriptions and patterns related to three primary areas:

- a) Conceptual issues (definitions of quality, purposes of having policies or guidelines regarding implementation of TNE.
- b) Descriptions of structures and processes used to monitor, assess, or improve delivery of TNE. (Specifically in reference to curriculum and programs, student learning, teaching practices and decision-making processes)
- c) Contextual issues (internal and external factors that impact or influence delivery of TNE).

3.10 TRUSTWORTHINESS

According to Polit and Beck (2008: 195), researchers want their findings to reflect the truth. Research that is inaccurate or holds a biased viewpoint cannot be of any benefit to nursing practice. Shenton (2003: 67), in his paper that explored strategies for ensuring trustworthiness in qualitative research projects agrees that due to the nature of this study being a qualitative one, methods of enhancing trustworthiness should be utilized following the four principles or constructs outlined by Guba's strategies of credibility, transferability, dependability and confirmability were applied.

3.10.1 Credibility

Researcher credibility is also enhanced when the researcher describes in the research reports, his or her efforts to be self-reflective and reflexive. Reflexivity is an attitude of attending systematically to the context of knowledge construction, especially to the effect of the researcher, at every step of the research process. A researcher's background and position will affect what they choose to investigate, the angle of investigation, the methods judged most adequate for this purpose, the findings considered most appropriate, and the framing and communication of conclusions. This particularly occurs in qualitative research where the researcher is often constructed as the 'human research instrument' (Watt 2007: 84). According to Terre Blanche, Durrheim and Painter (2006: 553) reflexivity, when used in qualitative studies allows the researcher to critically self-examine one's biases and pre-conceptions. This allows the collected data to be analysed in its 'pure' form. It should be noted that, the researcher utilised the process of reflexivity during data collection.

The researcher increased the credibility of the study by clarifying her role and knowledge about the research topic to all participants. This knowledge was made available to the participants at the beginning of data collection. In this regard the researcher is a nurse educator with postgraduate qualification in critical care nursing and research. The researcher also has extensive experience in the teaching and facilitating of the critical care course and its components abroad in conjunction with partnering international NEIs. This allowed the researcher to have an honest and open approach to the topic. Polit and Beck (2008: 197-198) add that there is an assumption among researchers that bias or skewedness in a research study is undesirable but it should be noted that preconceptions are not the same as bias, unless the researcher fails to mention them.

An introspective record of the researcher's work in the current study helped the researcher to take stock of biases, feelings, and thoughts, so that it could be understood how these may be influencing the research. In ensuring

transparency and rigour the researcher allowed the reader an opportunity to see how the researcher went about the process of knowledge construction during the study.

In addressing credibility, investigators attempt to demonstrate that a true picture of the situation under scrutiny (Shenton 2003: 64). Credibility in this study was also achieved through the accuracy of the description of the parameters of the study (who, where and when). Participants were purposively sampled. The information was probed until data was saturated to ensure credibility of the study. This also ensured that there would be confidence that there was truth in the collected data and truth in the way the data was interpreted by the researcher so that all research results were reflected in a believable way. To enhance further trustworthiness and assess the methodological rigour and transparency in which guidelines are developed, the researcher ensured that the proposed guidelines were analysed and appraised after being formulated. Evaluation of these guidelines also allows the reader to draw judgment conclusions about their validity.

3.10.2 Transferability

Transferability provides sufficient detail of the context of the research for a reader to be able to decide whether the findings can be justified to the other setting. It also refers to the generalization of the data or the extent to which this data can be applied to other settings or sample populations (Polit and Beck 2008: 202). In this study, this was achieved through thick description of data and purposive sampling. Transferability was also promoted in this study by ensuring that an accurate description of the research process was given. The choice of research methodology was justified and the research situation and context was described in detail. There was an adequate amount of data collected to provide evidence of research findings in this study.

According to De Vos et al. (2011: 420), a qualitative study's transferability or generalizability to other settings can sometimes be a challenge to the researcher. The authors add that one way to counteract such a challenge is to

employ the strategy of triangulation. Triangulation refers to the use of more than one approach to the investigation of a research question in order to gain a multidimensional understanding of the findings. Research methodologies have their inherent weaknesses and the use of different methods enhances the truth value of the study's outcomes (Botma et al. 2010: 87). The current research incorporated and integrated the following sources in its data collection process:

- The views of academia and graduates of TNE via the interview method.
- Private correspondence with academia and graduates.
- Research utilising the reviewing of records as a source of data collection.

These methods helped in understanding current operating practices and identification of gaps thereof. The information collected was analysed and was used in formulating proposed TNE guidelines that met the human, social, economic and cultural needs of the service provider and the student.

3.10.3 Dependability

The dependability criterion allows the researcher to take steps in the research process that will enable a future investigator to repeat the study. Dependability refers to evidence that is consistent and stable (Polit and Beck 2008: 196). In this study, this was achieved by a description of the method of data gathering, data analysis and interpretation. In order to enhance consistency, the researcher conducted a pre-test of the data collection tools prior to commencement of the study. These participants did not participate in the main study.

3.10.4 Confirmability

With confirmability, researchers must take steps to demonstrate that findings emerge from the data collected and not their own predispositions (Shenton 2003: 68). Polit and Beck (2008: 196) maintain that confirmability is similar to objectivity, in that, the study results are derived from participation information

related to the context of the study. Within the context of this study, voice recordings as well as field notes increased the confirmability of the research. The tape recordings, transcriptions and field notes were preserved for future auditing.

3.11 ETHICAL CONSIDERATIONS

Before commencement of the study, ethical clearance was obtained from the Durban University of Technology Institutional Research Ethics Committee (Appendix 6). Written consent was obtained from participants (Appendix 1). All the participants made an informed, voluntary decision to participate in the study. The nature of the study, the right to refuse to participate, the risks as well as the benefits was fully described to them (Appendix 2).

3.11.1 Beneficence

Polit and Beck (2008: 170) maintain that beneficence basically stresses that the researcher has to minimize any harm to subjects or society as a whole. Instead, the researcher and research findings should benefit the participants or individuals that are part of a study. The aim in this study was to explore the views of academics/ graduates regarding TNE experiences with a view to determining best operating practices in the provision of TNE nationally and internationally. One of the consequences of participating in a study of this nature was the sensitivity of the information discussed during gathering of data. For example, participants were asked questions about their personal views and strengths and weaknesses as well as the gaps that were prevalent in the system. The use of probing by the researcher in order to get the participant to elaborate on certain aspects did at times mean that the participants became defensive. During the interviews and discussion with participants, a certain amount of stress was evoked concerning their experiences and frustration and anger seemed to arise from the pent up emotions that participants appeared to harbour when they related their experiences with 'fighting the system' and becoming embroiled in 'red tape' and legalities.

3.11.2 Respect for human dignity

This principle involves the right to self-determination and the right to full disclosure (Polit and Beck 2008: 171). In this study, this meant that participants could choose to participate or not. They had the right to ask questions, to refuse to give information or to withdraw from the study at any time. None of the participants were asked to perform any acts or make statements which would cause discomfort, compromise them, diminish their self-esteem or cause them to experience embarrassment. There was also no risk of damage to their financial or social standing.

3.11.3 Justice

This principle included the participants' right to fair treatment and their right to privacy (Polit and Beck 2008: 173). The researcher ensured that the study participants met with all the inclusion criteria or research requirements. All due respect was shown to participants' beliefs, values, morals, culture, lifestyle and opinions. A courteous, tactful and careful line of questioning was used by the researcher at all times during data collection. Privacy was maintained throughout the study and participants were assured that the data they provided was going to be kept in strictest confidence. Neither the names of the academic institutions, or the participants were disclosed. Interview data would be kept for five years and thereafter, would be destroyed.

3.12 CONCLUSION

Using this research methodology, the researcher was unable to anticipate how the study was going to evolve. Much of the research design appeared to come about during the data collection and analysis process. It was also found that using the case study approach in this study helped the researcher design the data collection methods to suit the case and the research questions. Polit and Beck (2008: 520) argue that qualitative analysis of data can be both challenging and labour intensive at times. However, if it is guided by the researcher's approach to data analysis, common patterns or themes emerge. Penner and McClement (2008: 2) state that themes are recurring patterns of

meaning and are likely to identify and connect aspects or situations by virtue of inherent commonalities that bind them together. Such themes did appear to emerge in this study during interviews and record reviews and provided rich insight into participants' experiences and highlighted similarities and contrasts amongst the viewpoints of the different participants. This chapter described and discussed the research methodology used in this study. The next chapter will therefore present the results of the study in question and highlight the common themes, as they were summarized by the researcher from participants' responses and record reviews and. Evidence will also be presented to back up the generated themes and will be underpinned by quotes from the transcribed data of the actual interviews of participants.

CHAPTER 4 : DATA ANALYSIS AND PRESENTATION OF THE RESULTS

4.1 INTRODUCTION

Chapter 3 provides a detailed discussion of the research design, methodology and the reasoning strategies used. This chapter will discuss the data analysis process and present the results of the study. The purpose of data analysis in any research is to organize and give order to a large body of collected information so that general conclusions can be reached and communicated in the research report. Data analysis in qualitative research is on-going, emergent and interactive (Polit and Beck 2008: 383). This means that as the researcher begins to gather information, there may be a need to pursue a line of questioning that had not originally been anticipated.

This study focused on two parties; one being the NEI and the other being the graduate. One of the aims of this study was to explore NEIs' perspectives and practices related to TNE as well as the graduates' experiences of this type of nursing education. The research questions that guided the qualitative approach of the study revolved around the conceptualisation, best operating practices, and implementation and control mechanisms of TNE that affected both parties.

As discussed in Chapter 3, two data collection methods that are typically used in case study research were used in this study and the aim of using multiple strategies in this study was to increase the validity of its findings and ensure a thorough understanding of each case. All participants had had many experiences with TNE, both either as an academic or a graduate. Therefore, after analysis of the in depth interviews with the participants, a thematic framework was used to categorize findings according to the objectives of the study and then organize them into themes. The researcher was able to obtain both objective and subjective responses from the participants that provided

both their professional and personal reflections on TNE. In order to adhere to the principles of interpretive research, the researcher set aside any preconceived expectations or experiences and allowed the participants to tell their stories. This meant that interview discussion was not subjected to researcher bias or influence.

Interviews were semi-structured and questions were open-ended. All interview protocols were developed using the research questions and related literature as a guide (Appendices 5a, 5b and 5c). Interview guides that were used to guide the interview discussion took into consideration the participants' demographic information as per Table 1 below.

The interviews began with questions of a general nature about the participant in an attempt to create a rapport with the participant and establish a trust relationship. Although this study focused on the main research questions as stated in Chapter 1 (1.5), the study also lent itself to a further subdivision of relevant questions that allowed the researcher to extract the pertinent information from the participant. The method of discussing each sub-question also helped strengthen the data interpretation process. For the purpose of this study, data will be analyzed in the following three sections:

- Section A: Academic leader responses.
- Section B: TNE graduate responses.
- Section C: Record reviews.

4.2 PARTICIPANTS' DEMOGRAPHIC PROFILE

The interview sample in the study comprised two types of participants; the academic leader and the graduate. Demographic information is illustrated in following Tables 1 and 2.

Table 1: Demographic profile of academic leaders

Participant	Position	Role Responsibility	Program	Continent
No. 1	Honorary Associate Professor	Co-ordination and Facilitation of Transnational Nursing Programs	Critical Care, Advanced Midwifery, Nurse Anaesthetists	Africa
No. 2	Department Head-Nursing	Program Facilitator	Masters supervision, Critical Care Nursing	Africa
No. 3	Lecturer	Program Facilitator	Critical Care Nursing	Africa
No. 4	Training Officer	Program Administrator/Clinical Coordinator	Medical and Surgical Nursing Operating Theatre and ICU	Asia
No. 5	Department Head-Nursing	Program Coordinator Administrator/Clinical Coordinator	Post Graduate Research	Australia
No. 6	Unit Manager	Clinical Coordinator	Medical and Surgical Nursing Operating theatre and ICU	Asia

Table 2: Demographic profile of graduates

Participant	Position	Program	Country of Origin	Host Country
No. 1	Registered Nurse	Masters in Nursing Science	India	Canada
No. 2	Registered Nurse	Masters in Nursing Science	Asia	Saudi Arabia
No. 3	Registered Nurse	Critical Care Nursing	Asia	Saudi Arabia
No. 4	Registered Nurse	Critical Care Nursing	Asia	Australia
No. 5	Registered Nurse	Critical Care Nursing	India	Australia
No. 6	Registered Nurse	Operating Theatre Nursing	India	Canada
No. 7	Registered Nurse	Operating Theatre Nursing	Asia	United Kingdom
No. 8	Registered Nurse	Operating Theatre Nursing	Asia	Canada
No. 9	Registered Nurse	Critical Care Nursing	Seychelles	Kenya
No. 10	Registered Nurse	Critical Care Nursing	Seychelles	Kenya

4.3 IDENTIFIED THEMES

The identified themes in this chapter reflect the participants' journey through the transnational nursing experience from either the viewpoint of academia or a graduate. In other words, the identification of each theme as well as the derived sub-themes has been constructed taking into consideration the participants' responses in this study. Thus, the participant's actual responses became the raw data for analysis.

4.4 SECTION A: ACADEMIC LEADER RESPONSES

Six broad overarching themes as mentioned below were identified from the data analyses of the academic leader responses.

- Recruitment and selection processes in TNE.
- Regulation and control of teaching and learning outcomes.
- Educator-learner preparedness.
- Support structures offered for academics and students involved in TNE.
- Challenges related to teaching and learning.
- Best operating practices.

These themes were further categorised into sub-themes as per Table 1.

The voices of academic leaders such as Rectors or Vice Rectors, Deans or Vice Deans, Directors of International Nursing Education Projects, College Heads, Heads of Departments of Nursing Faculties, Lecturers and Nurse Educators was central to this research and the researcher's ontological belief is that the personal and professional experiences of these participants influenced the data that was produced. Thus, the researcher's decision to use interview extracts which were articulated through the voices of participants enabling them to speak for themselves.

4.4.1 Theme 1: Recruitment and selection processes in TNE

Information received from participants on the export and import of transnational nurse education reflected that partnering countries have collaborative agreements with a view to mutual gains. There appeared to be no centralized selection, recruitment or registration process. Institutional internal policies often dictated selection criteria. Participants from some countries reported that nursing education was imported via franchised institutions, virtual universities, branch campus operations, 'for-profit' institutions and by conventional distance learning. Most of these initiatives were linked to a global collaboration in nursing education and research. Participants in this study explained that, the broad 'good practice' principles that have evolved in the of recruitment and selection processes stemmed from a situational analysis of the host country. This then presents examples of successful approaches that may provide food for thought for those considering implementing new programs. Below is a statement made by a participant, which supports this notion:

"A situational analysis is always conducted first before a project is implemented in any country. The curriculum is always adjusted and contextualized to the host country thereby recognize their ways of doing things and the disease profile of the country." Academic leader 1.

4.4.2 Theme 2: Regulation and control of teaching / learning outcomes

The study concluded that effective and appropriate quality assurance policies and practices are vital during any recruitment and selection process. It is for these reasons that quality assurance is receiving increasing attention at all levels. Participants in this study were of the opinion that, the responsibility for the quality assurance of TNE should lie with national authorities of importing and exporting countries, the receiving institutions and collectively by national quality agencies such as accreditation bodies.

There appeared to be a wide variety of nursing programs offered to undergraduate and post graduate students. All transnational nursing initiatives were designed to reflect the needs of the institutions and students involved, and the regulatory and commercial environment in which the program operates. Therefore, some of the nurse education programmes were developed within the educational framework of the country but tended to employ or utilize methodologies from a wide variety of organizational and pedagogical models. Participants aired their views as follows:

“Students getting accepted into a higher education institution and having the credits transfer, means we are meeting standards that are being set by the administration of another institution abroad.” Academic leader 3.

Another participant stated that once students successfully entered a nursing program, it became the responsibility of the teaching institution to ensure that all rules and regulations were applied to ensure a quality ‘product’ on completion of training. The following interview excerpt verifies this:

“The focus of the institution is for our students so that we give them the best service possible- they need to make themselves and their country proud.” Academic leader 2.

4.4.3 Theme 3: TNE academia and student support structures

The study showed that support structures with these type of programs often comprise of quality assurance procedures such as, workshops, orientation programs, integrated seminars for students and teachers, access to electronic devices to help facilitate teaching/learning or a block of individual student consultations. These arrangements are normally negotiated with the persons responsible for these projects. It was also noted that within the transnational teaching environment, there were strengths and limitations. All stakeholders needed to be alert for potentially conflicting practices across institutions. Some of the participants emphasised the importance of having proper orientation for students, coordinators and facilitators for example, workshops, mentoring from course coordinators or mentoring from experienced

transnational teachers. This they said helped to clarify expectations, policies and procedures of partnering institutions and prevented cross-border challenges related to teaching. Some participants stated that nurse educators felt incompetent at times, largely due to them being unable to manage situations because they could not adapt and be flexible in a host country. Participants in this study have stated the following;

“If transnational teachers and students are not adequately prepared for their roles, they tend to have a lack of understanding of the host country in general. This can impact seriously on the way the teacher comes across to the student.” Academic leader 5.

“It is really very difficult when you are away from your home ground; there is a huge difference between the worlds. Even if you are doing a fantastic job being a teacher in your own country, it may not work here, you may have to change and adapt.” Academic leader 3.

4.4.4 Theme 4: Challenges related to teaching and learning

It was verbalised by academia that prior to engaging facilitator for cross border nursing ventures, thorough knowledge had to be gained on the person's background, nurse education and training knowledge and experience. Almost all participants agreed that it was imperative that coordinators and facilitators of the nursing programs had to have sound understanding of institutional policies and procedures as well as be experts in their chosen discipline such as operating theatre nursing or neonatal intensive care nursing. Post graduate students were facilitated only by a suitably qualified person. The response below emphasises this notion:

“...persons that are chosen to embark on these ventures, are experienced academics who have a vast amount of knowledge and expertise to support and grow students from across the world.” Academic leader 1.

Other academic responses related to learner preparedness, clearly alluded to the fact that for programs of this nature, students need to be self-directed, mature and focused. The following response verifies this:

“Work ethic amongst most Asian nursing students is commendable. They can be very competitive at times but are certainly high achievers.”
Academic leader 3.

Another response from a member of academia who taught nursing in three different continents revealed that the desire to travel abroad was the impetus for participants to be involved in a global healthcare immersion experience. The following quote attests to this:

“I think students and facilitators like and enjoy the exposure they can get travelling to developing countries. For me, it just really builds me as a person...and these times have been just like the best experiences in my life.”
Academic leader 5.

The study also revealed that although partnering institutions strived to maintain high academic standards there was still a need for modified content, teaching practices and assessment strategies. Sometimes host countries did not enjoy the privileges of first world countries and did not necessarily have modern equipment and facilities like simulation laboratories and fully fledged libraries. It was also noted that learning styles were similar and at times different to classes anywhere in the world. Students varied from being autonomous independent learners to dependent learners. Educators were cautioned not to stereotype and consider transnational teaching to be conducted in a global classroom.

“Teaching models are often a problem but our coming to the country prompted a lot of new developments, such as simulation laboratory in Rwanda, telehealth in Rwanda.....new books in the library in all countries visited.” Academic leader 1.

Not all of the TNE programs discussed in this study were governed by an internal quality assurance system. These findings led the researcher to believe that there are significant implications in terms of consumer protection regarding TNE, as these programs were largely unregulated. The institutions were also found guilty of not being fully transparent to potential students about what to look for when considering education provided by a transnational provider. Information should include factors such as accreditation, national and international recognition of the program. It appeared that at present, the institutions have total executive power with no monitoring agency.

According to participants, cross border projects have some very significant implications in terms of consumer protection. Participants in this study were unanimous in this view and stated that most often TNE projects were for profit and were largely unregulated, and as a result many of the regulated parts suffer poor control:

“...The development of TNE is a reality and appropriate criteria to measure quality must be adopted to improve service delivery.” Academic leader 2.

This study also yielded information that alluded to recruitment and course selection criteria challenges. Findings revealed that the selection and recruitment processes were flawed. Recruitment was haphazard and hurried and the selection of instructors and coordinators were not methodologically sound. Reference checks on teaching skills, expertise and qualifications were surpassed and most respondents felt that this should be made mandatory. The following quote highlights this:

“Staff that was chosen had to understand the goals of the university and as well as their roles as academia to ensure success of international ventures.” Academic leader 1.

“Even though TNE is very rewarding for the educator, preparation involves more than just planning for teaching. It also involves the availability and

effectiveness of modern technology, educator support and understanding student expectations.” Academic leader 3.

The participants further reported that participating universities in TNE had shortcomings with human resource strategies. Job analyses or job descriptions had room for improvement and at times orientation and training were non-existent. Work schedules gave the appearance of being subject to pressing needs, rather than being analyzed for effectiveness and efficiency. Other travel and logistical challenges also posed a problem such as transportation of learning material between countries and educators random costs. The following excerpts from the interviews highlight this challenge:

“Logistically transporting books to the host country is a nightmare. I lost books transporting them to Rwanda. The books that were transported to Seychelles arrived just before I finished the block.” Academic leader 1.

“The weight of the books is another problem to an extent that one has to courier the books but they got lost. I had to pay for my pocket travelling to the United Arab Emirates because the then Head of School would not support financially for this purpose yet the thickness of books differs in the various courses.” Participant 1.

4.4.5 Theme 5: Cultural care in TNE

The participants in this study all resonated that the effectiveness of TNE policies and practices may sometimes be influenced by intercontinental or international cultural differences. They were of the opinion that it was imperative that policy makers were aware and took into consideration cultural differences to ensure that TNE was congruent with the cultural orientation of the students and teachers alike. The following quote from one of the participant’s sums up the general consensus of academia, wanting to engage and connect with their students despite cultural differences.

“As an educator, you need to create an environment where your students feel ‘safe’ in participating.” Academic leader 5.

One participant stated that culture shock often resulted due to unfamiliar surroundings traditions and values but could be helped with language training and preparation for what to expect in the foreign land. Others were in agreement that TNE educators should be selected having some degree of cultural awareness of the host country. It was also pointed out that TNE project managers or those involved in negotiations between countries should be responsible for offering cultural and language training to TNE administrators, facilitators and students as this type of initiative only served to improve the chances of success for any cross border teaching venture. The following quotes attest to this.

“It is easy to take students for granted.....but you can help them and enhance your teaching by students by reflecting on your own academic and cultural expectations.” Academic leader 4.

“Some students, for example, are very shy or self-conscious, and may be very fearful of speaking up before a group....maybe because they cannot speak English properly.” Academic leader 2.

Communication between students and teachers can be affected by cultural norms and values. Facilitators expressed how they only interacted with students professionally, with the prescribed contact hours, whereas, their local counterparts often interacted with students socially and this was totally acceptable. Cultural habits could be a cause for concern and conflict in the classroom. Participants, felt that proper orientation and a clearly communication of expectations to students from the beginning is vital for a win-win situation.

“You cannot insist on certain type of behaviour without and explanation...this may just make students uncomfortable and they will shut down.” Academic leader 3.

4.4.6 Theme 6: Best operating practices

Participants in this study regarded 'good practice' approaches as something that would be learned from co-operation between countries. It was noted that intercontinental activities and relationships were shaped by more diffuse and general cultural and institutional processes that were learnt along the process. More requests for auditing and monitoring processes were necessary rather than processes of self-regulation as this was believed to assist with transparency. The need for an understanding how connections and dynamics are themselves shaped learning and how it was permeated by culture, norms and institutional values was learning opportunity for many TNE educators. Research into the host country's political and socioeconomic factors contributed to participant's knowledge about global models and blueprints for education.

One of the participants identified a pre-requisite workplace preparation program which was felt to add value to the students learning outcomes.

"What will be worthwhile to the students is to do a pre-course to help with selection...they will have a better understanding of what is required of them."

Academic leader 3.

Another participant identified an of program module that incorporated job search, application writing, interview preparation, mock interviews, and business networking techniques. This was conducted to give prospective employees opportunities to apply for related jobs using their soft skills. Those interviewed stressed that orientation and workshop sessions at the onset of the programs assisted with effective communication, conflict management, time management and the general dynamics of the program for both student and teacher.

"The whole idea of doing the course was to improve their career or job chances, and they believed that the technical knowledge gained within the course and especially the qualification itself constituted the employability enhancement they sought." Academic leader 6.

They also stressed as mentioned below, that face-to-face communication was a better teaching practice as it offered instant feedback and afforded easier communication with fellow students, aiding the resolution of study problems.

“Face to face communication is still the best way in learning fully online means less interaction and learning ... classroom interaction is important.” Academic leader 4.

Others agreed that face to face contact was important but stated that with TNE, it was normal for educators to be away for a certain period of time and then return. They also felt that learning outcomes would be achievable if educators still made themselves available for their students'. The following response sums up this feeling.

“But if the tutors and lecturers are available anytime so that they can be contacted, via mails, discussion groups, it shouldn't be a problem for the student.” Academic leader 4.

The implementation and utilization of current and emerging technologies was another best operating practice that was noted. This was noted to offer many potential advantages including ready access to latest information and was especially beneficial to students engaged in research outputs. Participants however cautioned that, the advantages to be gained from introducing new technologies to foreign students will depend on the ability and willingness of the students to use them. Therefore, an educational needs assessment should be conducted on commencement of a particular programme.

Research led teaching was seen as another good operating practice as it allowed the educator to share his or her own research experience with students and find ways to include them in your research activities. By supporting students to develop their research and encouraging them in higher degree studies, educators felt that they carried research into their teaching.

“When you come here, you will discover that research is the biggest thing that develops skills in collaboration, cooperation and liaison in group work amongst these students.” Academic leader 1.

Table 3: Themes and sub-themes that emerged from academia responses

Themes	Sub-theme
Recruitment and selection processes in TNE.	<ul style="list-style-type: none"> • Meeting staffing needs of partnering countries. • Addressing global scare-skills shortages of nurses. • Increasing knowledge and skills of nursing workforce of partnering countries.
Regulation and control of teaching and learning outcomes.	<ul style="list-style-type: none"> • Programs offered in association with affiliated universities or higher education institution. • Routine evaluation of programs. • Projects governed by the same principles as all the other learning centres. • In keeping with institutional vision, mission and philosophies.
Support structures offered for academics and students involved in TNE	<ul style="list-style-type: none"> • Securing of grants and scholarships from developed countries for all stakeholders. • Transport for clinical experience. • Library and laboratory facilities.
Challenges related to teaching and learning.	<ul style="list-style-type: none"> • Quality assurance systems. • Educator-learner preparedness. • Communication and language barriers. • Teaching models. • Teaching and learning resources. • International accreditation of programs. • Logistical challenges. • Time management.
Cultural care in TNE.	<ul style="list-style-type: none"> • Cultural awareness • Cultural sensitivity
Best operating practices.	<ul style="list-style-type: none"> • Development of nursing education in other countries. • Collaboration in education and research. • Research supervision.

4.5 SECTION B: TNE GRADUATE RESPONSES

4.5.1 Theme 1: The distance factor between teacher and student

The findings in this study revealed that despite having a cordial relationship with the educator, the increased physical distance between the educator and the student was often a major problem in the student achieving his or her learning outcomes. Students felt that with modern technology, the educator can be just a click of the 'mouse' away. However, having online sessions and tutorials did not replace the gains of face to face contact. It was also thought that the relationship between graduate and lecturer was to a certain degree affected by distance. Learning opportunities for spontaneous interactions

between facilitator and student and utilisation of the “teachable moment” was indeed hindered and limited.

“I had a lot of obstacles because I never had personal guidance from my lecturer..... your lecturer guides and motivates you.” Graduate 3.

Participants also felt that when the theory was practiced in the clinical setting, the presence of an educator would help overcome any resistance or challenges they could have faced as they would have benefited from the guidance, advice and support from their educator. Other interviewees were of the opinion that with their cross border education experiences, the different in time, place and distance was somewhat bridged by the effective communication media such as Skype, You-tube and Facebook. Not only did this facilitate learning, but allowed for speedy access to instructional online teaching. Graduates also stated that having the added advantage communicating with lecturers and educators on social media platforms enabled effective handling of queries and complaints. This was stated as below.

“As students we were very happy to see our lecturer from time to time.....it gave us a chance to clarify all our doubts.” Graduate 5.

Some participants expressed a sense of feeling left ‘all alone’. They stated that when their educator was around, they felt safe. As soon as she left them, they felt uncertain and unsure of how they should respond to situations that faced them in the clinical settings. This was summed up in the statement below.

“Nobody could relate to us like our teacher.....she was our mentor and she was our friend.....when she was away....it was like nobody understood what you did ... you were just left alone.” Graduate 9.

4.5.2 Theme 2: Learning opportunities

Interviewees in this study pointed out that learning opportunities in TNE were student centered. This meant that although there were common nursing subjects or common subject content in which, all students needed to learn in order to pass, each student approached the subjects from their own perspectives, experience and understanding. Each student embarked on the course, having their own specific learning needs. It was also highlighted by the graduates that all students had a tendency to undertake a personal journey from their level of knowledge and skills to the level required to succeed in their chosen courses. It was also noted that the growth, learning opportunities and development along this journey was the process of meeting those needs. Some graduates stated as below, that other types of structured learning support such as computer skills and language skills was designed to provide assistance to help students' learning development. The following statements allude to this:

".... At the beginning of the course, I was confused and overwhelmed Now with bedside teaching support and clinical facilitation, I have grown in my profession and became a stronger person." Graduate 6.

"I was very nervous and did not know what to expect from the course or the instructors. I was literally terrified after the orientation ... but with the scheduled learning opportunities like clinical accompaniment I overcame my fears and have grown professionally and have developed confidence in performing my duties." Graduate 10.

The findings of the study also revealed that peer mentoring was a vital strategy in helping the nursing students to attain their learning outcomes. Peer mentoring was however, not consistent in all institutions and for some nursing students, placement in the clinical environment proved frustrating as they were not given the necessary support and supervision. It was noted that, and as evidenced in the quotes below, that because students came from different countries, academic backgrounds, cultures, and teaching and learning traditions, it was a challenge to ensure sufficient teaching and learning

opportunities to enable a sufficient understanding of the content. Formal lectures forming the main part of class interaction appeared to be the commonest way to facilitate the course.

“.... I was very comfortable with peer mentoring, it really assisted me with issues I could not understand ... even with the integration of textbook knowledge.” Graduate 2.

“.... the peer mentors actually help when our teachers are not around ... and with their guidance we gradually became competent ... and sometimes experience is the best teacher because they were once in our shoes.” Graduate 9.

4.5.3 Theme 3: Support structures

Graduates in this study verbalized a generally a positive opinion on support that was given during their studies. They also felt that this allowed for the development of new possibilities of mobility and further studies abroad. Some stated that the support they gained from their lecturers and facilitators was invaluable and it was only due to their dedicated efforts, that they felt their successes had increased. The following statement is testament to this:

“I now realize the importance of having an international curriculum for my employability ... but it would not have been possible were it not for our program facilitator ... there were times I wanted to quit ... she basically “held our heads above water.” Graduate 3.

Other students were of the notion that having coordinators that were conscious of living in a global society where it is important to embrace global students in becoming global citizens and understanding the values of multiculturalism helped them and provided support when they faced barriers to learning such as language deficits. They also acknowledged the important roles of some of the partnering or offshore institutions with legalities and ‘red tape’ under certain conditions where their own counties and institutions ‘dragged their feet’ to assist. The following response highlights this:

“.....bribery and corruption prevented us from getting our academic records from our previous institution ... eventually our facilitator had to contact the Heads of department and send through endorsements which hastened the process.” Graduate 9.

Some graduates did however state that they were not properly orientated on the developments of their program and had a general lack of information of what was really happening. Important issues like learning material, transportation and accreditation were sometimes discussed in a ‘by the way’ fashion. It was very difficult for most students to have a clear and complete picture of who regulated and who controlled the processes of their transnational nursing programs in their country or if the institution was recognized and accredited and by whom. Some graduates felt that although the nursing programs were at times offered simultaneously in two different continents, different educational systems created problems with accreditation and recognition causing frustration and delays. Graduates said:

“There should be a general legal framework which could integrate the different educational structures and values of the two countries in issuing the same qualifications ... after all we are doing the same course” Graduate 10.

“.... like being told everything on orientation ... whether we are going to get jobs when we go to another country or whether we have to write another exams ... we have a right to know this as we pay a lot of money for the courses.” Graduate 5.

4.5.4 Theme 4: Group cohesion

All participants stated that they valued the support they received from fellow students. This increased group morale added to their confidence and abilities. They stated that working in groups in and outside the classroom fostered a family like feeling that helped them overcome loneliness they felt being away from their loved ones. Their cultural oneness allowed them to practice their traditions and remain connected. Stronger academic students would assist by

explaining course content in their home language to overcome language barriers to learning. Graduates stated that the friendships and relationships that were forged still remained strong nowadays despite being across continents.

Graduates welcomed the many different and interesting approaches to research based learning in a transnational context, but found it useful to have others with research experience sharing their research knowledge with them and finding ways to include each other in research activities. Participants also stated that having the support to develop the skills to carry out their research encouraged them in higher degree studies. The quotes below confirm this:

“I learnt so much about research from my batch mate ... that I can now carry out research in my own teaching and learning.” Graduate 5.

“... we were from different states but grew close ... my friend was my pillar of strength ... she shared my anxieties, awkward situations, frustrations, moments of confusion and doubt.” Graduate 1.

“.... we helped each other stay positive we needed that group support. Otherwise we would never have made it.” Graduate 3.

Table 4: Themes and sub-themes that emerged from graduate responses

Themes	Sub-theme
The distance factor between teacher and student.	<ul style="list-style-type: none">• Physical distance from the lecturer.• Emotional liability.
Learning opportunities.	<ul style="list-style-type: none">• Lack of resources.• Minimal mentorship or direct bedside teaching.• Technological set-backs.
Support structures.	<ul style="list-style-type: none">• Transparency.• Accreditation dilemmas.• Incongruency of course content.• Cultural awareness.• Language barriers.• Revision and feedback.• Course fees and learning material.• Accommodation.• Transportation.• Job opportunities.
Group cohesion.	<ul style="list-style-type: none">• Reliability.• Commonalities.• Peer teaching.

4.6 SECTION C: RECORD REVIEWS

Using a case study approach in one of the samples in this study allowed the researcher to study other sites of information such as relevant institutional documentation to enhance data collection and analysis. In this way, the researcher was able to corroborate findings from existing manuals, policies or guidelines that promoted an understanding of the international and national academic institutions with data that was gathered from interviewees in the same study. Documents in this study were analysed for descriptions and patterns related to three focus areas as depicted in Table 5.

Table 5: Focus areas that were adhered to when reviewing records

Focus areas	Concerns of the focus areas
Conceptual issues of TNE.	<ul style="list-style-type: none">• Definitions of quality, purposes of having policies or guidelines regarding implementation of TNE.
Structures and processes used to monitor, assess, or improve delivery of TNE.	<ul style="list-style-type: none">• Monitoring, assessment and delivery of TNE.• Curriculum and programs.• Student learning and teaching practices.
Contextual issues.	<ul style="list-style-type: none">• Internal factors that impact or influence delivery of TNE.• External factors that impact or influence delivery of TNE.

4.6.1 International document reviews

4.6.1.1 Conceptual issues of TNE

Documentation reviewed related to staffing matters revealed that, local lecturers and facilitators had to be affair with policies and procedures that complemented teaching in the transnational context. Criteria specified for facilitators were explicit that they were practicing in the specified field. These specialist educators had to be knowledgeable about company vision, mission and philosophies and were usually in senior positions. It was also apparent that those teaching the programme, had a previous stage completed the programme offered by the university. Academics or local lecturers and facilitators from the host country appeared to have been chosen on merit and their involvement with the program. However, it was also noted that facilitators of certain programmes had a lower qualification than the nursing student being taught. Perusal of selection criteria for educators in this instance did not yield any information that reflected stipulated nurse educator qualifications. The nurse educators/facilitators or lecturers are normally well known and respected professionals within the institution or facility. Records further showed that it was appropriate that teaching in transnational programs should have local lecturers as co-teachers. The reason given was that, they were most familiar with nursing and leadership practices in the context of their country.

4.6.1.2 TNE monitoring and evaluation processes

It was evident from university literature that quality assurance measures were aimed at maintaining and managing standards across transnational courses and subjects. It was also reflected in the literature that courses, subjects and assessments were aligned to learning outcomes. Prospective students were assured that assessment tasks were clear, well-designed and fair to students and that subjects were well-structured and formed part of a cohesive, well-structured program. The institution prided itself on encouraging continuous improvement through reflection and feedback and fostering of ongoing dialogue about student learning and teaching. It was also noted that subject content, assessment tasks and learning outcomes across locations transnationally were predominantly developed by the respective subject coordinator of the institution delivering the programme.

It was also noted that subject coordinators usually delivered the core material to transnational students in an intensive teaching or orientation week early in course at the transnational teaching site. This allowed for the local 'co-teachers' from the transnational partner institution to guide and tutor the students through the remaining material during the course or programme, based on learning activities developed by the subject coordinators. The subjects were then supported online via e-learning or social media such as Facebook. This then allowed transnational students to access subject matter and to interact online with lecturers, mentors and facilitators.

Interpretation of records from an international sample revealed that the nursing program had evolved over twenty when the host country was offered professional upgrade modules through the offshore partner to the profession of nursing. Many registered nurses needed to upgrade their qualifications, particularly if they wanted to progress in their careers. Upgrading courses in the field of PHC were initially commenced. Nursing courses then progressed on transitioning nurses from Diploma status to Bachelor status. In 2007,a program such as a Masters of Clinical Nursing was offered and the aim was to provide registered nurses with the theoretical knowledge and critical thinking

skills to prepare them for advanced practice in the clinical setting. The institution boasts success with this venture and one of them being the deep understanding that the university has of the nursing profession in the transnational context. It was evident that coordinators of the program did try to at times to align the design and delivery of the programme in a multicultural context that is unique to this setting. The culture of the nursing profession can be characterized in similar ways to the culture of the nursing profession in all the international samples. The knowledge requirements and the capacities for nursing were not the same but were similar and could be accommodated quite easily at the level of delivery.

The local facilitators who teamed with the delivering institution sometimes advised the partners where modifications are required in relation to field based practices, but not theoretical knowledge. However, in the domain of learning and teaching, such as student accompaniment, discussions appeared to have been ongoing. Matters related on how to cater for the needs of nurses who come from multicultural backgrounds and various educational backgrounds were always tabled for discussion and were always topics for debate.

4.6.1.3 Contextual issues

Induction of staff

In order to ensure that the programme is delivered in according with the curriculum design and the academic rules and regulations of the host country, program leaders or representatives are responsible for the proper induction and orientation of all involved from the delivering institution. This meant that if a South African nursing institution delivered a nursing programme in a Mauritius university, the South African academia would have to be fully orientated and inducted by the Mauritian faculty. Induction handbooks and guides were generally available online for all prospective staff, informing them of programme delivery, teaching and assessment support and strategies.

Forums and committees

Some institutions had established committees and forums to monitor the quality of the programme and to deal with emerging issues on a regular basis. These management committees consisted of programme leaders, course coordinators, the administration staff and lecturers from both partnering institutions. Physical meetings where held were possible and at other times teleconferences proved to be the next best method to discuss student and teaching concerns. Record reviews of some universities found a decreased in recorded communication between parties as the course progressed. Other reviews reflected that these meetings or forums appeared to be sorting out 'red tape' issues and legalities for students than actual teaching and learning challenges.

4.6.2 National documentation reviews

4.6.2.1 Conceptual issues of TNE

Information gathered from the records of the national participants in this study reflected that institutional visions and missions related to TNE were similar. Universities wanted to be the premier universities of African scholarship. They wanted to be a dynamic African university that was recognized for its leadership in generating cutting-edge knowledge for a sustainable future. One of the participating universities cited its mission as being, a truly South African university that is academically excellent, innovative in research, critically engaged with society and demographically representative, redressing the disadvantages, inequities and imbalances of the past. Goals were to promote African-led globalization through African scholarship by positioning respective universities, through its teaching, learning, scholarship, research, and innovation and to enter the global knowledge system on it.

Other goals were to contribute through knowledge to the prosperity and sustainability of our province, and to nation-building, by connecting with and committing ourselves to the communities we serve in a manner that adds value and earns their respect and admiration. Building a research ethos and

culture that acknowledged the responsibility of academic staff to nurture its postgraduate students, and to be a pre-eminent producer of new knowledge that was both local and global in context tended to define one university as being the premier university of African scholarship. Online literature further depicted the nursing education institutions, as wanting to promote excellence in teaching and learning through creative and innovative curriculum design and development, in accordance with the highest quality management principles.

All universities described themselves as an institution of choice that values students in all their diversity and has a student-centered ethos, providing students with curricula, teachers, and infrastructure and support services designed around their needs and producing well-educated, competent, sought-after graduates. All institutional documentation that detailed its TNE programmes touted for their institution and stated that theirs was an institution of choice that attracted and retained academic and support staff of the highest calibre by creating an intellectual environment that fostered and stimulated academic life. Respective institutions, also boasted a climate of organizational citizenship in which all staff recognized and understood their roles in ensuring the success of the university. They also stated that their main role was to develop graduates and diplomats to be responsible global citizens capable of critical reasoning, innovation, and adaptability. All institutions cited the ideology of *Ubuntu* and compared their universities to be a people-centered university, respecting the dignity of others, recognizing mutual interdependence and promoting compassionate and responsible citizenship.

4.6.2.2 TNE monitoring and evaluation processes

In order to achieve their visions and missions, records tended to define institutional ethos and distinctive educational purpose and philosophy. A vibrant, stimulating and richly diverse environment that enables staff and students to reach their full potential was described. Universities also stated that they sustained an environment that encouraged and supported a vibrant research, scholarship. Reviews further reflected that there was engagement in

mutually beneficial partnerships locally, nationally and globally to enhance social, economic, and ecological sustainability. Brochures and online information describe South African nursing schools that have been involved in transnational ventures as serving diverse regional, national and global communities that promote an open society where critical scholarship. The expression of a multiplicity of opinions and experiences are actively encouraged from all stakeholders.

No records of forums or governing/controlling bodies were accessed. Other information accessed stated that they provided a supportive and affirming environment that enabled students and staff to reach their full potential by adopting innovative approaches to promote excellence in their institutional processes and systems. Some even stated that the processes to improve delivery of TNE included their collaboration with clinical practice partners in relation to students includes reviewing and modifying clinical instruments, practical and theoretical examination facilitation and moderations. Research supervision and co-supervision to national and international students was emphasised in most documents that characterised the functions of the institution.

4.6.2.3 Contextual issues

Other internal and external factors that impacted on delivery of TNE were orientation programmes and verbal feedback sessions or an evaluation instrument that is completed by the students at the end of the programme. The researcher was not allowed to view feedback data from students due to the ethical issues of confidentiality and non-maleficence. Mention of leave and study leave provision for health care workers in other countries, provision for transportation for clinical experience and a library and laboratory facilities were other factors that the researcher found during record reviews. Universities also boasted an impressive research publication record of national and international students in their prospectus and handbooks.

4.7 CONCLUSION

In this chapter, the researcher was able to analyse the information obtained from the interviews with the participants and record reviews of the participating institutions so that themes could be identified and elaborated on. Overall, the data demonstrated culturally different ideas or expectations, mismatches in pedagogic and professional context of academics and nursing students in the TNE environment that affected on the application of learning and teaching in practice. It was evident the TNE taught knowledge that focused on intellectual outcomes had enhanced their self-confidence, improved their interpersonal communication skills, professionalism and academic knowledge. However, there were contradictory views with regards to the implementation of changes in their practice. This led to certain questions emerging in relation to the researchers' aims of the study as to why there was an issue with TNE facilitation. The research findings will be discussed in the next chapter and supported by other literature from published research.

CHAPTER 5 : DISCUSSION OF FINDINGS

5.1 INTRODUCTION

Chapter 4 analysed the collected data and categorised it into themes and sub-themes, related to the information gathered from the various participants of the study. It was also noted in Chapter 4 that TNE as a phenomenon brings with it many threats, opportunities and benefits. It is hoped that the discussion of the findings of this study in Chapter 5, will allow the reader to decide how he or she will view this phenomenon. In other words, will it be viewed with negative or positive connotations? This chapter will also present discussions of results in order to highlight how the research questions were answered and how the objectives were achieved. The first part in this chapter discusses the results based on the conceptual framework that guided the study as well as the themes that emerged in chapter 4 in conjunction with the various responses from participants. The second part of this chapter will discuss the findings of the current study in relation to the objectives that underpin the study.

5.2 CATEGORY 1: ACADEMIC LEADER RESPONSES

Six broad overarching themes as mentioned below were identified from the data analyses of the academic leader responses. These will be elaborated on and guide the discussion to follow.

5.2.1 Theme 1: Recruitment and selection processes in TNE

The theoretical framework of this study has accepted that in order for TNE to contribute to the broader socio-economic and cultural well-being of the country and its individuals, there has to be congruence between organizational quality and academic standards. According to the findings of this study, organizational policies and standards are necessary to govern the recruitment and selection processes in TNE. The policies and standards may

not be legally binding on the nursing educational institutions or governments, but they are widely respected by partnering institutions. These findings indicate that policies and protocol have an influence in shaping governments' regulatory frameworks related to the delivery of nursing education across the border.

According to Adam (2001: 45), control is needed for all types of TNE and proper student recruitment and selection processes must be put in place with clear information and codes of practice. It is only with such practice that concerns and challenges as to how it is delivered organized and recognized can be overcome. The author also states that the most successful approaches to transnational education appear to be where it is drawn into the national system of regulation and not regarded as a threat but an opportunity. By this, one can conclude that transparency, recognition and accreditation are obviously linked to the control of TNE and those policies and protocols have a huge role to play when ensuring effective facilitation of TNE. Not only do these programmes have to meet the staffing needs of partnering countries, or attempt to address the global scare-skills shortages of nurses, they also have to increase knowledge base of the nursing workforce of partnering countries. Therefore, it should also be noted that the total quality assurance of transnational education should involve all the relevant stakeholders namely, training officers, administrative personnel, student and teacher.

Quality assurance of any educational unit is practiced in many countries and is usually associated with purposes of quality improvement and enhancement in higher education systems in many parts of the world. South African higher education is no different and faces multiple stakeholder demands for greater responsiveness to societal needs (Zwanikken et al. 2013: 3-5). Some of these needs include social and economic development. Stakeholders also require that higher education institutions are able to provide the public with comprehensive information on the manner in which they maintain the quality assurance of the educational institution. In South Africa, The Higher Education Act 101 of 1997 assigns responsibility for quality assurance in

higher education to the CHE and this responsibility is carried out through its a sub-committee which is the Higher Education Quality Committee (HEQC) (Department of Higher Education and Training 1997). As part of its quality assurance responsibilities, the HEQC is obligated to ensure quality promotion, institutional audits and review and grant programme accreditation (CHE 2015: 23-25).

A 2004 Report published by the CHE that guides all higher education service providers with regards to distance higher education in South Africa prescribes that all postgraduate programmes are to have appropriate policies, procedures and regulations for the admission and selection of students. They further add that, the selection and appointment of supervisors, and the definition of the roles and responsibilities of supervisors and students, related to student admission, selection and assessment, are communicated to all postgraduate students, as well as academic and administrative staff. The handbook stresses the importance of having this implemented consistently across the education institution and program (CHE 2015: 25-29). It could be concluded that there was a similar perception amongst participants in this study concerning TNE provision and service delivery. Therefore, it should be considered necessary to develop clear guidelines concerning its implementation.

A study conducted by Adam (2001: 43) that discussed the implications of TNE for consumer protection in Europe reveals that most of these types of programs are largely unregulated, and many of the regulated parts do suffer poor control. The above mentioned author further added that the different control mechanisms that existed across Europe's higher educational systems added to the challenges of effective programme implementation. Supporting evidence from a study conducted by Burnett (2006: 32), agree that for effective implementation of a higher education program, mechanisms have to be in place to ensure that teaching and learning methods are appropriate for the design of its programmes such as the use of learning materials and instructional technology. The study reported that the selection and

appointment criteria in place for postgraduate supervisors are equally important and that they be acceptable to the research community in the area of study. These criteria include the fact that the supervisor has a qualification in a relevant field of study higher than, or at least at the same level as, the exit level of the postgraduate programme he or she is supervising. These studies correlate with participants' viewpoints, in stating that facilitators or educators of cross border programs have to have an appropriate research track record, experience, expertise and peer recognition in the field of study which will foster a positive teaching and learning environment.

It should also be noted that any venture to maintain and enhance the quality of education cannot bear fruit without active participation of the students along with other stakeholders. This was clearly alluded to in the findings of an Australian study conducted by O'Neill and Chapman (2015: 5), who found that with cross-border educational partnerships, different terms should be specified. This should take into account the services provided by each partner and should range across marketing, recruitment, provision of infrastructure support, reproduction of teaching materials, support for students and educators. On the one hand, one needs to understand students' perspective of how to participate and contribute significantly in the education process while on the other hand; it is teachers who are to ensure student participation not only in learning process but also organization and management of education. Naghdi (2015: 170-171) revealed that it was imperative that students are informed of expectations and requirements of the programme timeously. The author also added that factors such as teaching strategies and good interpersonal communication were paramount to student and educator satisfaction.

5.2.2 Theme 2: Regulation and control of teaching/ learning outcomes

An Australian study conducted by Nagdhi (2014: 243) that investigated international student retention strategies in the higher education sector revealed that the relationship between the academic approach and student retention factors can only be positive and significant, when suitably qualified

teachers or facilitators are utilized as this was important for achievement of teaching and learning outcomes. Another study conducted by Czanderna (2013: 47) that highlighted learning practices in overseas institutions amongst academia and graduates, concluded that successful and reputable transnational nursing programmes can enhance an institution's prestige especially if the awarding university has rigid quality control measures in place. This means that all programs offered should be in line with the institutions vision, mission and philosophies and are governed by the same principles as all the other learning centers. Such principles can mean having suitably qualified lecturers or teachers to co-ordinate and facilitate a particular program. The information obtained from this study reflected that in order for teaching and learning to be appropriate for the institution, its program, modes of delivery, selection of facilitators and contact time with its students have to be in accordance with the set criteria laid down by the institutions governing bodies.

Hussain (2007: 168-169) who explored concepts and methodologies on TNE argues that, universities also appeared to take into account whether the students were full-time or part-time and advantaged or disadvantaged. The study also stated that TNE has some obvious and very significant implications in terms of consumer protection. Findings from the participants in the current study have shown TNE was largely unregulated, and many of the regulated parts suffered poor control. However, international feedback from academics engaged in TNE with open regulatory frameworks appear to have more control over their programmes. One reason for this that was given by author, Djelic and Andersson (2009:4-7) was that these countries tend to 'absorb' non-official higher education as it comes and then 'officialising' it. In this way, fewer problems are encountered and more control is acquired, whilst reshaping the education structure, internalization of the culture, policy and planning will be embedded in the organizational process of the partnering institutions. This, it was noted, will then facilitate the mobility and employability of foreign students and educators while supporting the economic development of the region. The study also concluded that transparency, recognition and

accreditation are obviously linked to the control of TNE and have a role to play in its quality assurance. Mdakane (2011: 44) adds that many other factors such as infrastructure, quality of support systems, quality of content and assessment, and peer support networks, may all influence student satisfaction and success in all types of distance learning programs.

Current national and international regulation of transnational education takes many forms and is, noticeably fragmented, disorganized, uncoordinated, often voluntary and ineffective. A Malaysian study, that explored nurses' perspectives on TNE, agreed that there were only a few notable exceptions where some sort of serious attempts at national control or regulation existed and where such controls were present, their strength was dependent on the particular nature of transnational education in question (Arunasalam 2013: 175). Findings from this study also alluded to the fact that partnering institutions should cooperate with associations, and relevant government and non-government bodies to develop quality assurance principles.

However, findings from a Chinese study by Nix (2009: 9) that explored the social, political, economic, and cultural dimensions of a United States based TNE program in China concluded that when government policies appeared to foster 'academic capitalism' that encouraged 'buying' higher education programs from developed countries, TNE programs lacked transparency and accountability. The author goes on to stress that the need for an infrastructure for recognizing qualifications, assuring quality, and accrediting institutions beyond the boundaries of national systems is an urgent matter for debate.

The findings in the present study concluded from the data gathered that transparency related to the exchange of information, regarding matters such as recognition of credentials and accreditation, across borders was vital if all processes were going to run smoothly. It was also found that institutions have the obligation to provide reliable information to the general public, students and respective governing bodies and governments in a proactive manner. Information sharing such as the institution's legal status, credential-granting

authority, course and program offerings and quality assurance mechanisms are pertinent information that all stakeholders need to be weary of.

5.2.3 Theme 3: Educator-learner preparedness

The educators perceived ability to perform in a global health setting was multi-faceted and changed as they progressed through each phase of the transnational experience. Reflections on their teaching experiences saw participants state that it was important to keep in mind their abilities to perform including personal and professional perspectives. Educators past travel abroad experiences also played a positive role in being culturally sensitive. This was in keeping with literature from a study conducted by Czanderna (2013: 137) that concluded that the desire to participate in a global healthcare immersion experience, newly acquired knowledge and contact with study abroad students contributed to the flexible attitudes of educators and gave them a sense of confidence and independence. Data in this study reflected similar findings but it was also noted that the 'fear factor that so many educators described could be attributed to factors such as the many details that had to be worked out regarding travel plans, housing, communication, and liaison with academics and students from foreign lands.

Mdakane (2011: 45) agreed that student satisfaction that often stemmed from student preparedness entails various aspects such as understanding student needs. It also takes into consideration, their expectations, perceptions, values and previous learning experiences. Students thrived within positive teacher-learner relationships and a properly constructed programme design. Content of study material, resources, infrastructure, and student support were other vital components that encouraged learner-teacher preparedness.

5.2.4 Theme 4: TNE academia and student support structures

All participants in this study considered their programs to be superior in credibility, integrity and expertise. However, the shortcomings they experienced not only related to the teaching and learning environment but

also to the availability of resources. The majority of the academics experienced logistical challenges in host countries or locations.

A study conducted by Altbach and Knight (2007: 294-295), agreed in their study that discussed the landscaping of internalization of education and its many challenges, that these are common issues faced by many providers and academics engaged in TNE. However, it was also noted that, local partners could provide classrooms, tutors, and library and administration facilities to supplement the packaged materials produced in the home country. This means that some providers also seek to establish a physical presence through branch campuses, independent institutions, and mergers with local higher education institutions. This is nowadays strengthened by the development of online courseware, digital library collections and email communication with lecturers and teachers making student independent and self-directed learners. It is possible now to provide students in dispersed locations with access to very similar educational resources. Herdtner and Martsof (2001: 3) have addressed cross-continent teaching and learning relationships in their study and discovered that the reliance on educational technology posed questions about the relationship of the learning milieu to the social and behavioral skills needed in humanistic, practice-oriented disciplines such as nursing. The study revealed that use of a wide range of distance education modalities that included using written material, telephone conferencing, video conferencing, and computer aided instruction was sustainable to achieve teacher-learner outcomes

5.2.5 Theme 5: Challenges related to teaching and learning

Transnational education is at times termed a complex phenomenon. Much of it appears remote from traditional education as it takes place outside the traditional sector in terms of its promotion and transmission. In this study, the most visible challenge to TNE providers was largely confined to difficulties related to communication regarding clinical placements and final assignment of preceptors; as well as the beginning experiences of culture shock. In spite of these challenges, it was apparent that academics remained positive and

described reliance on their flexibility and open-mindedness as means to help them succeed even in the most disconcerting of circumstances such as paying for textbooks to be transported from one country to another.

A study done by Ziguras (2001:8), that examined experiences of transnational educational institutions in South East Asia, concluded that the success of TNE programs depends on the coordinators' or facilitators' ability to streamline courses that will provide adequate support to students. It was also noted in the same study that, courses and content should be flexible and accommodate students' individual research topics. Coordinators and facilitators of these programs should ensure and offer continuous supervisory support to enhance students' confidence. Furthermore, the program had to comply with the partnering institutions' government requirements regarding nurse education. According to a study by Daniel, Kanwar and Uvalic-Trumbic (2005: 8) that explored quality assurance issues in cross-border higher education, it was found that this type of education was unlikely to help developing countries unless it was accessible, available, affordable, relevant, and of acceptable quality. It was also concluded that many developing countries were not properly equipped to cope with cross-border education provision. Statistics from this study revealed that even though South Africa then, had approximately 1400 transnational students, mostly served by providers from the United Kingdom, but there was no procedure for monitoring and quality assuring their programmes. Evidence also showed that a national agency like the Higher Education Quality Committee (HEQC) in South Africa, that dealt with foreign providers and approved the setting up of branch campuses, experienced difficulty when protecting students from dubious deliverers and spurious suppliers of cross border education (Daniel, Kanwar and Uvalic-Trumbic 2005: 8).

5.2.6 Theme 6: Cultural care in TNE

Internationalization of any type of education requires a commitment to such fundamental values as transparency, quality in academic programming and support services, academic freedom, fair treatment of partners and stakeholders, respect for local cultures, and thoughtful allocation of resources. This holds particularly true for any cross-border nursing education program. According to Rumbley, Altbach and Reisberg (2010: 6), cultural conflicts are difficult to avoid when issues such as academic integrity, institutional accountability, gender roles, and sexual orientation are viewed from different cultural perspectives. The author has emphasised that international initiatives often confront dilemmas where the values of cultures are incompatible and the line between what is wrong or right and what is the prerogative of culture is not always clear.

Baumann and Blythe (2008: 1) agree that globalization in nursing denotes an expanding scale, growing magnitude, speeding up and deepening impact of international flows and patterns of social interaction. It refers to a tolerance and acceptance of the challenges that accompany transformation of nursing education in the contemporary world. TNE practices may link distant communities and expand relations across the world's continents, but cultural insensitivity and intolerance in TNE, remain the two deciding factors that can assist in making the program a success. According to Seaton (2010: 48-50), whilst nursing as a career worldwide, can offer a rich and exciting opportunity to view different cultures, is also a potential source of further disconnectedness and disruption to personal and professional continuity, as comparative culture is still not fully understood in nursing. The author also reveals that it is still a daily challenge for providers to keep nurses focused on cultural awareness in the largely diverse world population base.

Arunasalam (2013: 40) describes cultural awareness in her study as that of multiple cultures coming together around a common purpose to promote belonging, including the pedagogy of citizenship education as policy, pedagogy and everyday practice demands. The author goes on to say that

when we encounter people of different culture, we discover differences in perspectives, behavior, and communication styles. Yeravdekar and Tiwari (2014: 172) has emphasized that, for cross-border education to flourish, with a reasonable profit for the providers, there has to be a collaborative approach and respect for the policies, culture and sentiments of the host nations. This in keeping with the voices of the participants in this study, who felt that interculturalism, was useful, and pertinent to integrate within the domestic and international education arena of TNE, allowing for its success.

5.2.7 Theme 7: Best operating practices

Participants in this study expressed empowerment from their accomplishment in achieving their goals from this study abroad experience. In addition, those facilitating the programs felt compelled because of their positive experiences to not only encourage and support their colleagues to go, but conveyed a desire to be further involved in future global teaching opportunities. However, lessons learnt from their experiences only served to solidify and improve current teaching practices such as ensuring:

- Adequate financial support and budgeting.
- A comprehensive situational analysis is conducted on the host country prior to engaging with them.
- Adequate facilities or at least attachment to facilities in developed countries for clinical exposure since developing countries usually do not have adequate facilities.
- Adequately trained persons are recruited to participate in projects.
- Succession planning through pairing of juniors with seniors in these projects.

A study that was conducted by Bodycott (2012: 252) which explored good practices in TNE in China, shared the same viewpoints as the findings of this study and state that if programmes are to be delivered across borders, they should not only take into account the cultural and linguistic sensitivities of the receiving country, but ensure the following:

- Appoint the same course coordinator for both traditional learning and distance learning.
- Appoint the same lecturer to teach in both modes of learning.
- Using the same textbooks, collections of readings and other core material for both face to face learning and distance learning.
- Using the same learning objectives for assessment for both modes.

The author also stresses the importance of each of the partnering institutions providing clear statement of principles and responsibilities of each party, ensuring that critical aspects of program delivery are understood prior to commencement.

5.3 CATEGORY 2: GRADUATE RESPONSES

5.3.1 Theme 1: The distance factor between teacher and student

The effectiveness of TNE is directly related to the extent to which the facilitator is able to empower the students and mentors to meet the clinical outcomes. In this theme, the relationship of the TNE students with the facilitator was challenged by physical distance, which resulted in negative feelings as a result of being cut off from the facilitator. The findings of this study revealed that the physical distance between the facilitator and the student was a major problem, as online sessions were not the same as face to face contact. Opportunities for spontaneous interaction with the teacher or facilitator were limited. Despite having comprehensive tutorial materials which were designed to assist the student achieve his or her outcomes, gaps persisted. Teimourtash, Shakouri and Teimourtash (2014: 135-137) state that with increased distance in learning between the educator, bridging of communication should be typically mediated by media that not only facilitates delivery of instructional interaction to occur, but also enables effective and satisfying access to learning resources. Some of these resources can include podcasts, e-mail, video or telephone conferencing and telephone calls and paper based communication in the form of study guides, tutorial material and letters (Moleki 2008: 120).

In the weaker student, the increased physical distance between educator and student can become a challenge and can leave the student less confident, less self-directed and needy of more contact with the facilitators or mentors. Arunasalam (2013: 47) therefore, suggests that, the level of emotional disturbance varies from individual to individual, or student to student and is based on their previous experiences, preparation of the new environment and their expectations of TNE programs.

Madakane (2011: 116-117) agreed that in most transnational universities, geographical separation, size differences and structures can pose difficulties, but structures should be in place to allow those involved in transnational programs to actively work to achieve a sense of belonging in students and staff alike. It was also noted in a study by Daniel, Kanwar and Uvalic-Trumbic (2005: 8) that in order to bridge the distance gap between learner and educator a range of open source learning and management systems that support eLearning were effectively utilized. The same study revealed that teachers and institutions around the world created and shared learning materials and courses for use on cross border platforms. This combination of expanding connectivity and the growing reservoir of open educational resources provided a conduit between teacher and student.

5.3.2 Theme 2: Learning opportunities

In nursing, theory and practice are married to each other and involves lifelong learning. Integration of theory and practice is considered inseparable in nursing and the knowledge gained from nursing education will only be of benefit to the student once practiced in the clinical setting under direct guidance from the facilitator of educator. Lifelong learning in nursing relates directly to quality care and gaining updated relevant knowledge and skills (Searle, Human and Mogotlane 2009: 355). Decisions to provide offshore or cross border teaching needs to be carefully made with strong recognition of the needs of students 'learning opportunities and knowledge of additional support measures to ensure high quality teaching and support.

It was noted in this study that with TNE, preceptors and mentors are identified as key persons with regards to learning opportunities as they are experienced clinicians who provide individual guidance to a less experienced nurses. The main objective in assigning students to the preceptor in clinical practice is to bridge the gap between the reality of the workplace and the idealism of an academic environment or putting it simply- to integrate theory and practice. With TNE, there is the added challenge of insufficient mentorship or preceptorship, in the absence of the educator. Supervision, teaching and assessment of students during clinical placement sometimes does not match course or program requirements (Moleki 2008: 123). The author also states that in nursing education, application of knowledge that requires expert skills of decision making, clinical problem solving and effective reasoning skills, is vital and opportunities for developing in these areas of expertise can occur with application of theory to practice under the guidance of learning opportunities.

Perrin (2015: 1) looks at knowledge in distance learning as a network and learning is a process of exploring this network. The network that the author refers to is a network consisting of people, books, websites, programs and databases connected by internet, intranet or direct contact. This learning opportunity or network is a must for any TNE student. In a study conducted in America that examined the differences in learning and teaching strategies in the outcomes of student nurses' performance, it was reported that, collaboration with, or a chance to work with peers and the presence of diverse ways of learning, such as simulation and case-based learning, were confident and displayed an overall increase in achievement levels of nursing competencies (Nicholson 2010: 116). This was contrary to what the participants in the current study experienced, as it was reported by the participants in this sub-category felt frustrated at times because they expected their preceptors to be knowledgeable about course content and expected clinical nursing outcomes. Frustration also resulted due to the conditions under which they were working and lack of learning opportunities.

5.3.3 Theme 3: Support structures

Whilst TNE programs, include diversified, race-groups and cultures, responses from participants in this study clearly demonstrated the differences in coping strategies of individuals. These were often related to adjustments and adaptations when faced with different situations in a new environment with new people. According to Arunasalam (2013: 47-48), adjustment and adaptation require a conscious learning process as initial emotions and thoughts of students learning from foreign nationals or learning in a foreign place can generate responses that usually result in 'flight or fight' reaction. The author also adds that although people may adjust quickly over time, these differences allows the student to become accustomed to the ways of the foreign land and tend to embrace new opportunities and knowledge.

In this study, the common issues that were troubling to the graduates were transportation, miscommunication, and lack of transparency when it came to resources, poor mentorship and learning material. A study conducted by O'Neill (2012: 19), shows similarities with Masters' degree students that engaged in studies of a cross border nature. Challenges experienced by them related to language barriers to learning, housing and logistics. According to the published CHE 2014/2015 annual report (CHE 2015), specific criteria were laid down for program accreditation. It was also noted in this publication that policies needed to exist for the proper management and maintenance of library resources, library research and computing facilities and learner development for both, on and off campus students. This report also mandated that these policies should be integrated into the institution's financial plan (CHE 2015: 28-29).

Another goal of the CHE as stated in the above report was to monitor the state of higher education, including publishing information and the convening of conferences, seminars and workshops on developments in higher education. Agreeing with these criteria is Knight (2008: 13) who emphasizes that sending countries have a direct responsibility and vested interest in ensuring the quality of the academic offering for TNE students. The main

reasons adequate structure and support mechanisms are necessary are to ensure that students and foreign partner institutions are protected from low-quality service providers and that they have a relevant and high-quality educational experience. These criteria were in keeping with participants' responses in this study, as the loop-holes in the TNE program were attributed to legalities and accreditation issues surrounding the program delivery.

Another study conducted in United Kingdom by Middlehurst and Woodfield (2004: 36), that discussed the regulations and impact of TNE programs on students, found that many students who experienced difficulties with time management due to new and foreign learning and teaching cultures had to attend individual student counseling sessions to learn to manage their time more effectively. The authors in the above study also concluded that other support structures like having an English and communication module as part of the curriculum assisted with them overcoming language barriers to learning as well as having mentorship programmes whereby older students guided the newer ones with theory and practice. These initiatives were put in place by the governing parties of the partnering institutions

5.3.4 Theme 4: Group cohesion

Although the graduates in this study were skilled, knowledgeable it was fair from their responses to assume that a positive and allowable climate between fellow students allowed for a positive and creative learning climate. Burnett (2008: 119-121) revealed that job satisfaction can be considered from a global perspective, such as the feelings and emotions perceived by the individual employee based on work experiences and one of them is group cohesion. It was further stated that these positive environments were excellent for gaining experience and building confidence and competence in students.

Participants in a study conducted by Lephalala (2006: 95) agreed that they stayed on in their workplaces or study groups because of the positive influence their peers had on them. Another study by Teimourtash, Shakouri and Teimourtash (2014: 142) urged readers to think of TNE as an

'opportunity' model rather than a 'deficit' model, as distance learners bring a wealth of experience, abilities, resources and learning encounters to each other that can only serve to enrich their learning. Mdakane (2011: 33) explored student satisfaction amongst higher education learners and the findings indicated that students' satisfaction is not only influenced by the quality of the programs offered to them or communication between lecturers or facilitators, but by the support that students received from each other. The study revealed that the relationship between students may range from strictly cultural to a highly relational bond, but bonding and empathy were important factors in the context of higher education relationships and when students engaged in a relationship, they bonded with each other and this resulted in a unified disposition towards a desired goal.

5.4 CATEGORY 3: RECORD REVIEWS

5.4.1 Focus area 1: Conceptual issues of TNE

Quality service delivery of transnational nursing education can be conceptualized in both traditional and contemporary terms. Traditionally and according to Chilean studies conducted by Villanueva (2012: 155), higher education institutions value the idea of excellence and exceptionality and tend to pursue this excellence through mechanisms such as student achievement, examinations and utilisation of standards used in more well established higher education systems. However, it was noted in the same study that these approaches are more student centred and tend to respond to the country's social, economic needs, in a national context that re-defines the concept of quality education provision. Research findings in the current this study reflects that, institutional vision, mission and philosophies define TNE provision. Findings from documentation that was reviewed in this study, has revealed that academic programs are hoped to assist students achieve academic excellence, meet internationally recognized standards, and function effectively in their personal and professional lives.

Findings from a study conducted by McBurnie and Ziguras (2007: 60), that examined cross-border education and capacity building between countries such as Greece and Malaysia, correlate with these findings and further state that education across continents should be a process of integrating an international/intercultural dimension into the teaching, research and service functions of the institution that is reflected in institutional records. A study conducted by Burnett (2008: 30) reveals that it was worrying that very little has been written on the rationale related to the benefits of the import and export of education services, worldwide and stated that it was important to review TNE practices through a global lens and see how collaborative practice mechanisms were introduced and executed at international and national institutional levels of service providers. Examples of these mechanisms could be identified as institutional support, governance models, shared operating resources, supportive management practices and working culture mechanisms. Nguyen (2012: 25) also concluded that processes such as communication strategies, conflict resolution policies, environment facilities, space and design of TNE programs was considered a vital part of the TNE documentation process and since higher education has many characteristics, public policy always wants to seek to determine some of these characteristics for certain performance expectation.

5.4.2 Focus area 2: TNE monitoring and evaluation processes

The essential issue in any TNE program is the issue of quality assurance. Quality assurance goals form the basis of the quality standards that an institution sets and will help convince students and other stakeholders of the quality of the delivering your institution and its programs (van Gaalen 2010: 3). Often standards surrounding the following areas are detailed in institutional records:

- Monitoring, assessment and delivery of TNE.
- Curriculum and programmes.
- Student learning and teaching practices.

From this study, it was evident that evaluation strategies cross border monitoring processes, curriculum design, learning and teaching practices and outcomes were adequately discussed.

5.4.3 Focus area 3: Contextual issues

All reviewed institutional records showed that a very optimistic and colorful picture painted. None of the internal or external factors that posed a possible challenge to the student or program delivery was mentioned. According to Havukainen and Ikonen (2013: 81), who explored transatlantic dual degrees in nursing in their study, all candidates participating in these programs need to be informed of possible challenges such as differences in educational systems, government policies, cultural differences and other legalities. Costs of program and the nature of delivery were highlighted by some international universities and evidence from a report that focused on the factors that determined the demand for TNE by Adam (2001: 43) clearly indicates that this is of vital importance for effective delivery of TNE. The report further highlights that the following important factors should be made available in course literature to all stakeholders to allow for transparency:

- Brand name of the educational provider.
- Value-added from the programme.
- Reputation, quality and perceptions of the programme.
- The national/international recognition of the programme.
- The convenience and nature of delivery and education provision.

Some universities promoted their course in their prospectus by using feedback from previous students. Others called for highly motivated and enthusiastic persons wanting to broaden their travelling experiences. This correlated with a study conducted by Czanderna (2013: 143) who found that personality characteristics, completion of academic requirements and a willingness to participate as team player should be ingrained in the prospectus that serves an important 'pull' factor. There appeared to be variations in the information gathered from records and gaps and inconsistencies in the type of

information relayed to stakeholders did exist due to a lack of clear guidelines and rules governing the TNE programs.

5.5 DISCUSSION OF THE CURRENT STUDY FINDINGS IN RELATION TO THE OBJECTIVES OF THE STUDY

The discussion of results in this section concentrates on the four objectives that the researcher identified at the beginning of the study towards achieving the aim of the study. These objectives were to:

- Explore the views of academics/ graduates regarding TNE experiences.
- Determine best operating practices in the provision of TNE nationally and internationally.
- Identify functional deficits and challenges related to facilitation of TNE nationally and internationally.
- Develop TNE guidelines that will meet the human, social, economic and cultural needs of the service provider and the student.

5.5.1 The views of academia / graduates regarding TNE experiences

In order to gain insight regarding national and international standards of cross border nurse education, the researcher interviewed academic leaders of other international and national nursing educational institutions who had been involved in the facilitation and delivery of TNE. The interviews afforded the researcher a view on how nursing education was delivered as well as received between the partnering institutions and countries. According to the results of the study, several factors had an impact on the service delivery of TNE. Factors such as poor transparency between stakeholders, legal barriers and red tape, logistical setbacks and lack of facilities and resources were common feedback from the two types of interview samples used in this study.

It was noted in the current study that a sense of general dissatisfaction seemed evident in all the interviewees responses, with regards to the teaching methods that control and deliver information on a need to know basis. Their outlook promoted analytical thinking processes, but the question

that arose was, did these nursing students prefer the TNE teaching style that focused on a self-directed type of learning and one that fostered independent learning that required questioning, critical and reasoning skills or did they require learning through face to face contact? The general consensus amongst participants was that the culturally constructed status of being a nurse, hierarchy, financial resources, human resources and time implications failed to offer the opportunity or support for the application learning and teaching in the transnational process.

Similar challenges have been reported in a study conducted in Malaysia where it was noted that those, that were interviewed outlined a conflict between their assumptions and expectations of TNE programs and the assumptions and expectations of the TNE academics involved in facilitation thereof (Arunasalam 2013: 166). The study also revealed that there were disparities between western and Malaysian pedagogic and professional values and clinical practices, which impacted negatively on program delivery and in achieving its outcomes. Whilst responses from a Chinese study on TNE found administrative support dissatisfying, the language barrier to learning was cited as a huge stumbling block. Some were disappointed in the lack of cultural training of educators, which they felt was necessary and should have been offered. Participants stressed that knowing Chinese language skills would make a better teacher in China (Nix 2009: 164).

5.5.2 International and national best operating practices in the provision of TNE

The second objective was to determine best operating practices in the provision of TNE. TNE calls for transnational control. The question that the current study intended to answer was: 'How does the institution currently ensure best practices when facilitating TNE?' Transparency and parity of treatment of all TNE endeavours must be the goal. National systems cannot have any firm basis to compare standards with those of TNE provision if nursing education institutions are not transparent about their provision. National and international authorities as well as higher education institutions

involved in transnational nursing education should act in these circumstances with a view to quality assurance. Looking at the question of TNE from the student's perspective, they required a fully recognised qualification, good courses and value for money. In summary, examples of 'good practice' recommended by participants were:

- The adoption and implementation of standards and guidelines that would include matters of recognition, transparency, accreditation, cultural and academic autonomy, convergence and divergence.
- The implementation of consumer protection must be put in place with clear information and codes of practice.
- All programs should be expressed in terms of learning outcomes and levels of achievement as this clarifies their nature and application.
- The increasing awareness by all relevant parties in lieu of accreditation.

A European study by Evans and Stevenson (2011: 17) agree with these findings and state that all national and international bodies in the education sector should adopt a balanced attitude towards the facilitation and delivery of TNE. The study also concludes that national and International priorities can complement each other rather than oppose each other. The actual and potential advantages associated with TNE are significant and its import and export should be encouraged as a vehicle to improve access, widen participation, enrich the nursing curriculum, and expand choice and flexibility amongst partners.

5.5.3 Identification of functional deficits and challenges related to facilitation of TNE nationally and internationally

Knight (2004: 3) summarises it very aptly when she states that internationalization is a catalyst for globalisation. This is because internationalization of education, prepares students for living in a more interdependent, connected and globalised world. The above author further states that with this internationalization of education, comes cross border delivery together with its multitude of challenges. Factors such as lack of information, accreditation processes, and regulatory setbacks are just some of

the common issues that surfaced continuously during the data collection process. Stemming from this, it should be noted that the contemporary world is a transnational one and a transnational world is not about the disappearance of rules and order. Rather, what appears striking about our times is the increasing scope and breadth of regulatory and governance activities of all kinds. The proliferation of regulatory activities and networks leads to an explosion of rules to aid with the re-ordering of our world. Organizing and monitoring activities should articulate with regulation and represent other important dimensions of contemporary governance of TNE.

Middlehurst and Woodfield (2004: 30-37) agree that in order to overcome the functional deficits of TNE, authorities, and institutions together with international bodies should disseminate clear and 'transparent' information to all students about what to look for when considering education provided by a transnational provider. It was also noted in the same study that assuring the quality of education provision is a fundamental aspect of gaining and maintaining credibility for programs, institutions and national systems of higher education worldwide as the increasingly borderless terrain for education brings with it a myriad of issues relating recognition of credit and qualifications, quality assurance of providers and accreditation of provision. However, an African study conducted by Okoli (2013: 12-16) that explored cross border education experiences in Sub-Saharan Africa, recommended that these educational programs are sustainable in Africa and less developed countries, only if greater attention is paid facilitation and institutional strengthening of the partner institutions and which would lead to training of more personnel at the same subsisting cost. The author also added that, the joint education courses in every partner institution should be accredited by relevant bodies and effort should be made to standardize the course curricula, training facilities and calendar with quality assurance in all partner institutions for accreditation purposes and to facilitate student exchange programmes.

The researcher in the current study found that participants viewed matters such as; sufficient information on the status of the institution; its accreditation; the recognition (national/international) of the programme of study and any rights to practice conveyed by the qualification as pertinent information that should be conveyed to all stakeholders. It was based on these premises from the current study that, governments have a responsibility to raise public awareness in this area and that states need to review their national legal frameworks to ensure they take account of transnational education and their modes of delivery. Other measures to assist TNE courses seeking official recognition should be encouraged in home countries or host countries. It should also be noted that where national or institutional quality assurance bodies exist they are an effective means of TNE control and where they do not exist they should be created. It is therefore, recommended that such bodies should assume a responsibility for imported transnational nursing education and this should take the form of:

- Monitoring the activities of all TNE stakeholders such academia, students, administrators of the program.
- Liaison with TNE stakeholders, with a view to problem identification and problem solving.

5.5.4 TNE guidelines that will meet the human, social, economic and cultural needs of the service provider and the student

It is evident from the findings of the current study that although, there were a few positive findings related to participants' experiences with TNE, a solution was needed to address the challenges and gaps identified to administrate and facilitate the successful implementation of cross border nurse education. The majority of these factors were quality assurance related. The others were participant specific factors, mostly established from the responses received. The presence of these factors makes it necessary that transnational nursing educational guidelines, be developed, and based on the identification of current best operating practices, both nationally and internationally.

It is concluded from the findings of a study conducted by Nguyen (2012: 80) that TNE providers must be sensitive to the needs cultures of the communities in which they operate. This process should be assured through consultation with all stakeholders such as the national and local policy makers and administration, employers and students. Co-operation with local higher education providers should be favoured. The study also supports the ideology of having clear goals and guidelines laid down for the provision of TNE programs. The author also felt that education in a country is one of the most vital components for growth and development and just like as other forms of education, TNE should contribute to the development of democracy and citizenship. Therefore, academic freedom and freedom of research, quality, equality and diversity have to apply to TNE programs and institutions and should be entrenched in its guidelines.

Burnett (2008: 177) emphasises that, the complex and shifting landscape of internationalization of education, makes managing internationalization strategies extremely challenging. The strategies appropriate for educational characteristics need to be planned and should focus on themes that fit with each university's vision. Therefore, strategies or plans are needed to guide efforts in this area in a coherent fashion. The author also explains that although there appeared to be a world of opportunities in these types of projects, limited resources posed a setback. Making informed and creative choices about internationalization, with a clear sense of the interplay between risks and benefits, opportunities and imperatives, obstacles and resources, requires unique skills and vision and can only be accomplished with prescribed guidelines. Even a study conducted in Ethiopia that used two higher education institutions as case studies, revealed that there was a definite need for guidelines that would assist in determining practice with academic provision (Gebrehiwot 2015: 220). According to the same study, the level of support and institution provides is determined by many factors and one of them being the set guidelines that should be followed.

In a study that addressed TNE issues in New Zealand, Ziguras (2003:93-95), explains that having guidelines related to TNE delivery will cover transnational strategies when selecting offshore partners, drafting of written agreements, curriculum development, teaching and teaching and learning support structures. It should also provide a links to many detailed resources showcasing good practice that can be used by providers in developing their own internal processes for the TNE program delivery.

Similar situations where there was a need for TNE guidelines have been observed in countries like New Zealand. Providers of off-shore education in New Zealand support the implementation of guidelines for TNE programs and are adamant that regulation control are two operative words, when dealing with TNE. The regulatory framework governing New Zealand education providers operating overseas is set out in a comprehensive report and resource guide and kit. The aim of this guide is to complement the legal requirements by setting out international standards for quality provision of TNE and drawing on the international literature to provide accounts of good practice (Ziguras 2007: 7).

Similarly, the European Association for International Education report by Van Gaalen (2010: 15) concluded that the concepts of quality and of quality assurance in relation to internationalization of education, has a huge role to play and is linked to adherence to standards and guidelines. The above report also revealed that, having quality assurance guidelines entrenched in in TNE has in many ways a much more important role internally in that it requires institutions to make conscious decisions regarding what they wish to offer, why and how and whether in practice they meet the goals they have established. It also helps them determine, whether these goals are the right goals. Based on the above evidence, the researcher in the current study believes that TNE can contribute to reaching its goals if implemented properly. The researcher therefore wishes to formulate guidelines in order to improve the processes of TNE facilitation, thereby ensuring accountability and

transparency of all stakeholders, whilst exposing the strengths and weaknesses of the program.

5.6 CONCLUSION

This chapter discussed the research findings with regard to TNE experiences by academic leaders and graduates. It also reflected on information from reviewing records of participating institutions and compared it to available literature. The discussion of findings was based on the related themes and subthemes and aligned it to the objectives of the study. These themes and sub-themes had been the basis of the research findings. These findings suggest that the formulation of the guidelines for the implementation of TNE is necessary. The next chapter will propose guidelines for implementation of TNE, taking into consideration the findings of the current study. These guidelines will be discussed through inductive and deductive reasoning from the conclusions made in the data findings.

CHAPTER 6 : GUIDELINES FOR THE IMPLEMENTATION OF TRANSNATIONAL NURSING EDUCATION

6.1 INTRODUCTION

In the previous chapter, the results of the current study were discussed and the positive aspects of TNE, as well as the gaps were highlighted and discussed as per participants' responses. Chapter 6 presents and proposes guidelines for the successful implementation of TNE nationally and internationally. The proposed guidelines were also the fourth and final objective and the main aim of the current study. These guidelines are based on the findings of the current study, intuitive insight of the researcher and recommendations from scholarly work as evidenced during the literature search.

6.2 PROCESS OF DEVELOPING THE GUIDELINES

The focus of the study in all the information that has been presented thus far has been related to the first three objectives of the study which were to:

- Explore the views of academics / graduates regarding TNE experiences.
- Determine best operating practices in the provision of TNE nationally and internationally.
- Identify functional deficits and challenges related to facilitation of TNE nationally and internationally.

The findings in relation to these objectives guided the development of the proposed guidelines. The guidelines were formulated in relation to the ten major themes that emerged from the data analysis on the participant responses of TNE (Tables 3, 4 and 5). Both the academic and graduate

responses and information gathered from record reviews were taken into consideration during the guideline developing process.

6.3 APPLICATION OF THE CONCEPTUAL FRAMEWORK TO THE DEVELOPMENT OF THE GUIDELINES

Grove, Burns and Gray (2013: 41) state that a conceptual framework provides a rationale and structure that guides the development of the study. It also forms an understanding on which the study is based, enabling the researcher to link the findings of the study to the body of knowledge and conceptualize this in practice. It is also made up of propositions, sets of concepts and statements integrated into a meaningful configuration. Therefore, the first step in the development of guidelines in the current study was the consideration of the conceptual framework as outlined in Chapter 1. All the concepts in the framework were applied and adhered to, in order to provide structure to each guideline.

The conceptual framework of the current study and its concepts allowed for the proposed guidelines to be formulated. It allowed for a synthesis of best practices that could assist all stakeholders involved in the TNE process. The conceptual framework guided the formulation of guidelines by assessing the quality and relevance of TNE provided across borders. This information was provided through the process of data gathering, namely, the information gained from policy makers, NEIs, academic and graduates. The conceptual framework also indicated that, based on the research findings of the current study; recommendations in form of guidelines would be proposed.

6.4 PURPOSE OF THE GUIDELINES

In the proposed guidelines, TNE includes nursing education programmes that take place in situations where the teacher/educator, student, programs, nursing education institution/provider or course materials and content cross national jurisdictional borders. TNE may include nursing education by public or private institutions and can be rendered by profit or non-profit service

providers. It encompasses a wide range of modalities from face-to-face student teacher interaction in the form of students and educators travelling abroad and having satellite campuses abroad to having e-learning as a main means of programme facilitation.

The proposed guidelines address stakeholders in TNE who are nursing education institutions, academic staff comprising nurse educators and other nursing workforce planners, administrators or facilitators of TNE and nursing students involved in cross border programmes. These proposed guidelines have been formulated with the intention of assisting other relevant parties such as student bodies, quality assurance and accreditation bodies, academic and professional recognition bodies. Its aim is also to assist in providing direction and seeks to promote a shared trust and international cooperation between providers and receivers of TNE. By supporting and encouraging international cooperation and enhancing the understanding of TNE provision nationally and internationally, all stakeholders will be protected from low-quality TNE provision, disreputable providers and more emphasis will be placed on the development of quality cross-border nursing education programs, ensuring that they meet the human, social, economic and cultural needs. It should be noted that these proposed guidelines are not legally binding and stakeholders are expected to implement the guidelines as appropriate within their national and international context.

6.5 RATIONALE FOR THE GUIDELINES

According to Altbach and Knight (2007: 300), provision of transnational education is sometimes merely a commercial exchange and it is not uncommon for those involved in cross border projects to be uncertain about the social and educational merits of TNE programs. Poor quality TNE programs may be profitable in the short-term but are unlikely to be sustainable if they are likely to harm the reputation of the providers and recipients. Renowned scholar on transnational education, Altbach (2000: 5) agrees that this type of education does not necessarily contribute to the internationalization of higher education worldwide. The above author adds

that even though knowledge products are being sold across borders, there appears to be minimal exchange of ideas and long-term scientific collaboration between partnering institutions taking place.

There is therefore, a need for additional initiatives that can strengthen international cooperation and networking, and allow for more transparent information on procedures and systems of quality assurance, accreditation and the recognition of qualifications that encompass the delivery of TNE. Capacity-building should form an important part of the overall strengthening and coordination of national and international initiatives related to TNE and it is hoped that the implementation of these proposed guidelines in the current study, will serve as a first step in the capacity-building process. The quality of a country's educational system is not only key to its social and economic well-being, but it also serves as a determining factor, affecting the status of the country's' educational system at an international level. The formulation of guidelines for the successful implementation of TNE is an integral part of the TNE quality assurance system. The formulation of guidelines has therefore become a necessity, for engaging in delivery of TNE programs nationally and internationally.

6.6 RECOMMENDED GUIDELINES

According to the findings of the current study, attention needs to be paid to the concerns of the implementation of TNE. These concerns were highlighted in the form of themes as set out in tables in Chapter 4 (Tables 3, 4, 5). With all due respect to the individual role responsibilities, governance structures and divisions of the different nursing educational institutions and professional nursing bodies of each country and academia involved in TNE processes, the researcher recommends the following guidelines for the various stakeholders that engage in TNE. For the purpose of this Chapter, the proposed guidelines have been divided into subdivisions.

6.6.1 Guidelines for NEIs

These institutions also serve as a repository of nursing knowledge and transmit the accumulated knowledge to students through teaching and learning thus creating a knowledge economy. A knowledge economy in TNE necessitates higher levels of competencies in the workforce. Therefore, guidelines in this respect have been proposed in accordance with the deviances noted from record reviews during scrutiny of institutional processes and methodologies.

6.6.2 Guidelines for academia

Academic staff can be influential, if not responsible, in promoting TNE and its functional academic processes. They undertake the role of policy coordination in most nursing education systems. However, it has been acknowledged that for TNE transition to be successful persons involved in academic processes must possess the ability to reflect and find new applications of existing knowledge, or discover ways to combine existing stores of knowledge to assist with the 'export' of education and confront the real-world problems that exist in TNE. The proposed guidelines are aligned to the themes that emerged from data analysis in Chapter 4.

6.6.3 Guidelines for students

With TNE programs, it has been noted in the discussion of data in the current study that students embark on a 'quest for knowledge journey' when they enter the classroom not only wanting to learn career skills, but also to learn how to engage in reflective thinking, appreciating the value of cultures, understand the moral and ethical consequences of choices, and see the world through the lens of its respective and indigenous population and knowledge economies. This relies on accessing the correct information and knowledge of TNE processes. Successful attainment of qualifications will be a testament to having the proper support structures in place. In this context, it is recommended that the formulation of guidelines will assist in enhancing, national and international student outputs in TNE.

6.7 PROPOSED GUIDELINES FOR NEIs

Commitment to quality delivery of TNE by all providers is essential for its success. The active participation and contributions of academic staff in a NEI are factors that assist in making the projects workable and sustainable. NEIs are responsible for the quality as well as the social, cultural and linguistic relevance of TNE projects and the standards of qualifications provided in their name, no matter where or how it is delivered. In this context, it is recommended that all NEIs delivering cross-border nurse education pay attention to the following proposed guidelines in order to maintain quality and reliability of its programs.

6.7.1 Guideline 1

Ensure that the programs delivered are of comparable quality and that they also take into account the cultural and linguistic sensitivities of the sending and receiving country.

Transparency to this effect should be communicated to all stakeholders and internal and external quality management systems should be reviewed so that the competencies of stakeholders such as academic staff, administrators, and students are within prescribed policies of the professional and governing bodies related to TNE. By promoting TNE programmes that are comparable in standards to their home country to potential students through agents and ensure that agents take full responsibility to inform potential students of the facts.

6.7.2 Guideline 2

Ensure that the information and guidance provided by the NEI is accurate, reliable and easily accessible.

Provide accurate, reliable and easily accessible information on the criteria and procedures of external and internal quality assurance mechanisms that offer complete descriptions of programs and qualifications, preferably with

descriptions of the knowledge, understanding and skills that TNE entails. This will foster good institutional relations with other parties and allow for effective partnership collaboration.

6.7.3 Guideline 3

Cooperate and corroborate with quality assurance and accreditation bodies to facilitate the process of TNE by determining whether a qualifications meet basic nursing educational criteria and standards.

This will also allow for engagement in cross-border cooperation and networking with quality assurance and accreditation bodies. This cooperation should be pursued both at national and international levels. This can also be achieved by understanding international developments and challenges that can improve the professional expertise of fellow staff members and by being familiar with policies such as developmental policies, foreign cultural policies and education policies and disseminating knowledge thereof.

6.7.4 Guideline 4

Develop systems of internal quality and feedback systems that will serve to improve the delivery of TNE programs.

By international benchmarking of standards, criteria and assessment and monitoring procedures in other related cross-border programs, a special connection with partnering institutions and their respective academia can be established. Providing and receiving clear, accurate and accessible information on TNE criteria related to teaching and learning helps to foster good working relationships in understanding that all countries value and respect the inherent prestige of their respective educational systems.

6.7.5 Guideline 5

Share good practices by participating in networks and partnerships at national and international levels.

This helps facilitate the process of recognition by acknowledging each other's qualifications as equivalent or comparable. The purpose and functions of the educational systems of each of the partnering countries including its stance on funding of students, institutional programmes, responsible bodies and methodologies should be made transparent to each other. While respecting the diversity of the partnering institutions, a coordinated effort among the bodies of both sending and receiving countries is needed to tackle the challenges and dynamics of cross-border nursing education provision.

6.8 PROPOSED GUIDELINES FOR ACADEMIA

Commitment to quality by all academic staff providers is essential for the effective delivery of TNE. Active and constructive contributions of academic staff are indispensable as they promote quality as well as the social, cultural and linguistic relevance of TNE and the standards of qualifications it offers. Guidelines for all academia involved in TNE are imperative not only for the service delivery but also for those on the receiving end. The proposed guidelines in this context will serve to build on existing initiatives that facilitate and foster effective international collaboration and teamwork and at the same time allow for identification of barriers to TNE facilitation. This will ensure systems and processes are made more transparent and comparable to partnering country expectations in an attempt to overcome obstacles. The following proposed guidelines have been aligned to assist academia with TNE implementation.

6.8.1 Guideline 1

Ensure all persons participating in the TNE projects candidates are accurately and sufficiently informed of current legislation and governance related to TNE.

This guideline refers to all persons from the 'sending' and 'receiving' countries and includes all academic and administrative staff involved in TNE. Ensure that it is understood by all parties that TNE regulation is a mode of governance in the sense that it structures, guides and controls human and social activities and interactions beyond, across and within national territories. Admission requirements should be in line with the degree of complexity of learning required and teaching required in cross border educational programs such as adhering strictly to specified minimum entrance qualifications. Selection criteria should be explicit and indicate how they contribute to institutional plans for diversity and cultural awareness. The number of students selected for the programme should not exceed the capacity available for offering good quality nursing education, as the number of students selected takes into account the program's intended learning outcomes, its capacity to offer good quality education and the needs of the particular profession.

6.8.2 Guideline 2

Ensure information and communication channels are easily accessible to all NEIs, fellow academic staff and students who are participating in TNE programs.

Quality assurance and accreditation processes such as assessment guidelines, standards and processes should be clearly communicated to all stakeholders of TNE as this will assist with advice on the professional recognition of foreign qualifications whilst enhancing the mutual understanding of different systems of quality assurance and accreditation, transparency and consistency.

6.8.3 Guideline 3

Instil trust in and understand of the professional practice of partnering countries by networking with other professional bodies of partnering countries and institutions to assist with and improve qualification assessment methodologies.

These networks can serve as platforms to exchange information and good practice. All relevant parties should be involved in ongoing curriculum development and reviews in order to ensure all stakeholders are aware of current nursing education programs and its policies and guidelines. This will also ensure that TNE curriculum content is culturally congruent to the students' learning outcomes.

6.8.4 Guideline 4

Ensure that learning outcomes and competencies are culturally appropriate and accommodate the students' prior learning by developing and implementing assessment criteria that will assist in evaluation of existing qualifications to facilitate the recognition thereof.

This can be accomplished by ensuring that quality assurance and accreditation processes are consistent and fair in their adaptability and flexibility to changes and developments in cross-border nurse education provision. This may facilitate the process of assuring the quality of TNE programs delivered across borders while still respecting the value-systems entrenched within the receiving country's cultural identities.

6.8.5 Guideline 5

Internationalize knowledge resources by establishing and maintaining regional and international networks that can serve as platforms to exchange information and good practice.

By keeping updated on current and relevant information related to international and national nursing education partnerships, collaboration

between the professional bodies of the sending country and the receiving country will be strengthened. This will also ensure the accessibility of correct information to all concerned and help to enhance the international appeal of the nursing programme and faculty.

6.8.6 Guideline 6

Maintain an international presence of academia to facilitate collaboration with NEIs in other countries.

NEIs are increasingly examining the potential amongst interested partners to collaborate on joint research programs across the worldwide research and education landscape. Academia plays an important role in this respect as they are the ones who, in collaboration with NEIs, can generate ideas and create close links in the interest of research outputs. These research outputs can offer opportunities such as employment, recruitment and training for further students. This can have positive financial implications on partnering institutions, so can sustain the viability of TNE programmes.

6.8.7 Guideline 7

Participate in international nursing education and research.

This allows academia to familiarise themselves with international practice. Project leaders gain insights into the workings of NEIs of different countries, their structures, processes and methodologies. This allows for cooperation with partnering countries, and allows academia to use the knowledge they have acquired through active participation to generate synergistic effects for their own institutions. This also contributes to support and development of all stakeholders in TNE programs such as administrators, fellow nurse educators, technical support as well as students. Active participation in this manner also allows for adopting and adapting best operating practices such as piloting new models and frameworks in nursing education in terms of curriculum, financing and other legalities.

Table 6 provides a summary of proposed guidelines that address the emerging themes from academia responses and review of records.

Table 6: Proposed guidelines that address the emerging themes from academia responses and review of records

Themes	Proposed guidelines
Recruitment and selection processes in TNE.	<ul style="list-style-type: none"> • Ensure all persons participating in the TNE projects candidates are accurately and sufficiently informed of current legislation and governance related to TNE.
Regulation and control of teaching and learning outcomes.	<ul style="list-style-type: none"> • Cooperate and corroborate with quality assurance and accreditation bodies to facilitate the process of TNE by determining whether a qualifications meet basic nursing educational criteria and standards. • Develop systems of internal quality and feedback systems that will serve to improve the delivery of TNE programmes.
Support structures offered for academics and students involved in TNE	<ul style="list-style-type: none"> • Ensure that the information and guidance provided by the NEI is accurate, reliable and easily accessible. • Share good practices by participating in networks and partnerships at national and international levels. • Maintain an international presence of academia to facilitate collaboration with NEIs in other countries.
Challenges related to teaching and learning.	<ul style="list-style-type: none"> • Ensure information and communication channels are easily accessible to all NEIs, fellow academic staff and students who are participating in TNE programmes.
Cultural Care in TNE.	<ul style="list-style-type: none"> • Ensure that learning outcomes and competencies that are culturally appropriate and accommodate the students' prior learning by developing and implementing assessment criteria that will assist in evaluation of existing qualifications to facilitate the recognition thereof. • Ensure that the programmes delivered are of comparable quality and that they also take into account the cultural and linguistic sensitivities of the receiving country.
Best operating practices.	<ul style="list-style-type: none"> • Instil trust in and understand the professional practice of partnering countries by networking with other professional bodies of partnering countries and institutions to assist with and improve qualification assessment methodologies. • Internationalize knowledge resources by establishing and maintaining regional and international networks that can serve as platforms to exchange information and good practice. • Participate in international nursing education and research.

6.9 PROPOSED GUIDELINES FOR STUDENTS

Students are the direct recipients of cross-border nurse education, It is therefore the responsibility of all students participating in TNE projects to carefully scrutinize the information available and ensure it is given all due consideration during the decision-making process. In this context, it is recommended that students adhere to the following proposed guidelines in order to successfully participate in TNE ventures.

6.9.1 Guideline 1

Involve oneself as an active partner and a student at international, national and institutional level.

This includes the development, monitoring and maintenance of the quality provision of cross-border nurse education and takes the necessary steps to achieve this objective such as being fully orientated to the roles and responsibilities of an adult learner as this will help to maximize the benefits and limit the potential drawbacks of TNE learning and teaching.

6.9.2 Guideline 2

Ensure that as a learner, one is provided with clear, easily accessible information related to TNE.

Students need to have a good understanding of admission regulations, curricular contents and requirements, conditions of study, student mentoring, academic fees and the degrees or qualifications that is awarded on completion of the program. Access to this information allows potential students, who have different educational and cultural backgrounds, to assess the quality of the course or program that is offered, accreditation implications, status of the home university and recognition of qualifications.

6.9.3 Guideline 3

Increase the awareness as a student of the potential risks such as misleading guidance and information.

This includes having an understanding of low-quality provision of nursing education that can lead to qualifications of limited validity, and disreputable TNE providers. Awareness also guides a student to accurate and reliable information sources on cross-border nursing education. This could be accomplished by increasing the awareness of the existence of policies and procedures in the form of available literature from partnering countries and NEIs.

6.9.4 Guideline 4

Establish a list of frequently asked questions (FAQs).

This will encourage the capacity to ask appropriate questions when enrolling in cross-border nursing programs. This could be accomplished with the support and guidance of professional bodies and other TNE governing bodies such as the national nursing councils. These lists should include questions such as the recognition, accreditation, licensure and trustworthiness of the delivering institution and its qualifications. Answers to these questions should be sufficient to assure the student that the qualification that is to be obtained will be accredited by a trustworthy body and provider and if it will be recognized in the students' home country for academic and professional purposes.

6.9.5 Guideline 5

Respect the nursing education systems of the host country when participating in TNE programmes.

This can be achieved by sharing of good practices by interacting and networking on a national and international level with regards to learning and teaching outcomes. This can be accomplished by displaying and demonstrating a mature outlook such as scrutinizing all available information and giving sufficient consideration to it in decision-making process in overcoming TNE challenges, but at the same time engaging in constructive endeavours to ensure its positive outcome. Table 7 provides a summary of the proposed guidelines that address the emerging themes from graduate responses.

Table 7: Proposed guidelines that address the emerging themes from Graduate responses

Themes	Proposed guidelines
The distance factor between teacher and student.	<ul style="list-style-type: none">• Increase the awareness as a student of the potential risks such as misleading guidance and information.
Learning opportunities.	<ul style="list-style-type: none">• Involve oneself as an active partner and a student at international, national and institutional level.• Respect the nursing education systems, of the host country when participating in TNE programs.
Support structures.	<ul style="list-style-type: none">• Ensure that as a learner, one is provided with clear, easily accessible information related to TNE.• Establish a list of FAQs.

6.10 ANALYSIS AND EVALUATION OF THE GUIDELINES

The aim of the current study was to develop TNE guidelines that can be used as a tool for the integration of theory, research and practice to ensure that TNE delivery and facilitation satisfies the needs of all service providers and stakeholders. An additional aim was to describe the best operating practices that can assist in improving the present way these programs are being facilitated both nationally and internationally.

The proposed guidelines in the current study were subject to an appraisal process and it is hoped that the use of a guideline appraisal tool with pre-set criteria in this study, will serve to further enhance the credibility and the reliability of the proposed guidelines. The tool allows for the guidelines to be systematically assessed and compared using the same criteria and consisted of several quality criteria or items that assessed the extent to which each guideline met the criteria. Evaluation of these guidelines also allows the reader to draw judgment conclusions about their validity (Graham and Harrison, 2005: 213-214). The proposed guidelines in this study were evaluated for clarity, comprehensiveness, applicability, adaptability, credibility and validity.

6.10.1 Clarity

This criterion was utilised to ensure that the proposed guidelines are clear, logical and are justified with the appropriate recommendations. Clarity also confirms that the proposed guidelines are specific to the current study thus ensuring a link between the recommendations, literature search and the supporting evidence as per data analysis.

6.10.2 Comprehensiveness

The comprehensiveness criterion was used to ensure that the proposed guidelines address all aspects of the research problem in the current study, without any particular aspect being isolated from its context. These proposed guidelines were developed including individuals from all the relevant groups or sample.

6.10.3 Applicability

This criterion ensures that the proposed guidelines provide advice on how the recommendations can be put into practice. It also ensures that all the possible resource and monitoring implications for research participants have been considered.

6.10.4 Adaptability

This criterion is used to ascertain if the proposed guidelines can be adapted in different circumstances to address a research problem of a similar context. This study focussed on transnational nursing education and the proposed guidelines can be adapted to other types of transnational programmes.

6.10.5 Credibility

Adding to the credibility of the proposed guidelines is the fact that, the researcher is adequately and appropriately qualified in the context of the current study to formulate guidelines. It should be noted that, the formulated guidelines are evidenced based and are applicable to the target population and setting of the study.

6.10.6 Validity

Validity was ensured in the proposed guidelines as the researcher interpreted the available findings after data analysis to draw conclusions and discuss findings that assisted in the formulation of the proposed guidelines.

6.10.7 Rigour of development

Systematic methods were used to search for evidence as evidenced by the research questions that guided the study with the limitations of the body of evidence being clearly described. The rationale for the recommendations was clearly described. All risks and benefits related to stakeholders of TNE were considered to ensure that implementation of the proposed guidelines would have a significant and positive outcome.

6.11 CONCLUSION

This chapter gave a detailed discussion of the formulated guidelines pertaining to TNE. These guidelines were developed in an attempt to encourage all governing bodies to develop practices and principles that will

guide cross-border provision of nursing education, in cooperation with quality assurance agencies and relevant educational providers. The proposed guidelines may be best utilized; to promote capacity building for quality assurance at national and international level. Each of the proposed guidelines was also underpinned by evaluation criteria that offered understanding of its expectation. Chapter 7 will conclude the study, by reflecting on the findings, the strengths and limitations of the study, the personal journey of the researcher and suggest recommendations for future research in nursing education and practice.

CHAPTER 7 : SUMMARY OF THE FINDINGS, LIMITATIONS OF THE STUDY, RECOMMENDATIONS AND CONCLUSION

7.1 INTRODUCTION

In this chapter the summary of the research findings, the conclusions, limitations, recommendations for further research and evaluation of the study is presented. The overall objective of the study was to develop guidelines for the Implementation of TNE. This was accomplished by using a qualitative interpretive paradigm, where the role of the researcher as the co-creator of meaning in the individual's experiences became more valuable both in collecting and in analysing data. The interpretive paradigm sought to produce a descriptive analysis in providing a deep interpretation and understanding of cross-border or TNE. This tied in with the focus of this research, as its purpose was to explore perspectives and practises of NEIs, academia and graduates related to TNE. The enquirer in this study achieved this through the analysis and interpretation of the text to look for ways in which the participants made meaning of their experiences.

7.2 THE AIM AND OBJECTIVES OF THE STUDY

The aim of this study was to explore NEIs' perspectives and practices related to TNE as well as the graduates' experiences of TNE. The ultimate aim of the study was to develop the guidelines for the implementation of TNE in NEIs and to fulfil the aim of the study the following objectives were formulated:

- To explore the views of academics / graduates regarding TNE experiences.
- To determine best operating practices in the provision of TNE nationally and internationally.
- To identify functional deficits and challenges related to facilitation of TNE nationally and internationally.

- To develop TNE guidelines that will meet the human, social, economic and cultural needs of the service provider and the student.

7.3 CONCLUSIONS ON THE RESEARCH OF THE STUDY

Conclusions of the current study were drawn from the summary of the results of the study findings as well as the evaluation of the research methodology.

7.3.1 Conclusions on the summary of the research findings

Various challenges and opportunities have factored themselves into the rapidly expanding 'import' and 'export' of nurse education across borders. The difficulty of TNE provision appears to be augmented by the fact that TNE is often unregulated and is seen as a 'for profit' business venture between countries. This then allows TNE to stay outside the official and formal supervision of academic standards. In essence and stemming from the findings, the most concerns emerging from the expansion of TNE are regulation issues, quality assurance issues and incomplete recognition of qualifications. As a result of the various legislative, cultural and linguistic challenges between partnering institutions and countries, there appears to be a need for 'consumer protection'. Assurance of quality and standards of study programs provided through collaborative partnerships was found to have many gaps. This led to poor recognition of qualifications awarded through such 'transnational collaborative partnerships'.

It was also noted that the aggressive marketing of institutions that offer TNE programs was not always helpful or informative and may even have been misleading or deceitful. These problems also posed a concern for other stakeholders, like academic institutions and graduates who may have been misled into accepting non-recognized or false qualifications. The varying of quality assurance systems across 'borders' and the legal framework and 'red-tape' of host country sometimes created administration difficulties and delays such as completion of student registration documentation.

Challenges faced by all participants were similar in nature and included lack of teaching resources including textbooks, classroom space and mentors. This further limited teaching and learning strategies as outlined in the discussion of findings in Chapter 5. It was clear that further clarification was needed in making TNE education beneficial to all concerned. Collaborative arrangements related to TNE between partnering countries and between countries' professional bodies from both the receiving and sending institutions needs to manifest in its structural policies and protocol.

7.3.2 Conclusion on the objectives of the study

In conclusion, the current study addressed the objectives by exploring the views of academics and graduates regarding TNE experiences related to related to facilitation of TNE nationally and internationally. These allowed for identification of best operating practices in the provision of TNE nationally and internationally and at the same time assisted in identifying functional deficits and challenges of the TNE processes. Purposive sampling is defined by Polit and Beck (2008: 17) as a process whereby the researcher selects participants because of their characteristics and is based on the assumption that the researcher wants to discover, understand, and gain insight and therefore must select a sample from which the most can be learned. The sample that was utilized in this study focused on the practices and perspectives of South African NEIs. In order to draw a comparison between the South African TNE practices and perspectives and international best operating practices relating to TNE, other global academic leaders of nurse education organisations that had engaged in this type of education were purposively selected to participate in the study.

7.3.3 Theoretical assumptions

In research, the assumptions are embedded in the philosophical base of the framework or study, which influence the development and implementation of the research process. In this regard, it was assumed that the subjective reality of transnational nurse education could only be understood within the context

of the perspectives and practices of each participant or participating institution. The researcher in the current study kept an open mind and focused on the pre-set conceptual framework that was used to guide the study. As previously stated in Chapter 1, assumptions from the adult learning theories on interpretive paradigm perspectives that were used in this study were derived in response to the interaction with the research field that directed the thinking and activities thereof. By doing this, the researcher did not describe or predict the outcome or pre-empt any theory, thereby eliminating any researcher bias.

7.3.4 Data collection

A case study method of research was chosen for this study, as it helped to provide a true picture of institutional practices and implementation in the context of transnational nurse education. Thick descriptions, experiential understanding and multiple realities of TNE were gained with the use of this methodology. Two data collection strategies that are typically used in case study research were utilised in this study namely, interviews and record reviews. The aim of using multiple strategies in this study was to increase the validity of its findings in ensuring a thorough understanding of each case. Interviews, as method of data collection, captured the unique experiences of the interviewees. The semi-structured interviews were guided by pre-determined interview questions that were designed to address the research objectives. Both academics and graduates were interviewed using a similar method of the semi-structured interview. Manuals, brochures, guides and handbooks on transnational education that provided insight into institutional policies or processes were also used as methods of data gathering. This method also assisted in corroboration of participants' interviews and further helped to promote an understanding by the researcher into the institution's structures and processes.

7.3.5 Validity and trustworthiness of the data

Validity and trustworthiness of the data collected was achieved by sampling participants from both national and international settings. This maximised the opportunities for gathering data across the full range of TNE experiences. A pre-test of the data collection tools was conducted prior to the commencement of the main study, to test and refine the proposed tools. All participants were purposively sampled and the information was probed until data was saturated to ensure credibility of the study. This also ensured that there would be truth in the collected data and truth in the way the data was interpreted and reflected upon by the researcher. Minimal input by the researcher during interviews ensured that views expressed were those of interviewees and not influenced by the researcher as evidenced by the research findings. Credibility was also established by comparing the current study findings with other published literature. Transferability was promoted in this study by ensuring that an accurate description of the research process was given to the reader. The choice of research methodology was justified and detailed as per Chapter 3 and an adequate amount of data was collected to provide evidence of research findings in this study.

7.4 LIMITATIONS OF THE STUDY

The choice of sample population in this study was motivated by the fact that these persons had been actively involved in TNE projects. It was also identified during sample selection that these participants would have both, best access to data related to TNE and be in a suitable position to effectively discuss regulatory and service delivery issues surrounding TNE. Even though these participants provided their own informed opinions, they have limited access to data and knowledge. The phenomenon of TNE is rapidly evolving in modern day nurse education and can be termed as being multi-faceted. There were times during the data collection process where the issues surrounding TNE facilitation and delivery became highly sensitive during discussions as the effectiveness of professional body, governmental and NEI governance were questioned. With both international and nation participants' record

reviews, data on TNE provision was not readily available. It should be noted in this instance that the information gathered was not necessarily exhaustive as the researcher at times had to rely on web-based information. The researcher used a qualitative research design with emphasis on interpretation since the main aim was to explore and interpret the meaning of the views of academic leaders and graduates regarding TNE experiences. While this method was seen as suitable, it does however offer some level of generalizability. On a personal level the researcher kept a journal and recorded personal experiences of the research journey in terms of logistics, personal feelings and information gathered. Despite various other professional and personal role responsibilities, the researcher managed to focus on her goal irrespective of the feelings and the increased work load that was encountered.

7.5 RECOMMENDATIONS

The researcher in her capacity as a nurse educator considered this study to have contributed in a positive way to the existing body of nursing knowledge and nursing education, both nationally and internationally. The results and findings that emerged have clearly indicated that there is a need for further research on TNE matters. It should be noted that the study's aim was not to provide solutions to highlighted challenges and related issues but in identifying best operating practices and proposing guidelines. The following are the recommendations for further research, nursing education and practice and policy development.

7.5.1 Recommendations for nursing education and practice

It is worth noting that improving the status of the nurses and the nursing profession by increasing knowledge and skills that are going to allow the nurses to manage complex clinical situations may not necessarily equate to improving the standard of teaching and learning, unless implementation of this knowledge is directly addressed in its own right. Partnerships and collaboration in TNE appear to be the way forward in this century. This research provided a platform for academics and graduates to lend their voices

to promoting effective TNE delivery. The findings and lessons learnt identify key aspects to be considered by NEIs that intend to, or already provide, cross-border nurse programs. Careful selection of TNE programmes, staff and students can transform healthcare delivery approaches and ensure improvements in the provision of nurse education and patient care. The findings in this study are also relevant to all those engaged in international partnerships related to non-nursing cross border programmes offered at a tertiary institution. Having explored viewpoints and experiences of all stakeholders of TNE and identifying functional deficits of its delivery, as opposed to identification of best practices, the researcher suggests the adoption of the proposed guidelines in order to assess their suitability in terms of value, meaningfulness and significance in the facilitation of TNE.

7.5.2 Recommendations for policy making

It is recommended that policies be formulated and implemented with regards to developing ways to modify assessment tasks so that they remain of equal weight, but meet the learning capabilities of the off-shore cohort. Further policies are recommended that will govern strict adherence to, specific guidelines for assessment strategies to avoid possible student and educator confusion. Policy making for student and educator/facilitator recruitment should ensure an analysis of teaching competence, namely, the teacher's capability to deal with the challenges of TNE teaching. Such an analysis should take into account the institution's general goals, the academic programs, student characteristics and the social context, together with its human resources policy and quality assurance programmes.

7.5.3 Recommendations for further research

The findings of this study suggest possible further research focusing on studies that explore the impact of nursing knowledge gained in cross-border education in clinical practice. This would provide valuable information of the long term impact on nurses and their clinical practice to inform the governing bodies and TNE providers.

A further point for research based on the findings is to explore the views of clinical facilitators and mentors related to their experiences with TNE students and clinical accompaniment. This will possibly help ascertain further challenges from a different perspective.

Another line of research that is directly suggested by my findings is to determine whether NEIs and partnering institutions have implemented the best operating practices that are offered to them. NEIs and partnering institutions had intentionally collaborated with TNE providers in providing these programs for the benefit of all stakeholders. Undertaking this research may identify strategies that would be suitable to ensure others are more accepting of changes proposed, planned and implemented.

7.6 RESEARCHER'S REFLECTION

Conducting this study in exploring the experiences of all those in TNE or cross border education projects taught the researcher many lessons. The researcher in her research journey learnt that TNE programmes were sometimes run as a 'for profit' business initiative. With some countries, it was run with the intention of increasing knowledge and skills of the nurse to allow these nurses to effectively utilize their clinical, research, leadership and teaching functions as well as to adequately prepare some students for recruitment in a foreign land. Whatever the reasons were, the researcher was heartened with the apparent dedication and motivation by educators and students alike. Educators appeared to modify content, teaching practices and assessment for a particular cultural context while maintaining high academic standards and being willing to understand and appreciate different cultural perspectives and customs. The fostering of teacher enthusiasm and mutual respect amongst academics at different locations that were seen as peers, each with their particular strengths to bring to the teaching, a collegial relationship that ultimately saw the nursing student as the most important stakeholder.

7.7 CONCLUSION

Academic investment by any country with TNE is a good long-term investment in nursing's future. However, it goes without saying that there is no 'one size fits all' approach as initiatives must be tailored to suit the teaching traditions, geographical and historical context in which they are being delivered. Success depends largely on the leadership and commitment of all individuals directly and indirectly involved in teaching and learning from partnering countries and institutions. Overall experiences of NEIs, academia and students allow for opportunity to come face-to-face with patients, colleagues, and health systems that are different from those normally encountered. This proves to be a powerful and positive way to profoundly influence the future of nursing education and practice nationally and internationally.

REFERENCES

- Adam, S. 2001. Transnational Education Project: Report and recommendations In: Knudsen, I. ed. Confederation of European Union Rectors' Conferences. England, March 2001. University of Westminster, 3.
- Altbach, P.G. 2000. The crisis in multinational higher education. *International Higher Education*, 21: 3-5.
- Altbach, P.G. and Knight, J. 2007. The internationalization of higher education: motivations and realities. *Journal of Studies in International Education*, 11(3-4): 290-305.
- Arunasalam, N.D. 2013. A defining moment: Malaysian nurses' perspectives of transnational higher education. Doctor of Education. University of Hertfordshire: United Kingdom.
- Austin, I. and Jones, G.A. 2015. *Governance of higher education: Global perspectives, theories, and practices*. Routledge.
- Baumann, A. and Blythe, J. 2008. Globalization of higher education in nursing. *The Online Journal of Issues in Nursing*, 13(2): 4-5.
- Baxter, P. and Jack, S. 2008. Qualitative case study methodology: Study design and implementation for novice researchers. *The Qualitative Report*, 13(4): 544-559.
- Bednarz, H., Schim, S. and Doorenbos, A. 2010. Cultural diversity in nursing education: Perils, pitfalls, and pearls. *Journal of Nursing Education*, 49(5): 253-260.

Beerens, E. 2008. The emergence and institutionalization of the European higher education and research area. *European Journal of Education*, (43)4: 409.

Bilsland, C., Nagy, H. and Smith, P. 2014. Planning the journey to best practice in developing employability skills: Transnational university internships in Vietnam. *Asia-Pacific Journal of Cooperative Education*, 15(2): 145-157.

Bodycott, P. 2012. The Influence and Implications of Chinese culture in the decision to undertake cross-border higher education. *Journal of Studies in International Education*, 16(3): 252-270.

Botma, Y., Greef, M., Mulaudzi, F.M. and Wright, S.C.D. 2010. *Research in health sciences*. Cape Town: Pearson Education.

Burnett, S.A. 2008. The impact of globalization on higher education institutions in Ontario. Doctor of Business Administration (Higher Education Management). University of Bath, United Kingdom.

Chetro-Szivos, J. 2010. Cross-border tertiary education: Challenges and opportunities for Intercultural understanding. *Journal of Intercultural Management*, 2(1): 5-22.

Council on Higher Education (CHE). 2015. *Annual Report 2014/2015*. Pretoria: Council on Higher Education. Available: http://www.che.ac.za/media_and_publications/publications/annual_reports
[Accessed on 30 March 2016]

Creswell, J.W. 2003. *Research design, qualitative, quantitative and mixed method approaches*. 2nd edition. Thousand Oaks, CA: Sage.

Creswell, J.W. 2007. *Qualitative inquiry and research design: Choosing among five approaches*. 2nd edition. Thousand Oaks, CA: Sage.

Czanderna, K.H. 2013. A qualitative study on the impact of a short-term global healthcare immersion: Experience in Bachelor of Science Nursing Students. Doctor of Philosophy. University of Kansas. USA.

Daniel, J. Kanwar, A. and Uvalic-Trumbic, S. 2005. Who's afraid of cross-border higher education? A developing world perspective. International network of quality assurance agencies in higher education. Available: <http://oasis.col.org> [Accessed on 28 October 2015].

De Beer, J., Brysiewicz, P. and Bhengu, B.R. 2011. Intensive care nursing in South Africa. *Southern African Journal of Critical Care*, 27(1): 6-10. Available: www.sajcc.org.za [Accessed on 28 February 2016]

Department of Higher Education and Training. See Republic of South Africa.

De Vos, A.S., Strydom, H., Fouche, C.B. and Delport, C.S.L. 2011. *Research at grass roots for the social sciences and human services professions*. 4th ed. Pretoria: Van Schaik.

Djelic, M.L. and Anderson, K.S. 2006. *Transnational governance: Institutional dynamics of regulation*. France: Cambridge University Press.

Djelic, M.L. and Anderson, K.S. 2009. Transnational governance: Institutional dynamics of regulation. *Development and Change*, 40(2): 396-397.

Erguvan, D. 2015. Transnational education in Turkey. *Journal of Educational and Social Research*, (5)1: 227.

Evans, C. and Stevenson, K. 2011. The experience of international nursing students studying for a PhD in the U.K: A qualitative study. *BMC Nursing*, 10: 11.

Gebrehiwot, Y.G. 2013. Towards more inclusive university curricula: The learning experiences of visually impaired students in higher education institutions of Ethiopia. Doctor of Education. University of South Africa

Graham, D.I. and Harrison, B.M. 2005. Evaluation and adaptation of clinical practice guidelines. *Evidenced Based Nursing*, 8: 68-72.

Grove, S.K., Burns, N. and Gray, J.R. 2013. *The practice of nursing research: Appraisal, synthesis, and generation of evidence*. 7th edition. St. Louis, MO: Elsevier Saunders.

Harden, R.M. 2006. International medical education and future directions: A global perspective. *Academic Medicine*, 18(12): 22.

Havukainen, P and Ikonen, T. 2013. Transatlantic dual degree program in nursing. *Laurea Publications*, 16. Available: https://www2.naz.edu/download_file/view/2733/1521/ [Accessed online 24 February 2016].

Herdtner, S.L. and Martsolf, D.S. 2001. Distance education: Pedagogy for psychiatric-mental health nursing. *Issues in Mental Health Nursing*, 22: 483-501.

Hussain, I. 2007. Transnational education: Concept and methods. *Turkish Online Journal of Distance Education*, 8(1): 168-169.

Joubish, M.F., Khurram, M.A., Fatima, A.S.T. and Haider, K. 2011. Paradigms and characteristics of a good qualitative research. *World Applied Sciences Journal*, 12(11): 2084.

Kehm, B.M. and Teichler, U. 2007. Research on internationalization of higher education. *Journal of Studies in International Education*, 11(3): 261.

Keok, C.B. 2005. An outcomes-based framework for assessing the quality of transnational engineering education at a private college. Doctor of Education, University of Southern Queensland.

Khamisa, N., Peltzer, K. and Oldenburg, B. 2013. Burnout in relation to specific contributing factors and health outcomes among nurses: A systematic review. *International Journal of Environmental Research and Public Health*, 10(6): 2214-2240.

Knight, J. 2004. Internationalization remodelled: Rationales, strategies and approaches. *Journal of Studies in International Education*, 8(1): 21.

Knight, J. 2008. Higher education in turmoil: The changing world of internationalization. Ontario Institute for Studies in Education, University of Toronto. Canada.

Kufoniyi, O. 2010. Cross-border education: Experiences and challenges: *Cross-border and Capacity Development Conference*. Ibadan, Nigeria. Available: www.isprs.org/.../Kufoniyi/KufoniyiTCVI2010SymposiumPaper [Accessed on 23 November 2015].

KwaZulu-Natal Department of Health. 2015. *Strategic Plan 2015-2019*. Pietermaritzburg: Department of Health.

Kylmänen, P. and Spasic, A. 2010. Assessing competence in technical skills of theatre nurses in India and Sweden: Evaluation of an observational tool: The Red Cross University College. Sweden.

Lancrin, S.V and Pfothner, S. 2012. Guidelines for quality provision in cross-border higher education: Where do we stand? Organization for Economic Co-operation and Development Conference. Directorate of Education. France Available: <https://www.oecd.org/edu/research/49956210.pdf> [Accessed on 17 July 2015].

Lephalala, R.P. 2006. Factors influencing nursing turnover in selected private hospitals in England. Master of Arts-Health Studies. University of South Africa

Madakane, M. 2011. Student satisfaction in open distance learning in a BEd Hons program. Doctor of Philosophy in Learning and Teaching. North-West University. Potchefstroom.

Martin, M. and Stella, A. 2007. *External quality assurance in higher education: making choices*. Paris: Lineal Production. Available: <http://www.iiep.unesco.org/en> [Accessed on 9 March 2016].

McBurnie, G. and Ziguras, C. 2007. *Transnational education: Issues and trends in offshore higher education*. London: Routledge, Taylor and Francis Group.

Meyer, C.B. 2001. A case in case study methodology. *Field Method*, 13(4):3 29-352.

Meyer, S.M., Naude, M., Shangase, N.C. and van Niekerk, S.E. 2009. *The nursing unit manager: A comprehensive guide*. 3rd edition. Cape Town: Heinemann.

Middlehurst, R. and Woodfield, S. 2004. The role of transnational, private, and for-profit provision in meeting global demand for tertiary education: Mapping, regulation and impact. Commonwealth of Learning and UNESCO. University of Surrey, United Kingdom.

Miliszewska, I. 2008. *Hybrid learning and education*. Springer. Australia.

Mishra, S. 2007. Quality assurance in higher education: An introduction. Doctor of Education. National Assessment and Accreditation Council of India. India.

Moleki, M.M. 2008. Critical care nursing students' experience of clinical accompaniment in open distance learning (odl): a phenomenological perspective. Doctor of Literature and Philosophy. University of South Africa.

Mupakati, L. 2012. Reparation and inequality through different diasporas: The case of the Zimbabwean Diaspora in Leeds, UK and Limpopo Province, South Africa. Doctor of Philosophy. University of Sheffield.

Nguyen, T. 2012. Internal quality assurance in Vietnam's higher education: The influence by international projects, evaluation and assessment. Master of Science in Education Science and Technology. University of Twente.

Naghdi, M.B. 2015. International student retention in the Australian higher education setting: The role of internationalization of the curriculum. Doctor of Philosophy. RMIT University. Melbourne. Australia.

Nicholson, A.C. 2010. Comparison of selected outcomes based on teaching strategies that promote active learning in nursing education. University of Iowa. USA.

Nix, J.V. 2009. SINO-U.S transnational education - "buying" an American Higher Education Program: a participant observation study. Doctor of Philosophy. Washington State University. USA.

Njuguna, F.W. and Itegi, F.M. 2013. Cross-border higher education in Africa: The Kenyan experience. *Journal of Emerging Trends in Educational Research and Policy Studies*, 4(5): 752-759.

Okoli, N. 2013. Issues and challenges in cross-border in higher education: The Sub-Saharan (SSA) experience. *American Journal of Educational Research*, (1)1: 12-16.

O'Neill, M. and Chapman, A. 2015. Globalization, internationalization and English language: Studies of education in Singapore. *Education Research and Perspectives*, 42: 1-24.

Parker, V. and McMillan, M. 2007. Challenges facing internationalization of nursing practice, nurse education and nursing workforce in Australia. *Contemporary Nurse, Nurse Recruitment & Retention*, 2(24): 28-136.

Penner, J.L. and McClement, S.E. 2008. Using phenomenology to examine the experiences of family caregivers of patients with advanced head and neck cancer: Reflections of a novice researcher. *International Journal of Qualitative Methods*, 7(2): 92-101.

Perrin, D.G. 2015. Discipline versus motivation. *International Journal of Instructional Technology and Distance Learning*, 12(10): 1.

Polit, D.F. and Beck, C.T. 2008. *Nursing research: Generating and assessing evidence for nursing practice*. 8th edition. Philadelphia, PA: Lippincott Williams and Wilkins.

Polit, D.F. and Beck, C.T. 2012. *Nursing research: Generating and assessing evidence for nursing practice*. 9th ed. Philadelphia: Lippincott Williams and Wilkins.

Powar, K.B. 2003. Indian Higher Education in a GATS-control Regime: Looking for a pathway in the haze of uncertainty. *Higher Education Policy and Practices*, 1(1 & 2): 1-9.

Qiang, Z. 2003. Internationalization of higher education: Towards a conceptual framework. *Policy Futures in Education*, 1(2): 250.

Republic of South Africa. Department of Higher Education and Training. 1997. Higher Education Act 101 of 1997. Available: <http://www.dhet.gov.za/> [Accessed on 4 May 2016].

Republic of South Africa. 2005. Nursing Act No 33 of 2005. Pretoria: Government Printers.

Ritchie, J. and Lewis. J. 2003. *Qualitative research practice: A guide for social science students and researchers*. Thousand Oaks, CA: Sage.

Rumbley, L.E, Altbach, P.G and Reisberg, L. 2012. *Internationalization within the higher education context. The Sage Handbook of International Higher Education*. Thousand Oaks, CA: Sage.

SANC. See South African Nursing Council.

Searle, C., Human, S. and Mogotlane, S.M. 2009. *Professional practice: A Southern African perspective*. 5th edition. Johannesburg: Heinemann Publishers.

Seaton, L.P. 2010. Cultural care in nursing: A critical analysis. Doctor of Philosophy. University of Technology. Sydney, Australia.

Shenton, K.A. 2003. Strategies for ensuring trustworthiness in qualitative research projects. Newcastle upon Tyne: Northumbria University.

Shaffer, A.F and Dutka, J.T. 2013. Global mobility for internationally educated nurses: Challenges and regulatory implications. *Journal of Nursing Regulation*, 4(3): 11-16.

South African Nursing Council. 2012. *Policy guidelines regarding registration of foreign nurses and/or foreign qualifications with South African Nursing Council*. Pretoria: SANC.

Tesch, R. 1992. Qualitative research: analysis, types and software tools. London: Falmer.

Teimourtash, M., Shakouri, N. and Teimourtash, M. 2014. An appraisal look over distance learning through a new medium: A panacea. *International Journal of Linguistics and Communication*, 2(2): 135-137.

Terre Blanche, M., Durrheim, K. and Painter, D. 2006. Research in practice: Applied methods for the social sciences. 2nd edition. Cape Town: University of Cape Town Press.

Thomas, D.R. 2003. *A general inductive approach for qualitative data analysis: School of population health*. New Zealand: University of Auckland.

Van Gaalen, A. 2010. *Internationalization and quality assurance*. EAIE professional development series for international educators. Amsterdam. Available: <http://nvao.com/> [Accessed on 19 February 2016].

Villanueva, N.N. 2012. Assuring quality in Belizean higher education: A collective case study of institutional perspectives and practices. Doctor of Philosophy. University of Nebraska.

Watt, D. 2007. On becoming a qualitative researcher: The value of reflexivity. *The Qualitative Report*, 12(1): 82-101.

WHO. See World Health Organisation.

Wilson, M. 2002. Transnational nursing programs: Models, advantages and challenges. *Nursing Education Today*, 22(5): 417-426.

World Health Organization (WHO). 2013. *Transforming and scaling up health professional education and training: Policy brief on accreditation of institutions for health professional education*. WHO: Geneva. Available: <http://www.who.int/en/> [Accessed on 31 March 2016].

Yeravdekar, V.R and Tiwari, G. 2014. Internationalization of higher education in India: How primed is the country to take on education hubs? *Procedia-Social and Behavioural Sciences*, 157: 172.

Yin, R.K. 2009. *Case study research. Design and methods*. 4th edition. Thousand Oaks, CA: Sage Publications.

Zezeza, P.T. 2012. Internationalization in higher education: Opportunities and challenges for the knowledge project in the Global South. *Vice-Chancellors Leadership Dialogue*. Loyola Marymount University, Los Angeles, California.

Zhou, Y. 2014. The experience of China-educated nurses working in Australia: A symbolic interactionist perspective. *Plos One*, 9(9): 2.

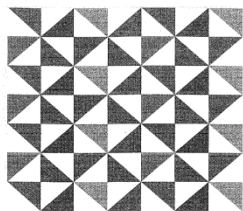
Ziguras, C. 2001. Educational technology in transnational higher education in South East Asia: The cultural politics of flexible learning. *Educational Technology & Society*, 4(4): 8.

Ziguras, C. 2003. The Impact of the GATS on transnational tertiary education: Comparing experiences of New Zealand, Australia, Singapore and Malaysia. *The Australian Educational Researcher*, 30(3): 93-95.

Zwanikken, P.A.C., Peterhans, B., Dardis, L. and Scerpbier, A. 2013. Quality assurance in transnational higher education: A case study of the tropEd network. *BMC Medical Education*, 13(43): 2.

APPENDICES

Appendix 1: University Ethics clearance



Institutional Research Ethics Committee
Faculty of Health Sciences
Room MS 49, Mansfield School Site
Gate 8, Ritson Campus
Durban University of Technology

P O Box 1334, Durban, South Africa, 4001

Tel: 031 373 2900

Fax: 031 373 2407

Email: lavishad@dut.ac.za

http://www.dut.ac.za/research/institutional_research_ethics

www.dut.ac.za

28 January 2015

IREC Reference Number: **REC 84/14**

Mrs V Naidoo
359, Road 701
Montford
Chatsworth
4092

Dear Mrs Naidoo

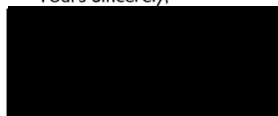
Guidelines for the implementation of Transnational Nursing Education: A collective case study approach of institutional perspectives and practices

The Institutional Research Ethics Committee acknowledges receipt of your notification regarding the piloting of your data collection tools.

Please note that you may now proceed with research on the proposed project.

Kindly ensure that participants used for the pilot study are not part of the main study.

Yours Sincerely,



Prof J K Adam
Chairperson: IREC

Appendix 2a: Permission letter to Institution A

359, Road 701 Montford
Chatsworth, Durban
4092

Professor XXXX
XXXX University

Dear Prof XXX

Re: REQUEST FOR PERMISSION TO CONDUCT STUDY

I am presently registered as a Doctoral Student with the Durban University of Technology in the Department of Health Sciences, Nursing program. The proposed title of my research study is Guidelines for the implementation of transnational nursing education: A collective case study approach of institutional perspectives and practices.

The purpose of this study will be to provide evidence related to transnational nursing education programs and explore the impact of the program on all stakeholders such as educational leaders, service delivery providers and graduates in terms of bringing about change in knowledge, skills, attitudes and practices. Furthermore, this study hopes to provide valuable insight into the process of capacity building through the transfer of expertise and methodologies from one nursing educational context into another. The data for this study will be collected with the assistance of interviewing academic leaders such as rectors or vice rectors, deans or vice deans, directors of international nursing education projects, college heads, heads of departments of nursing faculties, lecturers and nurse educators, and graduates; who were engaged in nurse education transnationally. The researcher therefore seeks to provide a rich description of participants' perspectives regarding concepts of transnational nursing education and its practices.

I hereby request your permission to conduct a study at your institution. Your support and permission to conduct the study at your institution will be appreciated. The supervisor of this project is Prof M.N. Sibiya and could be contacted on 031-373 2606, nokuthulas@dut.ac.za.

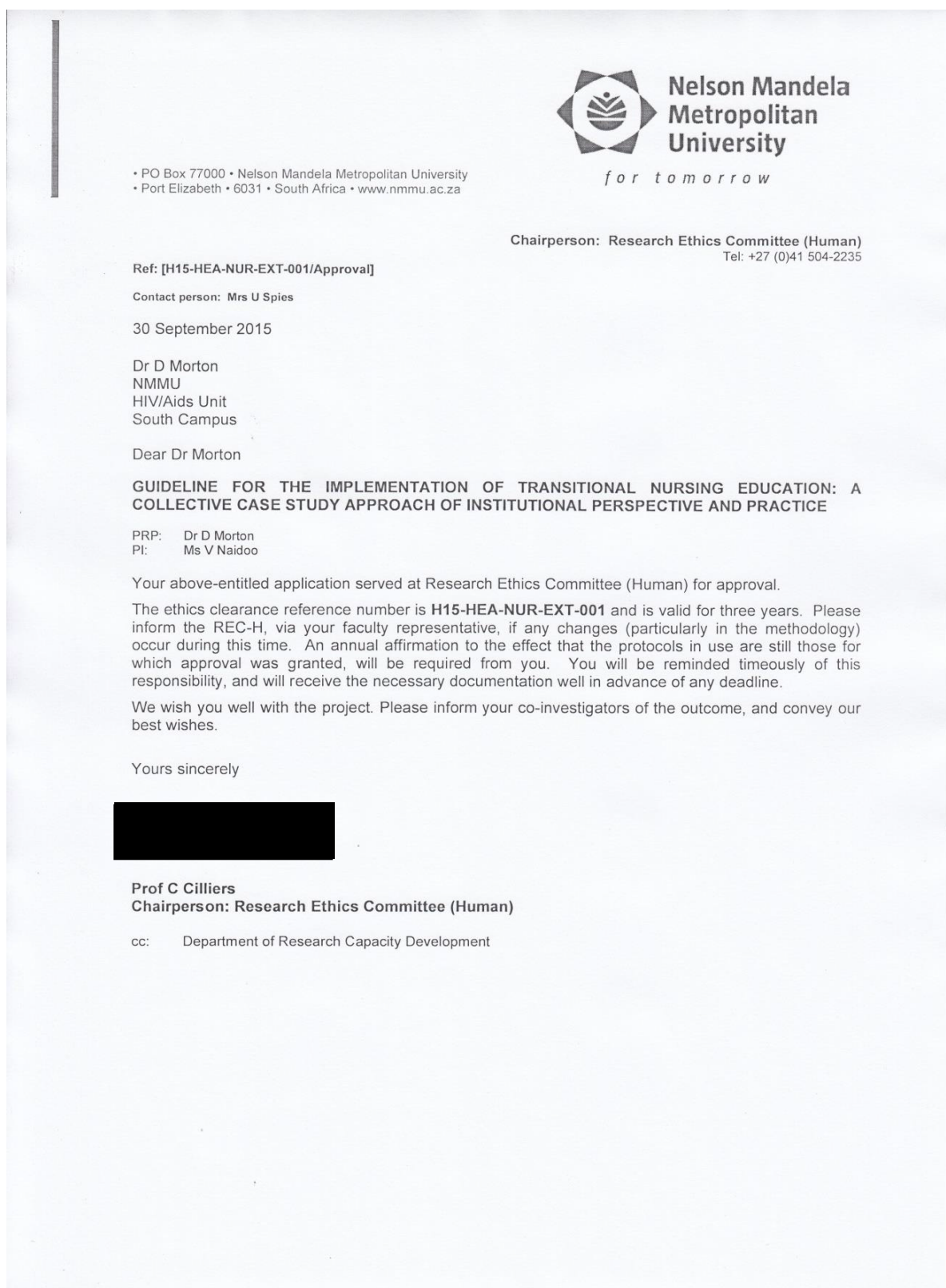
Yours Sincerely

Ms V Naidoo

Email: Vasie.Naidoo2@lifehealthcare.co.za

Tel: +27 82 519 1550 Tel: +27 31 373 2606

Appendix 2b: Approval letter from Institution A



Appendix 3a: Permission letter to Institution B

359, Road 701 Montford
Chatsworth, Durban
4092

Professor XXXX
XXXX University

Dear Prof XXX

Re: REQUEST FOR PERMISSION TO CONDUCT STUDY

I am presently registered as a Doctoral Student with the Durban University of Technology in the Department of Health Sciences, Nursing program. The proposed title of my research study is Guidelines for the implementation of transnational nursing education: A collective case study approach of institutional perspectives and practices.

The purpose of this study will be to provide evidence related to transnational nursing education programs and explore the impact of the program on all stakeholders such as educational leaders, service delivery providers and graduates in terms of bringing about change in knowledge, skills, attitudes and practices. Furthermore, this study hopes to provide valuable insight into the process of capacity building through the transfer of expertise and methodologies from one nursing educational context into another. The data for this study will be collected with the assistance of interviewing academic leaders such as rectors or vice rectors, deans or vice deans, directors of international nursing education projects, college heads, heads of departments of nursing faculties, lecturers and nurse educators, and graduates; who were engaged in nurse education transnationally. The researcher therefore seeks to provide a rich description of participants' perspectives regarding concepts of transnational nursing education and its practices.

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Yours Sincerely

Ms V Naidoo

Email: Vasie.Naidoo2@lifehealthcare.co.za

Tel: +27 82 519 1550 Tel: +27 31 373 2606

Appendix 3b: Approval from institution B



28 June 2015

To whom it may concern,

Dear Sir/Mam

REGARDING TOPIC:

GUIDELINES FOR THE IMPLEMENTATION OF TRANSNATIONAL NURSING EDUCATION: A COLLECTIVE CASE STUDY APPROACH OF INSTITUTIONAL PERSPECTIVE AND PRACTICE

We refer to the letter dated 9 March 2015 asking for permission to conduct research studies at the Max Institute of Medical Excellence(Max Healthcare), New Dehli, India.

We would like to confirm that Mrs Vasanthrie Naidoo - I D No 6708040209084) has herewith been granted permission to conduct studies based on the above topic and said location and want to wish the researcher every success in her studies.

Please note the following:

1. The Max Institute of Medical Excellence will not be responsible for any costs incurred by the researcher or any participant thereof.
2. The researcher is expected to provide feedback on the findings on completion of the study.

Yours faithfully

Mr Thomas Cherian

Training officer/Clinical Instructor

1, 2, Press Enclave Road, Saket
New Delhi, Delhi 110017, India
Phone: +91 11 2651 5050

Max Super Speciality Hospital

A unit of Balaji Medical and Diagnostic Research Centre (Registered under the Societies Registration Act XXI of 1860)

Regd. Office: 108 A, Indraprastha Extension, Patparganj, Delhi - 110092

Phone: +91 11 4303 3333 Fax: +91 11 2223 5563

www.maxhealthcare.in

Appendix 4: Letter of Information and consent



Thank you so much for agreeing to participate in this study.

Title of the Research Study: Guidelines for the implementation of Transnational Nursing Education: A collective case study approach of institutional perspectives and practices

Principal Investigator/s/researcher: Mrs V. Naidoo, M Tech: Nursing.

Co-Investigator/s/supervisor/s: Prof M.N. Sibiya, D Tech: Nursing (Supervisor); Associate Prof R. Bhagwan, (Co-supervisor).

Brief Introduction and Purpose of the Study: Transnational education includes all types of higher education study programs, or sets of courses of study, or educational services in which the learners are located in a country different from the one where the awarding institution is based. South Africa has seen large number of its' nursing education institutions facilitate health sciences programs off-shore in the last decade. The purpose of this study will be to provide evidence regarding transnational nursing education programs and explore the impact of the program on all stakeholders such as educational leaders, service delivery providers and graduates in terms of bringing about change in knowledge, skills, attitudes and practices. Furthermore, this study hopes to provide valuable insight into the process of capacity building through the transfer of expertise and methodologies from one nursing educational context into another.

Outline of the Procedures: The study will include face-to-face interviews as well as online Skype interviews with one or more academic administrators at each of the participating nursing education institutions, collection and review of institutional documents related to facilitation and delivery of transnational nursing education .The study also seeks to interview, graduates who have undergone transnational nursing education. Specific dates will be determined based on your availability.

Risks or Discomforts to the Participant: There are no foreseeable risks or discomforts posed to you or your employing institution.

Benefits: It is hoped that this study will ccontribute evidence as to whether existing programs in transnational nursing education are effective or not as well as stress the importance of having guidelines to aid the process.

Reason/s why the Participant May Be Withdrawn from the Study: Your participation is voluntary, you are under no obligation to participate, and may withdraw from the study at any time without penalty or prejudice.

Remuneration: You will receive no monetary or any other type of remuneration.

Costs of the Study: You will not be expected to cover any costs towards the study.

Confidentiality: All data collected will be strictly private and confidential and will only be used for the purpose of the study. No information will be linked to the participant or the participating institution.

Research-related Injury: The study does not pose any risk of injury to you as a participant or the participating institution.

Persons to Contact in the Event of Any Problems or Queries: Please contact the researcher Mrs. Vasanthrie Naidoo on 082 519 1550, Prof Sibiya, my supervisor on 031-373 2606 or the Institutional Research Ethics administrator on 031-373 2900. Complaints can be reported to the DVC: TIP, Prof F. Otieno on 031 373 2382 or dvctip@dut.ac.za.

Appendix 5a: Interview guide for academic leaders

The following questions and topics will guide the interview with:

- What are your current roles and responsibilities in your institution?
- Tell me about your institution? (*What is its mission, purpose, goals?*)
- Your institution has been involved with cross border or transnational nursing education. What was your role in this venture?
- What were the main aims of this project related to your institution?
- How do you believe your institution links its mission and purpose to facilitation of these cross border programs?
- (*Compliance with standard criteria, achievement of learning, teaching outcomes*).
- What internal measures were in place to assist and support staff and students from the host country?
- What external measures are in place to assist and support staff and students from the host country?
- What would you recommend as additional factors that can be put in place to assist and support staff and students engaging in transnational nursing education?
- How does your institution evaluate these cross-border programs with regards to faculty growth?
- How does it support professional development (*nursing education and research*)?
- How does your institution recognize cultural, economic and social awareness of the partnering institution and the learner?
- How does your institution assess and support transnational student learning?
- (*What processes, instruments, standards or feedback material used?*)
- What constraints did you encounter in this type of teaching/learning/administration?
- (*Logistical, geographical, historical, political, economic, cultural, social, personal?*)
- How can we ensure further best operating practices with regards to TNE?

Appendix 5b: Interview guide for graduates

The following questions and topics will guide the interview with graduates of a transnational nursing program:

- What are your current roles and responsibilities in your profession?
- When were you involved with cross border or transnational nursing education?
- Were you made aware of the main aims of this project?
- What were your thoughts on the recruitment and selection processes?
- What measures were put in place to assist and support students from the host country?
- Do you consider these cross-border programs to be adequately evaluated and how does it support your professional development?
- What challenges did you encounter during this type of teaching/learning or administration?
(*Logistical, geographical, historical, political, economic, cultural, social, personal*)
- What would you recommend as additional factors or best operating practices that can be put in place to assist and support staff and students engaging in transnational nursing education?

Appendix 5c: Record review guide

Due to the case-study approach of the research, documents will be an important part of this study. They will assist the researcher to understand policies and processes which are not observed and also supplement and verify information obtained from interviews. Only non-confidential documents will be reviewed.

The researcher would like to view, where available, the following documents that would be useful to collection of information in this study:

- Documents that describe the mission, purpose, or goals of the institution involved in transnational nurse education.
- Documents that describe how the institution manages quality assurance as a whole with regards to transnational nurse education.
- Documents that describe how the institution develops and reviews courses and programs and curricula facilitated cross border.
- Documents that describe how the institution evaluates and supports professional development of staff involved in transnational teaching.
- Documents that describe how the institution assesses and supports transnational student learning and teaching.
- Other electronic or hard copies of the above documents for collection by the researcher at the time of the institution visit.

Appendix 6a: An example of the interview transcript of the academic leader

Interviewer	Good Morning Prof and how are you?
Participant	I am well and how are you?
Interviewer	Well, I am fine just a bit under the weather, I am recovering from the flu.
Participant	Oh, sorry to hear that my dear–take care of yourself.
Interviewer	I will ,thanks Prof, I just want to say thank you for agreeing to participate in this study, I know you have a busy schedule, so once again thank you for giving me some of that time. I also understand that you have received all the other information; do you have any other questions?
Participant	No, no, It seems clear for now, but I will askif ever I need clarification as we proceed.
Interviewer	Thanks once again...I really appreciate and value your input. What are you currently doing and what may I ask is your professional role and links with the university
Participant	You mean what I do now?
Interviewer	Yes....what is your current roles and responsibilities in your institution?
Participant	I am retired but still enrolled as an Honorary Associate Professor and still participating in the university activities. My role has ranged from facilitation of both classroom and clinical learning, administration of programs and finally Head of School of Nursing.
Interviewer	And with regards to student research.....
Participant	I also supervised student research at all levels predominantly post graduate research. I also did independent research all of which had to be published making my role to be a researcher and author or scholar. Finally I also did community engagement with local national and international organisations.
Interviewer	Please elaborate Prof.....what do you mean by community engagement?
Participant	I am currently the chairperson of the South African Nursing Council (SANC) and Honorary Associate Professor of the university of KwaZulu-Natal.
Interviewer	Ok....tell me about your institution
Participant	What would you like to know?
Interviewer	Well..., what is its mission, purpose, goals?
Participant	Well, I know that the university strives be the Premier University of African Scholarship.
Interviewer	Hmmmand its mission.....

Participantto be truly South African university that is academically excellent, innovative in research.
Interviewer	OK.....
Participant	No...no...no, I am not finished...I must add that the university critically engages with society and is demographically representative. The university makes sure that it redresses the disadvantages, inequities and imbalances of the past.
Interviewer	Ok....
Participant	But one must also remember that any nursing school wants to be the best that they can. They want to promote excellence in teaching and learning through creative and innovative curriculum design and development, pedagogical strategies, and assessment.....and they want to make sure their practices are in accordance with the highest quality management principles.
Interviewerand does the learner feedback give you that indication?
Participant	We have a very diverse range of students and we have a student-centred ethos, providing students with curricula, teachers, infrastructure and support services designed around their needs and producing well-educated, competent, sought-after graduates here at present .But the challenge is when we going out there and are trying to maintain the same standards.
Interviewerand your choice for staff?
Participant	As an institution of choice we attract and retain academic and support staff of the highest calibre by creating an intellectual environment that fosters and stimulates academic life, and a climate of organisational citizenship in which all staff recognize and understand their role in ensuring the success of the university persons that are chosen to embark on these ventures, are experienced academics who have a vast amount of knowledge and expertise to support and grow students from across the world.
Interviewer	What about the management processes at the university
Participant	We try our utmost to establish and maintain efficient, effective management systems and processes that provide a caring and responsive service to meet internal and external needs in a pragmatic and flexible manner.
Interviewer	You mentioned that your institution has been involved with cross border or transnational nursing education. What was your role in this venture?
Participant	I participated in the Collaboration of Higher Education Nursing and Midwifery institutions in Africa (CHENMA) which later got sponsored

	and administered by NEPAD. I was also part of the team that developed and implemented the critical care nursing curriculum in Kenya, Tanzania, Eritrea, Rwanda, Seychelles and the UAE.
Interviewer	Ok....so you were involved in curriculum development in nursing ...?
Participant	Yes...and its implementation in Tanzania (Masters' Degree level), Rwanda (Masters' degree level) and Seychelles (Undergraduate level).
Interviewer	Gosh....that is so impressive.....
Participant	There was also involvement in the development of the curriculum of Nurse Anaesthetists program that they run in Rwanda and facilitation of the development of the curriculum for Advanced Midwifery in Namibia.
Interviewer	Well...you are certainly an authority on teaching nursing out of the country.
Participant	Well....not only the teaching aspect....I also participated in the SANC project ,where this was part of the World Regulatory Associations ahead of the World Health Assembly to inform the World Health Ministers' Assembly.
Interviewer	You mentioned in our prior conversations that, you have attended and presented at various national and international conferences....tell us about that...
Participant	Yes....oh so many but ...conferences like ICN Conferences have helped with benchmarking for the various health regulations like, competency frameworks, roles of the specialists, practice standards, etc.
Interviewer	Alrightnow coming back to transnational nurse education.....What were the main aims of this project related to your institution?
Participant	The main aim was development of post graduate nursing education in Africa and benchmarking in developed countries.
Interviewer	How do you believe your institution links its mission and purpose to facilitation of these cross border programs?
Participant	What do you meansorry I did not get that....
Interviewer	No Problem.....I mean...how your institution link its mission and vision to complying with standards and policies
Participant	Well.....Africa-led globalization and responsive community engagement
Interviewer	Please elaborate.....
Participant	Ok...you seeevery project undertaken or grant offered is supported based on the goals of the university. The expected role at the university is international involvement for academic growth like African scholarship.
Interviewer	And with regards to development of Nursing Education in other countries.....
Participant	Yes ...big...between countries there was always collaboration in

	education and research and research supervision
Interviewer	What internal measures were in place to assist and support staff and students from the host country?
Participant	Well...Study leaves provision for health care workers in other countries as well as scholarships from developed countries are secured. Others resources....hmm....Transport for clinical experience in other countries was fully covered and a school would be provided with library and laboratory facilities.
Interviewer	What about external measures?
Participant	Oh.... You see....teaching equipment such as the laptops; data projectors and books were provided to the schools that the university collaborated with within the African continent. Also....other things such as publication codes or cost centres were utilized for international travel and scholarly work. You must note that very competitive grants are provided for international work amongst nursing institutions.
Interviewer	What would you recommend as additional factors that can be put in place to assist and support staff and students engaging in transnational nursing education?
Participant	Possibility for attachment in the clinical areas in developed countries because the developing countries often lack facilities for clinical exposure such as advanced procedures like renal replacement therapy and cardiac and neurosurgery etc.
Interviewer	How does your institution evaluate these cross-border programmes with regards to faculty growth?
Participant	Programs are evaluated routinely per semester by students but mainly teaching The international work is incorporated in the performance management system of the university and also used as a criterion for promotion purposes.
Interviewer	How has all these national and international teaching supported your professional development
Participant	You mean ...where I am today...
Interviewer	Yes but specifically in nursing education and research?
Participant	Exposure internationally promotes growth in that one has to contextualize the projects and not just apply routine work from daily activities of the school. This promotes critical analysis of each country and adapting education accordingly. This has facilitated innovativeness and creativity.
Interviewerand your general experiences

Participant	Meeting people doing things differently assists one to adopt what is relevant and works in own context warranting critical analysis and evaluation of my experience outside my own country.
Interviewer	How does your institution recognize cultural, economic and social awareness of the partnering institution and the learner?
Participant	Well...we do a situational analysis first before a project is implemented in any country....this means that the curriculum is always adjusted and contextualized to the host country thereby recognizing their ways of doing things and the disease profile of the country. I...(clears throat), remember that I even had to use the familiar names used in the respective countries for my case studies to recognize their culture.
Interviewer	What about the research component?
Participant	You know....students that enrol full time in the university are encouraged to do research in their own countries to benefit their own countries...(sighs) we used and still do have foreign students on our campus...and they actually do quite well.
Interviewer	How does your institution assess and support transnational student learning?
Participant	Tests and examination (both theory and practical) are conducted as usual
Interviewer	What about stakeholder feedback.....?
Participant	The programs are evaluated by students and partners and compared to the initial situational analysis though this area has not been conducted very well ...but mind you....some of the cross-border projects have culminated in publications.....and conference presentations overseas....this is good growth for the student.
Interviewer	What processes, instruments, standards or feedback material are used?
Participant	The university has a standard instrument that it uses to evaluate modules and programs..... Other evaluation tools are developed depending on the aim of the project..... and it is usually collaborative.
Interviewer	What constraints did you encounter in this type of teaching/learning/administration?
Participant	Do you mean in general?
Interviewer	Well yes....and including logistical, geographical, historical, political, economic, cultural, social, personal challenges.....?
Participant	Teaching models are often a problem but our coming to the country prompted a lot of new developments, such as simulation laboratory in Rwanda, telehealth projects in Rwanda.....new books in the libraryLogistically transporting books to the host country is a nightmare. I

	lost books transporting them to Rwanda. The books that were transported to Seychelles arrived just before I finished the block.....Connectivity is often a problem.
Interviewer	What about technology for the students and any other support mechanisms?
Participant	When you come here, you will discover that research is the biggest thing that develops skills in collaboration, cooperation and liaison in group work amongst these students....sometimes technology is a setback....but students nowadays are sharp....sharper than the educator....(laughs).
Interviewer	Any other challenges....?
Participant	The weight of the books is another problem to an extent that one has to courier the books but they got lost in Rwanda....yes that's about it.
Interviewer	Very interesting....any personal challenges....?
Participant	Well... I had to pay for my pocket traveling to the UAE because the then Head of School would not support financially for this purpose yet the thickness of books differ in the various courses.
Interviewer	Anything else.....like other issues you encountered
Participant	Yes! Culture shocks amongst all are common, but with an educator who is reasonable and flexible in her approaches, this problem is very easy to overcome. As an educator we learn to be accepting of other cultures...and sometimes language issues are a problem but most students today do have some knowledge of the English language. But all staff that was chosen had to understand the goals of the university and as well as their roles as academia to ensure success of international ventures
Interviewer	How can we ensure further best operating practices with regards to TNE?
Participant	Definitely adequate financial support and budget and (laughs)...A comprehensive situational analysis of the host venue.
Interviewer	Why would you say that?
Participant	Adequate facilities or at least attachment to facilities in developed counties are important for clinical exposure since developing countries usually do not have adequate facilities. Having adequate infrastructure is vital for proper delivery of programmes. But this only comes with effective governance from both countries.....you see my dear....it's all good and well to be a part of these programs but to give off your best ,one has to abide by protocol and standards that dictate to transnational nursing programs in our country.
Interviewer	In all your experience, do you think the country actively participates in governance of these projects?

Participant	Sadly there is still a lot of work that needs to be conducted .Right now we are very junior compared to other continents who embark on this kind of nursing education. But we can improve. We just need to get our accreditation and quality issues sorted.
Interviewer	Other challenges.....?
Participant	Well...with any teaching program ,you need structures that guide you...you need standards, policies and guidelines.....more especially if you are doing it in another country....you see.... each country has its own politics and sometimes you find you also just get caught up in its red tape.
Interviewer	I am surebut how do these challenges affect the facilitator or teacher?
Participant	I would not say affect...I would use the word impact....and yes both in a negative and positive way. I also think that as an educator you have to be open-minded, flexible and adapt to situations.
Interviewer	Is there a skills mix with facilitators
Participant	Succession planning through pairing of juniors with seniors in these projects and also for promotion purposes. We need to grow our fellow colleagues.....and with these programmes, growth is a guarantee And that the biggest positive. Negative impact such as distance issues, liaising with students and red tape are workable.
Interviewer	I'm sure this type of projects leaves a lasting impression on the teacher
Participant	You see...when an educator teaches...the whole objective is to achieve the learning outcomes...and if that is achieved then the battle is won. But I must add that buy-in from other bodies such as regulatory and university governing bodies in terms of standards to guide the process is vital for delivery of any kind of education.
Interviewer	Prof, this brings me to the end I want say a huge thank you for your time and for sharing your views with me.
Participant	You are most welcome.....my dear....it was a pleasure.
Interviewer	Oh...the pleasure was all mine (<i>laughs</i>).....
Participant	All the best ...my dear....and every success with the study.
Interviewer	Thank you and all the best to you too.

Appendix 6b: An example of the interview transcript of the graduate

Interviewer	Good afternoon and how are you today?
Participant	I am fine mam, we all very finehow is everybody there?
Interviewer	Everybody is well, it's just very hot and sticky here at the moment.....but we are fine.
Participant	Ok mamhere we having lots of rain and some parts flooding also.
Interviewer	You remember I sent an email asking you for permission to be interviewed.
Participant	Ah....Yes mamI also read the information letter you sent.
Interviewer	OK ...do you have any questions before we start?
Participant	No mam not right now.
Interviewer	What are your current roles and responsibilities in your profession?
Participant	I work in the neuro ICU. We take care of medical and surgical casesall type of neuro patients
Interviewer	How long have you been working
Participantohsome 9 years in ICU now?
Interviewer	Where did you do your basic training?
Participant	In Kerala, mam.
Interviewer	What motivated you to leave your home town
Participant	We got the opportunity to further our education...its very limitedthere in Kerala...once we finish basic training we should find jobs elsewhere...besides...mamthe money is too less.
Interviewer	How did you hear of the nursing program
Participant	I had a batch mate who was in the hospital and he told me about it
Interviewer	So...you applied to do the course ...right
Participant	Correct.
Interviewer	Were you made aware of the main aims of this project?
Participant	During the interviewYes, we were told that because we were employees of this hospital ...they would pay us a salary and we would have a chance to study .They told us that they would arrange for us to go to South Africa and workwe did not have to pay for anything....because they were partners with the South African health service.
Interviewer	What were your thoughts on the recruitment and selection processes?
Participant	I always wanted to further my education and did not have the money .So when the opportunity came I grabbed it.... the advert said was to do ICU and Theatre training. It said that the teachers from South Africa would come over and teach us. I was getting excited that these foreign people were coming to give us lectures.
Interviewer	How did you feel after you got selected?
Participant	Very excited and sad. I knew I had to leave my home and family, but when you are working for such a big hospital group in India, you are very excited. It's like a dream for us nurse to be part of this hospital
Interviewer	What I measures were put in place to assist and support students from the host country?
Participant	What do you mean host mam...you mean this country.
Interviewer	Yes, I mean all of you that were taught in India by the South African educators.....how did your country assist you?
Participant	For now I would say giving us the opportunity to study under their name.

Interviewer	OK.....you think about it and we will look at this question later ...ok..... the type of programme that you did is also called a transnational program or cross border programme ...
Participant	Hmm.....ok
Interviewerright.do you consider these cross-border programmes to be adequately evaluated.... In other words did you read up on what these programs offered?
Participant	Well a few people from South Africa came two months before the course started and interviewed us.
Interviewer	OK....what information did you get from them.
Participant	They said only we will still work here and they will come from time to time and do the lectures. They said they will give us all the text books and help with accommodation.
Interviewer	Ok....we'll talk about that just now....er....how do you think doing the course has supported your professional development?
Participant	It has made me be ICU trained. Before ...then ...I was doing lot of things in the ICU without knowing why...then I became qualified and I could go all over the world because I now have the licence.....(laughs)
Interviewer	What challenges did you encounter during this type of teaching/learning or administration?
Participant	Oh.....many...many problems....
Interviewer	Please tell me about them.
Participant	We were a group of five batch mates staying together .because they could not help us find accommodation we came from far ... and the besides the rent was too high.....the hospital was taking out money every month from usmoney was very little mam....very little...we must send home for our parents and keep for ourselves....
Interviewer	What other issues you had?
Participant	We experienced lot....lot issues from getting our academic records from our previous institution.....eventually our facilitator had to contact the Heads of department and send through endorsements which hastened the process....some batch mates had to bribe the officials.....the other problem was we did not see our teachers for a long time sometimes...but we kept in touch on face- book.....but it was not the same.....but the peer mentors actually help when our teachers are not around.
Interviewer	What would you recommend as additional factors or best operating practices that can be put in place to assist and support staff facilitating or teaching the program?....in other words ...how can we make the whole process better.
Participant	Here mam....or from the outside country.....?
Interviewer	Well actuallyboth countries
Participantlike being told everything on orientation.....whether we are going to get jobs when we go to another country or whether we have to write another exams....we have a right to know this as we pay a lot of money for the courses....and the rules must be explained to us that time. They must also tell us the truth....mam about text books and travelling.....we didn't get text books...we saved and had one book for three people.
Interviewer	What would you recommend as additional factors or best operating practices that can be put in place to assist and support students?
Participant	They must have a proper venue and give writing material to studentsand if the lecturer is gone back homeother ones in our hospital can help with training....we had a struggle to get mentoring.

Interviewer	How do you feel now that the course is over?
Participant	I am so happy it is overI made lot of friends and now I am working in Canada and can earn money to send back home.
Interviewer	So...even though you had challenges....you have conducted well.
Participant	Yes mam....the ICU course opened doors for me.
Interviewer	Thank you for your time and for taking part in this study ...I really appreciate it.
Participant	Thank you...mam for this chance and good luck!
Interviewer	All the best.
Participant	Bye mam
Interviewer	Bye.

Appendix 7: Editor's certificate

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EDITING CERTIFICATE

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Doctoral thesis: **GUIDELINES FOR THE IMPLEMENTATION OF
TRANSNATIONAL NURSING EDUCATION: A COLLECTIVE CASE STUDY
APPROACH OF INSTITUTIONAL PERSPECTIVES AND PRACTICES**

I confirm that I have edited this thesis and all the references for clarity, language and layout. I am a freelance editor specialising in proofreading and editing academic documents. My original tertiary degree which I obtained at UCT was a B.A. with English as a major and I went on to complete an H.D.E. (P.G.) Sec. with English as my teaching subject. I obtained a distinction for my M. Tech. dissertation in the Department of Homeopathy at Technikon Natal in 1999 (now the Durban University of Technology). During my 13 years as a part-time lecturer in the Department of Homeopathy I supervised numerous Master's degree dissertations.

Dr Richard Steele

11 May 2016

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