



NSU 2015: National nursing student survey

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Summary:

This is the sixth national nursing student survey. The last survey was run in 2013. 1104 nursing students (whether NZNO members or not) from all schools around New Zealand responded to the 2015 NSU on line survey of nursing students.

The main themes this year related to student health and support, educational experience (especially on placement), and intentions following graduation.

Particular concerns this year included:

- ▶ There is *considerable* insecurity about the mismatch between the number of students, availability of placements (especially in Auckland), NEtP places and jobs.
- ▶ Some tensions exist too for overseas students: high fees, bullying, non-availability of NEtP and jobs / residency.
- ▶ Most students HAVE to work financially. Many are doing so in health care.
- ▶ Parents find juggling studying, placements, work and child care particularly hard.
- ▶ There is a range of satisfaction and dissatisfaction with the quality of the educational experience
- ▶ There were several calls for a consistent national curriculum.
- ▶ Dissatisfaction was expressed with courses with a high e-learning content in particular.

Limitations:

Surveys are prone to margins of error related to who chooses to respond, and the subjectivity of respondents, necessitating, as with all surveys, some caution with interpretation.

Method

The NZNO NSU student survey is slightly amended each time it is run in response to previous years' results, and particular topical issues. The survey was reviewed by the NSU delegate working group.

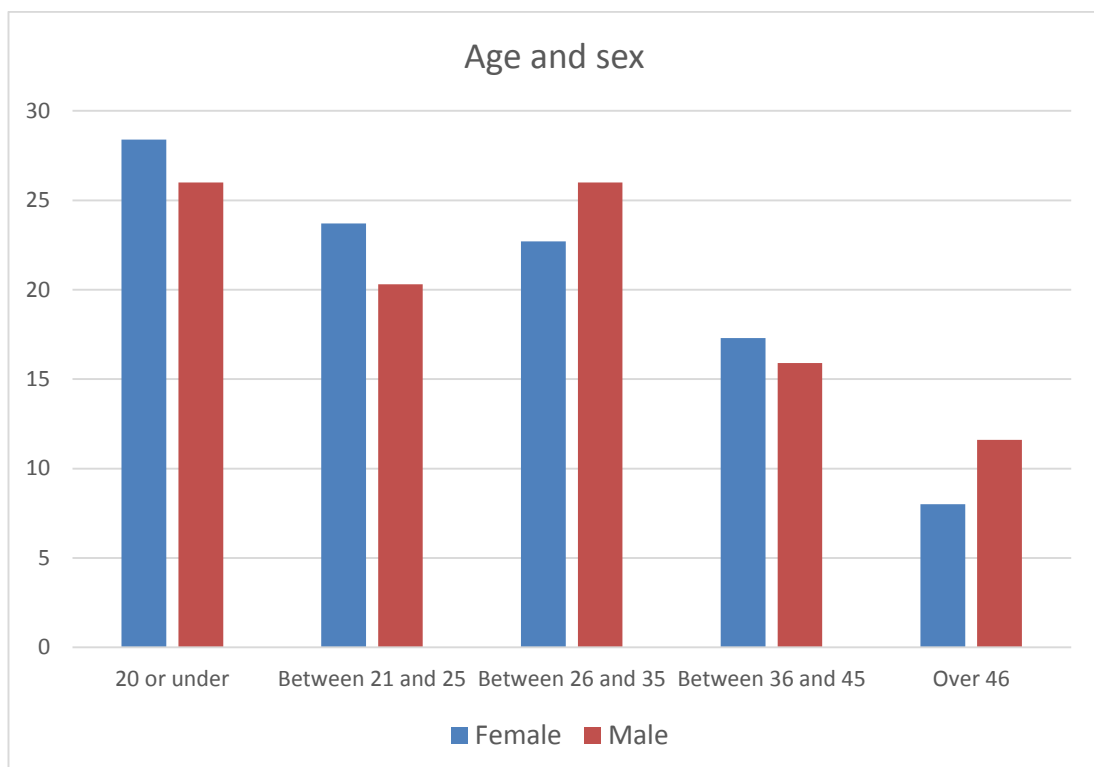
All NZNO student members were invited to participate via e-mail. Posters were also put up in all nursing schools, and on some nursing school electronic blackboards, inviting both NZNO and non NZNO nursing students to participate. Random prizes were available, drawn from e-mail addresses provided on completion of the survey, but with addresses permanently separated from the survey on first access of the data. 1104 valid responses were received by the end of the survey. This represents around 20% of those eligible to participate, though an accurate response rate is not possible to assess due to the multiple routes and the opening up of the survey to non-NZNO student members. Throughout, any identifiers such as placements, names and school identifiers have been replaced by ****

Results

Demographics

64% were NZNO members. Of those who were not, 148 provided contact details and requested joining packs. These details were also separated from the results at that point. Of those who answered the question, 1021, or 93.7 % of respondents were female, and 69 or 6.3% male.

The percentage of each sex in each age band is as shown below:

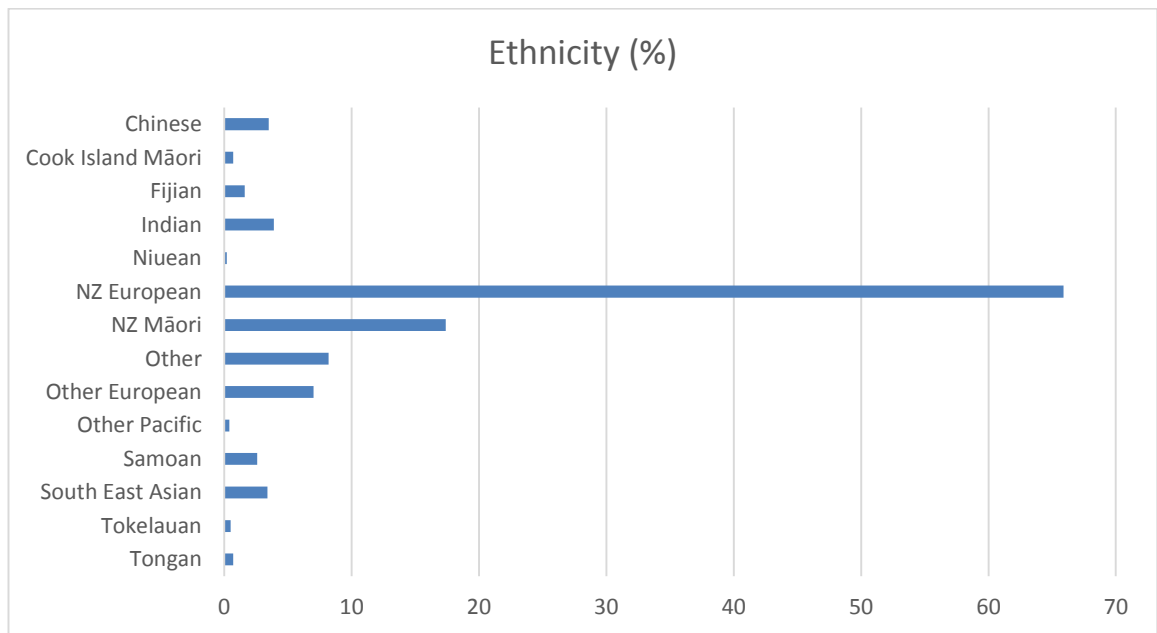


(No respondents chose to self-define their gender identity, though the option to do so was made available)

Ethnicity

Ethnicity	%	Number
NZ Māori	17.5%	191
NZ European	65.9%	721
Other European	5.8%	63
Samoan	2.6%	28
Cook Island Māori	0.7%	8
Tongan	0.7%	8
Niuean	0.2%	2
Tokelauan	0.5%	5
Fijian	1.6%	18
Other Pacific	0.4%	4
South East Asian	1.6%	18
Chinese	3.5%	38
Indian	3.9%	43
Other Asian (please specify in other)	4.0%	44
Other (please specify)	9.7%	106

This is also shown graphically below

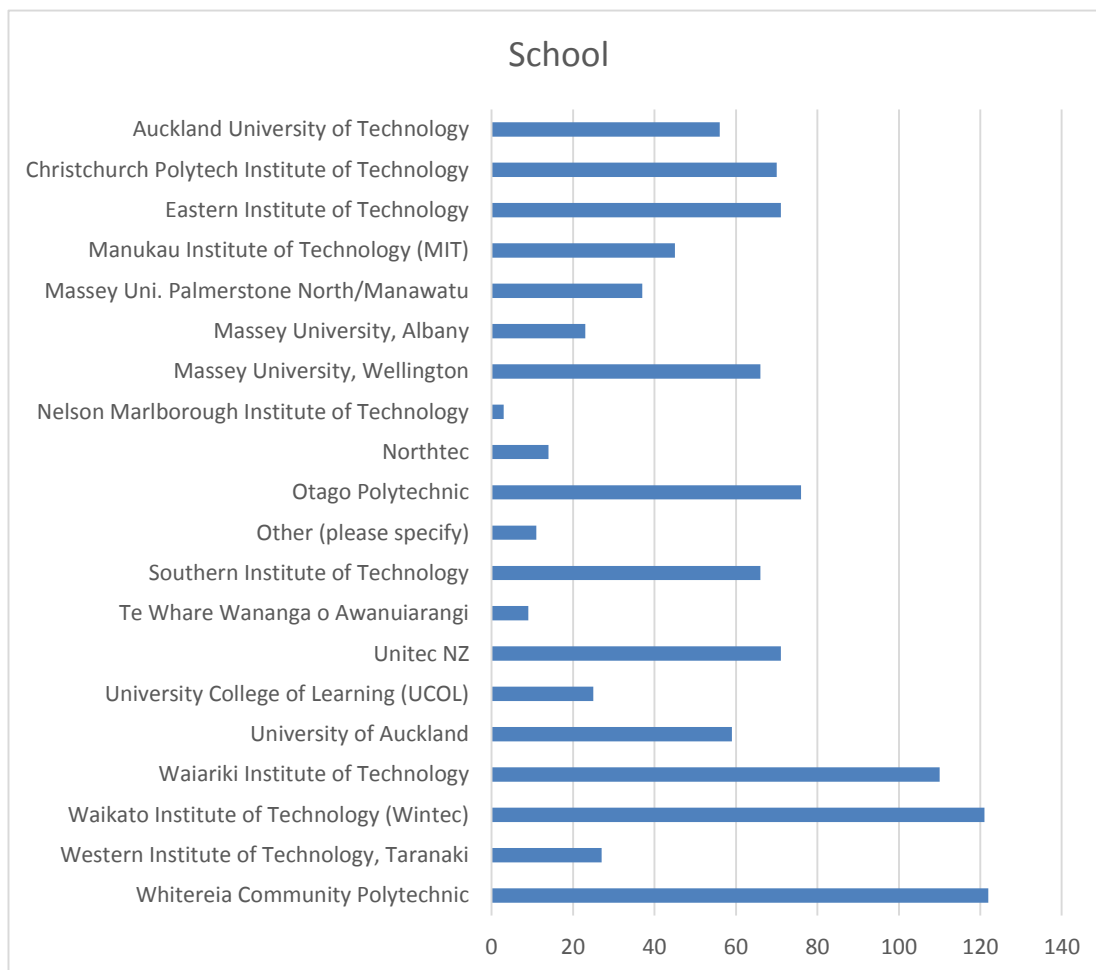


Programme (major categories only shown below)

Programme	counts	Percent
Bachelor of Nursing	981	90.75
Bachelor of Nursing Māori	4	0.36
Bachelor of Nursing Pacific	10	1.01
Bachelor Health Science	11	1.02
Articulated masters health science / BN	5	0.45
Enrolled Nurse / Nurse Assistant	30	2.78
Postgraduate study	8	0.74
Return to Nursing / CAP	13	1.09
Other	19	1.74

School

Respondent per school (number)

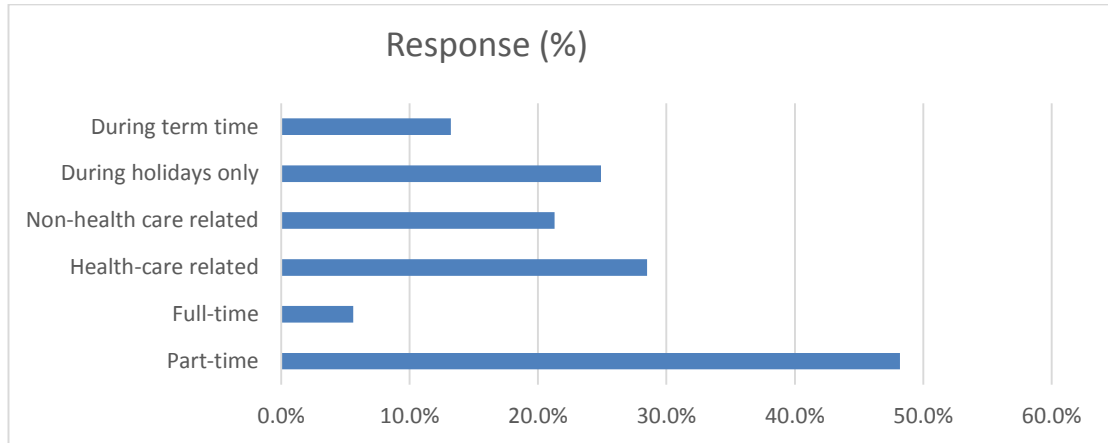


Mode of study

95.6 percent studied full time, and 4.4 percent part time.

Paid employment

50.28 % of students have paid employment. This is a rise of 2 % on 2013. Of this, the biggest grouping was part time and health care related.



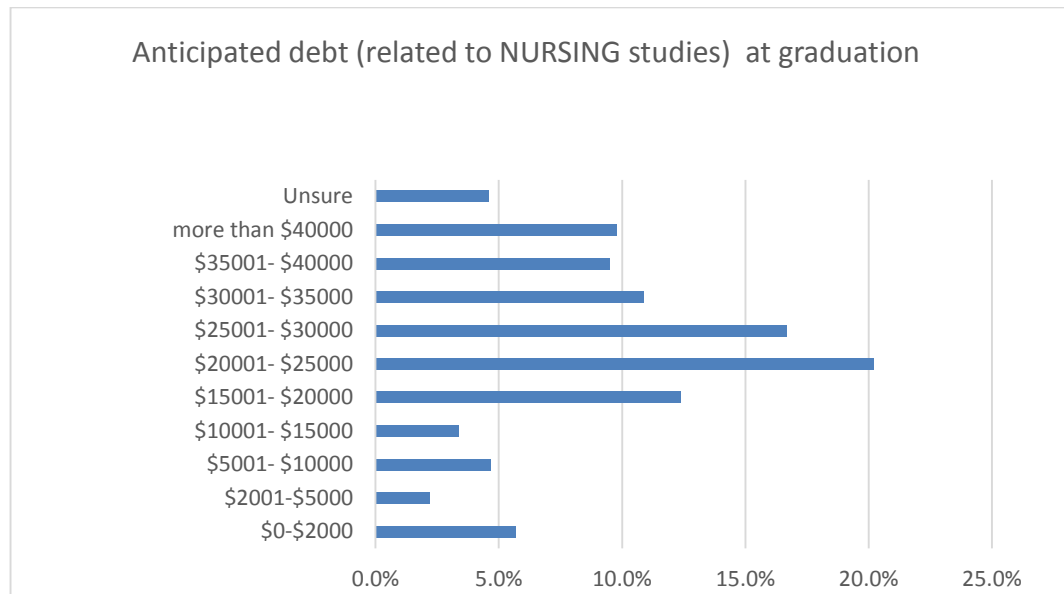
Of the 25% who answered “Other”, many categorise caring responsibilities for children as their work. There were many such mothers who said that they were enabled not to work outside of the home due to the financial support of a husband or partner.

Combining work and study

A few commented that though not forbidden to work, that their schools encouraged them to concentrate on their studies.

Answer Options	Strongly Agree	Agree	Disagree	Strongly Disagree
I couldn't manage financially if I didn't work	396	329	190	44
My work helps my nursing studies	164	283	336	148
I'm too tired from working to make the most of my studies	126	340	391	74
My school is supportive of my need to work	40	346	422	128
My school does not allow students to work	16	79	475	361
It is difficult to arrange working around my clinical placements	329	329	218	74

Anticipated student debt– this continues to be considerable.



This figure has risen fairly consistently between 2009 and the present, with the median debt creeping from 10-20K to 20-25K.

Anticipated financial responsibilities at graduation

Options	Percent
Mortgage	22.2%
Bank overdraft	28.2%
Credit card debt	26.3%
Student loan	91.5%
Other loan	17.0%
Other (please specify)	8.2%

Annual student fees

- ▶ Median fees per year - 6.5 K
- ▶ Range 0 - 20K
- ▶ Large variety in allowances

Fees for nursing education have continued to rise since the 1990's. Seven students from the Southern Institute of Technology had zero base fees. Overseas student fees ranged between 10 and 20 K per year. Some CAP courses (6-8 weeks long) had fees of 6-8K.

Year	1992	1996	2000	2013	2015
Mean fees per year* All sectors	1300	2631	4040	5900	6043

* Excluding all zero and foreign student fees.

Additional costs

Options	Percent
Uniforms	90.2%
Vaccinations and tests	89.4%
Indemnity Insurance	64.1%
Book allowance	85.9%
Travel costs for placements	91.2%
IT allowance (e.g. for broadband connection)	47.4%
Student Union Fees	30.6%
Other (please specify)	18.2%

In response to a question about understanding of additional costs prior to starting their nursing courses, a few felt they were fully informed of, and had prepared for all additional costs. The vast majority however had a sketchy understanding of the costs, especially those related to the number of textbooks required, or the costs of additional travel, parking and accommodation required for placements. The costs of vaccinations, home IT access, photocopying / printing, indemnity insurance, and state exam fees also appeared to be unknown. Costs for first aid certificates, child care equipment such as stethoscopes were frequently mentioned as both unexpected and onerous.

- ▶ While some were FULLY aware of these additional costs before accepting a place, **very** many were not
- ▶ Additional costs averaged about \$1-2 K per year
- ▶ Biggest unanticipated cost was travel, parking (& accommodation) for placements
- ▶ Costs not available from studylink for all
- ▶ Studylink did not cover costs fully even when eligible

NZNO or NERF scholarships

- 44, or 4.25 % had ever obtained an NZNO or NERF scholarship to help with the costs of their nursing study (Many were awaiting the results of a recent funding application)
- Of those who received grants, these were mostly Hamblin Trust book grants for \$2-300
- One person had received \$300 as an emergency grant
- A few had received Florence Nightingale grants for around \$750
- One had received around \$4900 from the Norman Jones Foundation.
- Other students had received waivers of fees from their nursing school

Clinical placement

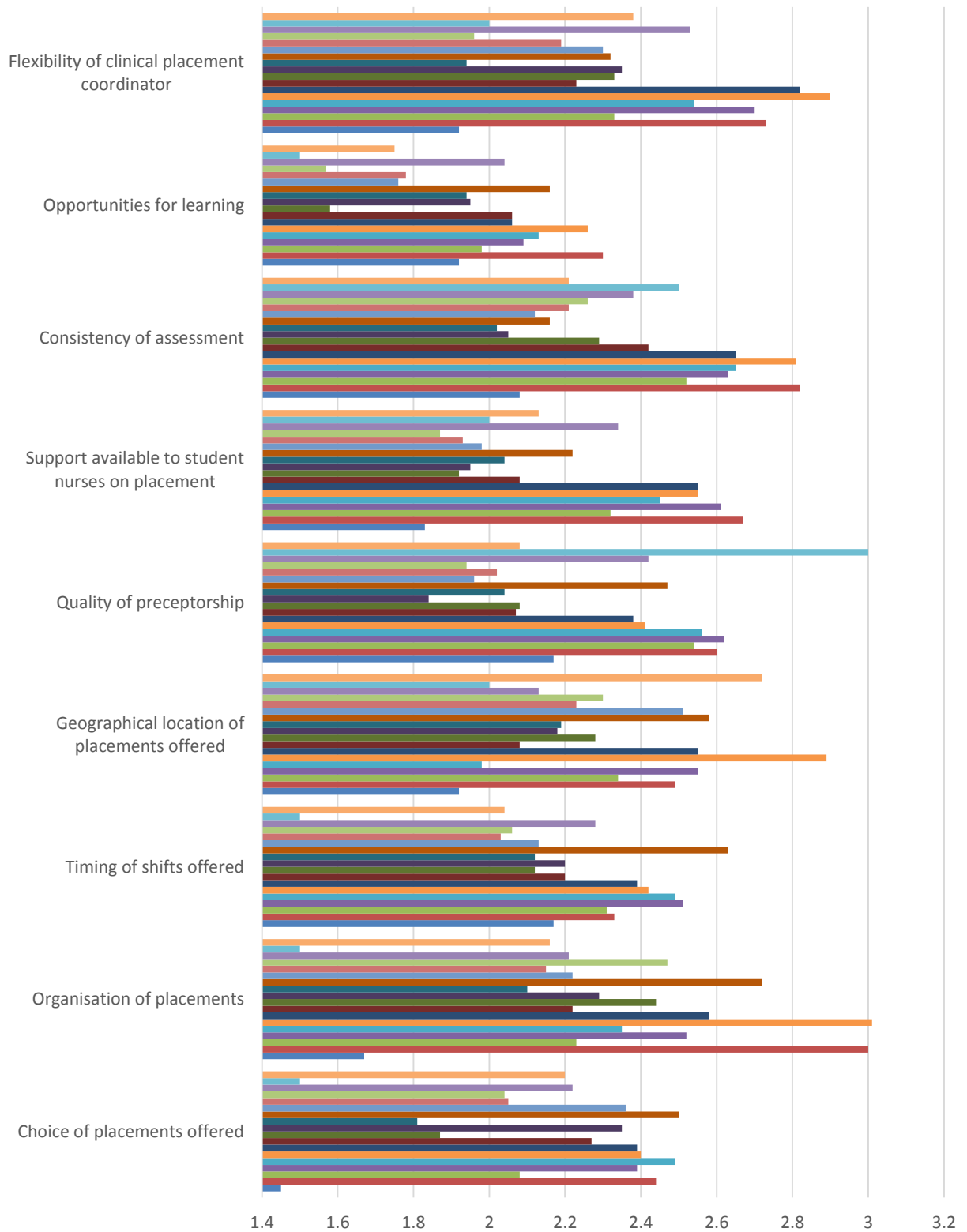
76% had been on clinical placement. Those who had been on placement were asked if they felt adequately prepared by their courses for such placements, and 60.58% felt adequately prepared. Many comments were received about experiences on placements. Some felt that they had been limited to caregiving work on their placements, and that this was not an adequate learning opportunity. Many suggested that their work on placement was worthy of payment. There were many concerns about poor organisation of placements. Mental health and dementia placements especially appeared to elicit the most disquiet about inadequate emotional preparation. Lack of emotional preparation (for example, access to grief counselling in preparation for experiencing the death of a patient), or for skills to deal with angry family members. A consistent plea was for more practical skills and lab time. As previously, considerable variation in the quality and enthusiasm of preceptors was reported.

The following relate to experience on placement: Overall responses

Options	Excellent	Good	Fair	Poor
Choice of placements offered	201	310	218	88
Organisation of placements	141	338	248	129
Timing of shifts offered	135	405	237	60
Geographical location of placements offered	156	330	252	120
Quality of preceptorship	174	337	248	70
Support available on placement	196	340	210	98
Consistency of assessment	119	357	246	116
Opportunities for learning	260	381	162	42
Flexibility of clinical placement coordinator	135	312	264	115

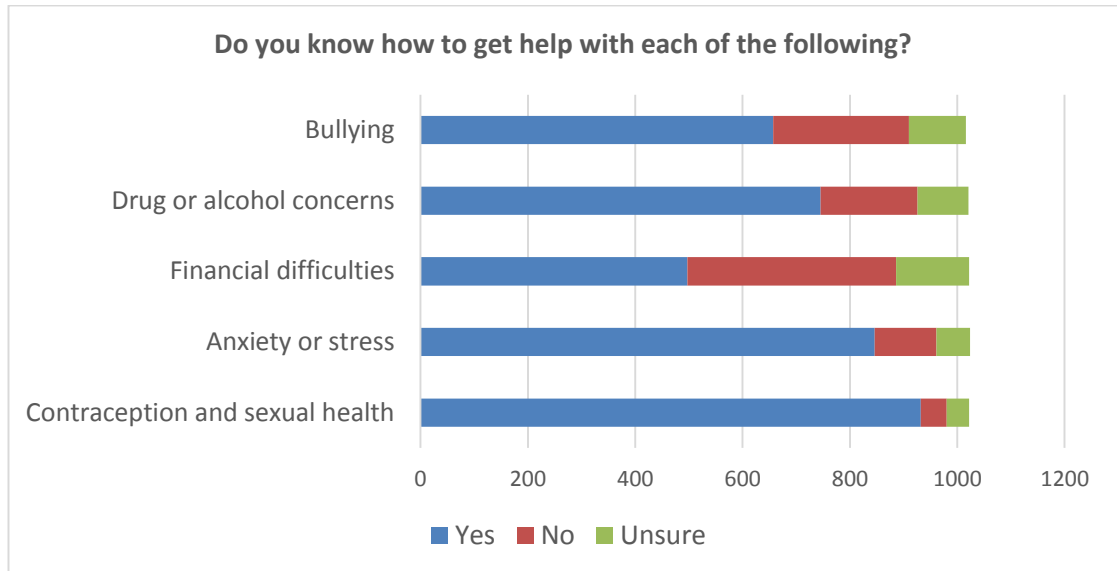
However, there were some quite big variations in the responses from different schools: the graph below shows a weighted average: i.e. adjusted for the different number of responses from each school. The longer the bar, the worse the score. Individual schools are not identified by name.

Weighted average of ratings of each item
 SHORT BARS = better perception in each case

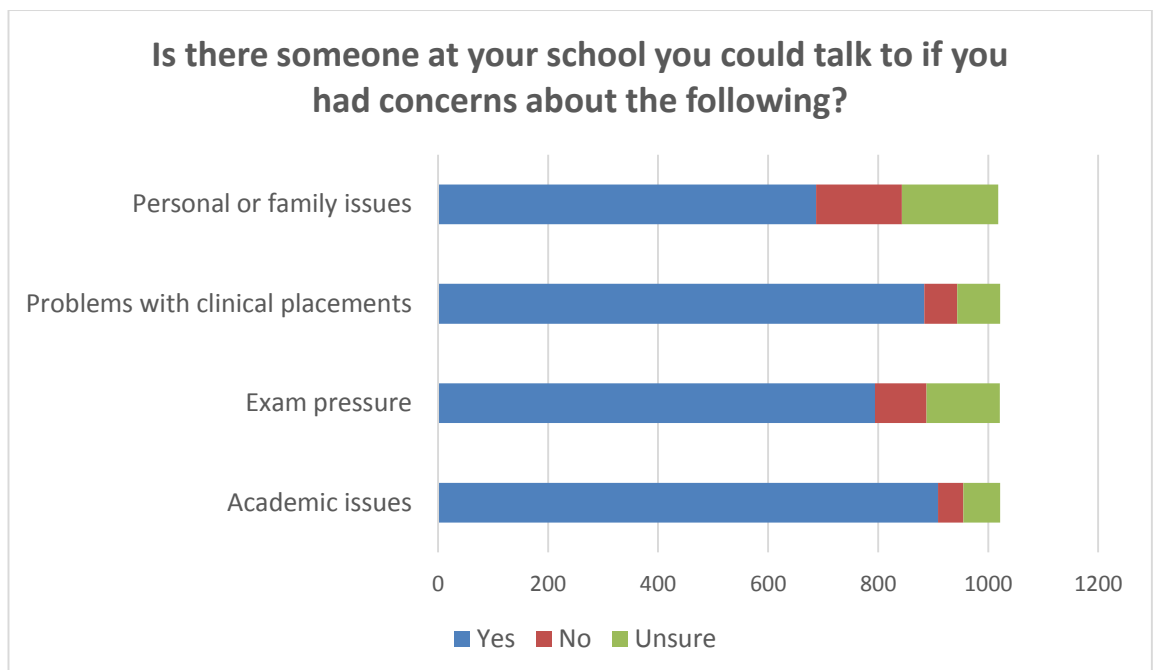


Student Health

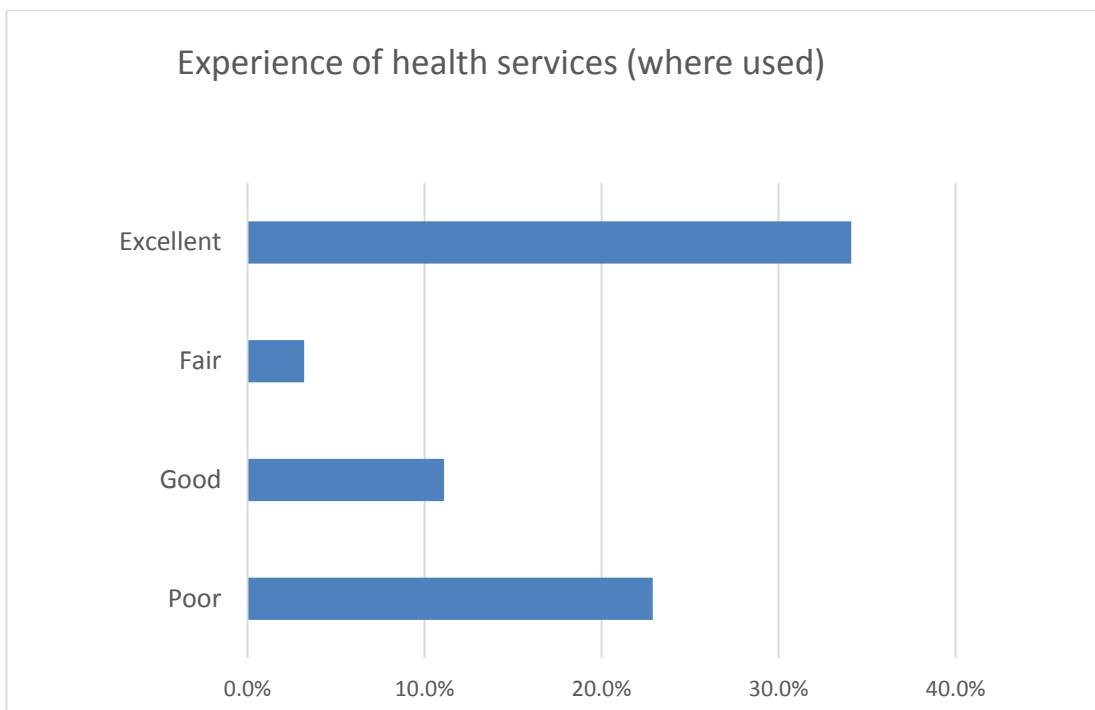
- > 91.6% of respondents were aware of available student health services, with 5.5% unsure about whether these were available.
- > Looking at knowledge of particular sources of help, awareness about contraception was highest, and financial advice had the lowest awareness.



- > Following up on sources of support for particular issues, there was most confidence about academic help, and least about exam pressure. Awareness of all support services was lowest among Chinese and Indian Students, indicating a need for better communication of information to these students.



Where students had accessed these services, 34% had found them excellent, while 23% had found them poor.

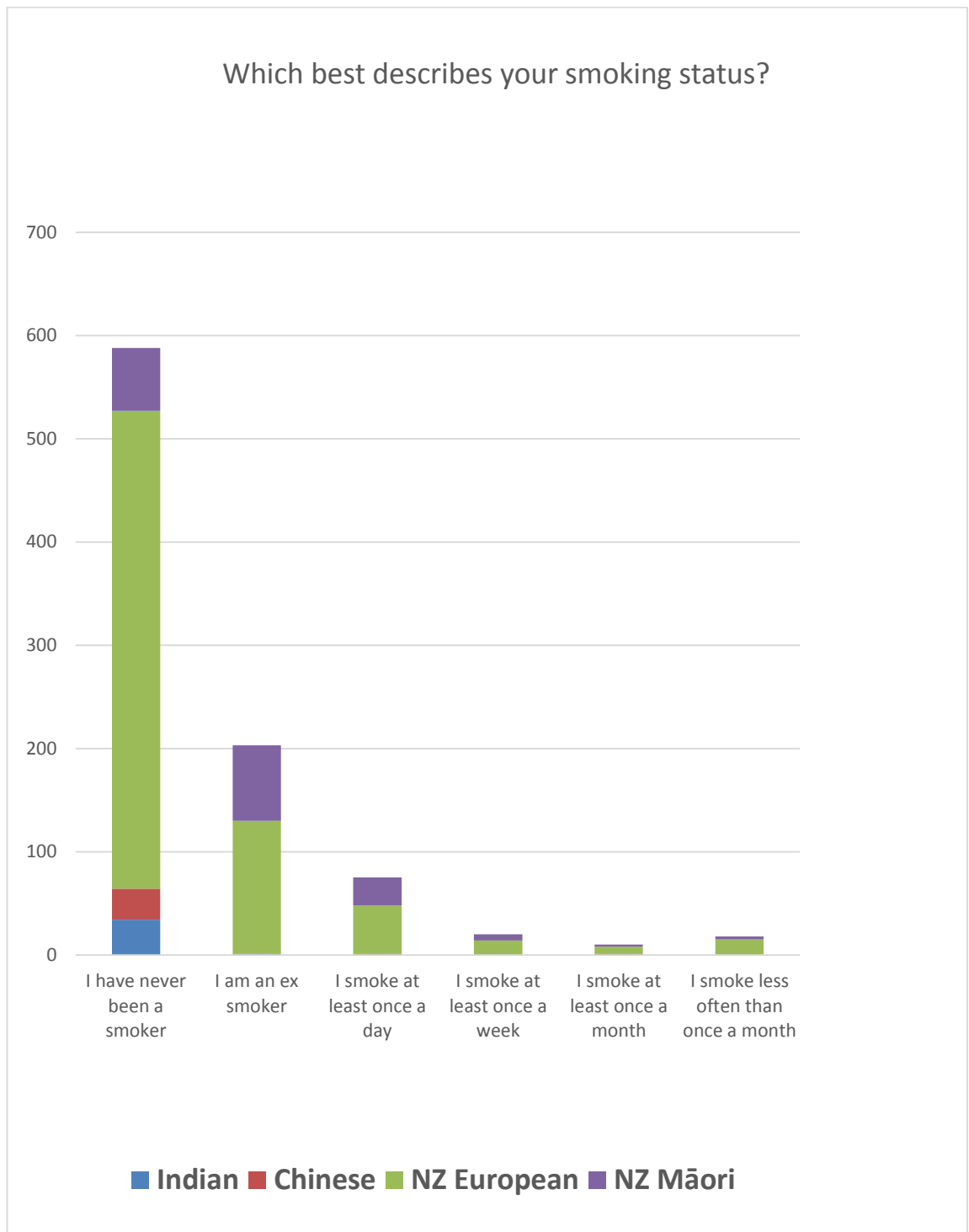


Smoking status

Asked: Which of the following best describes your smoking status, responses are shown below.

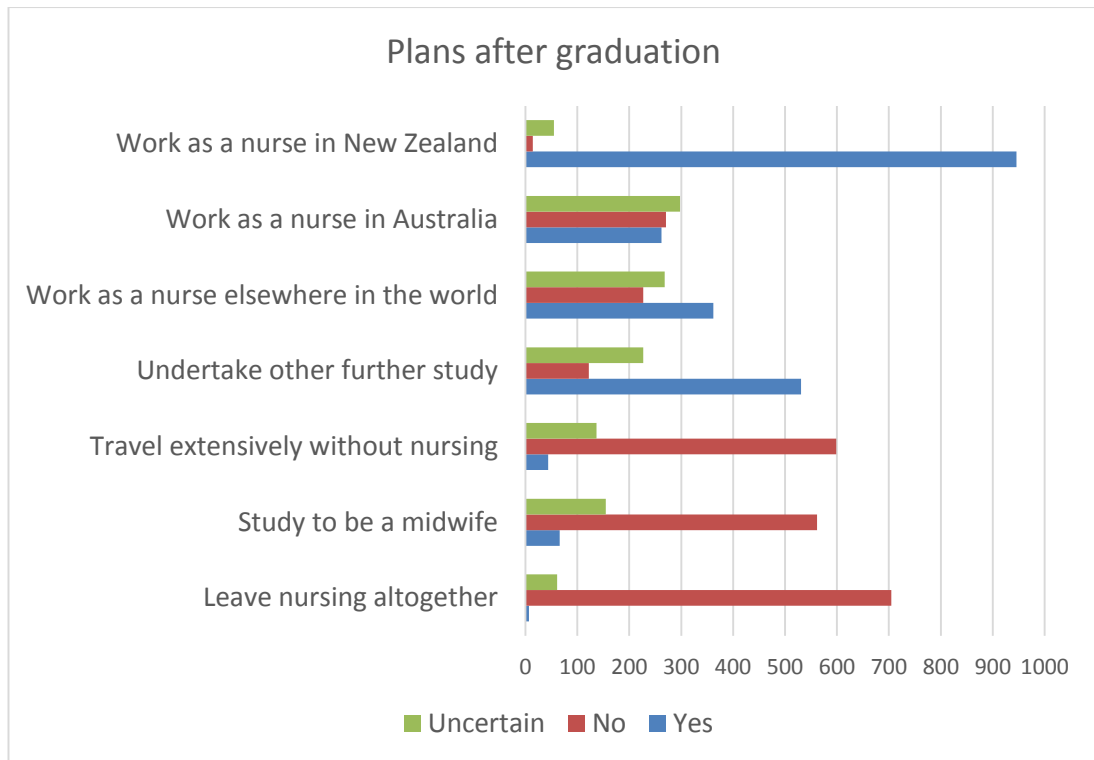
Answer Options	Response Percent
I have never been a smoker	67.8%
I am an ex-smoker	20.2%
I smoke at least once a day	7.1%
I smoke at least once a week	1.9%
I smoke at least once a month	1.1%
I smoke less often than once a month	2.0%

This varied considerably by ethnicity though:



Plans after study

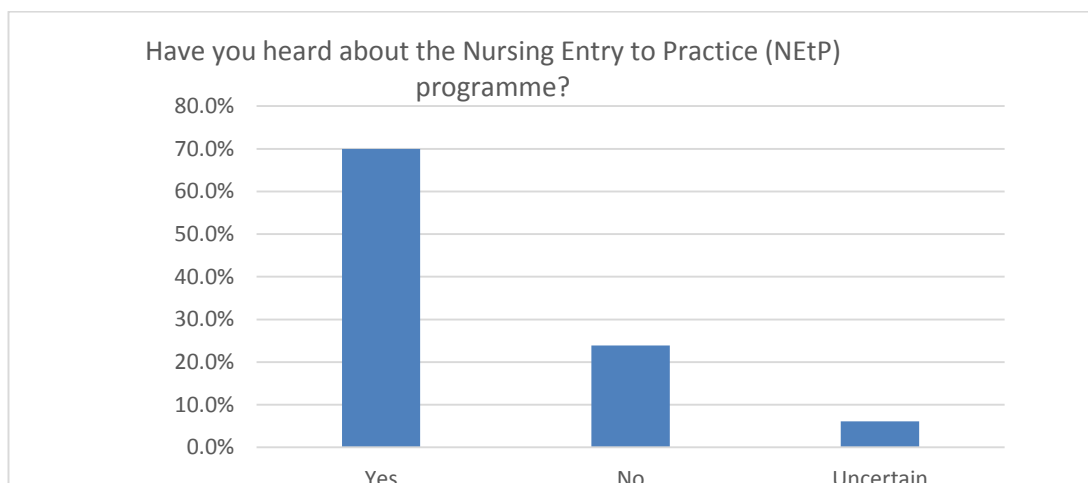
These answers were very similar to previous years. An overwhelming majority of students intend to work as nurses in New Zealand once they graduate, though some are also contemplating working elsewhere as nurses. (Multiple options could be chosen)



There were no obvious differences in these plans between different ethnicities.

NEtP

Awareness of NEtP was higher than for the NSU 2013 survey.



Other responses to the Plans after graduating question set :

65.14% hoped to enrol in NEtP.

32.47% thought a NEtP place would be available where they could consider working.

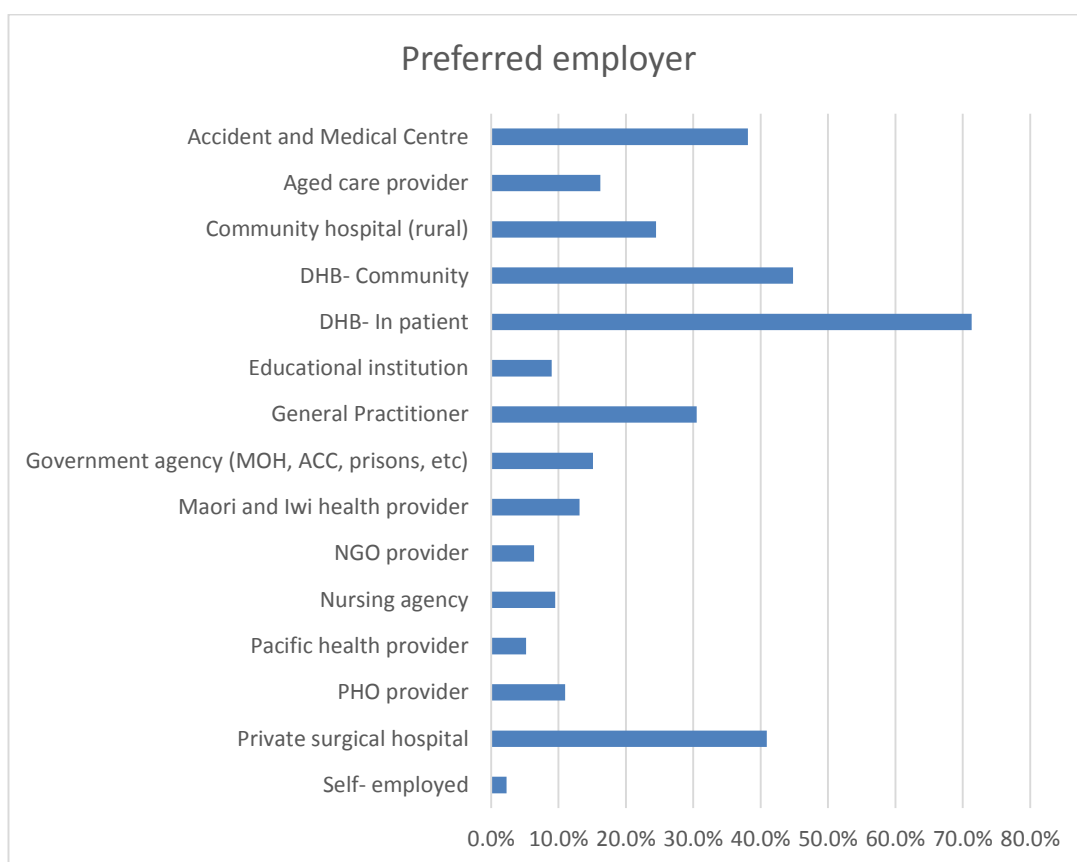
37.75% would travel to another DHB are to enrol.

66.5% would consider the government bonding scheme – this is a big increase compared to 2013.

There was awareness of, and concern about, a shortage of places (also a shortage of jobs) post qualification, and links were made to increased nursing student numbers, especially overseas students.

Preferred Prospective Employer

DHB (inpatient) remains the employment of choice.



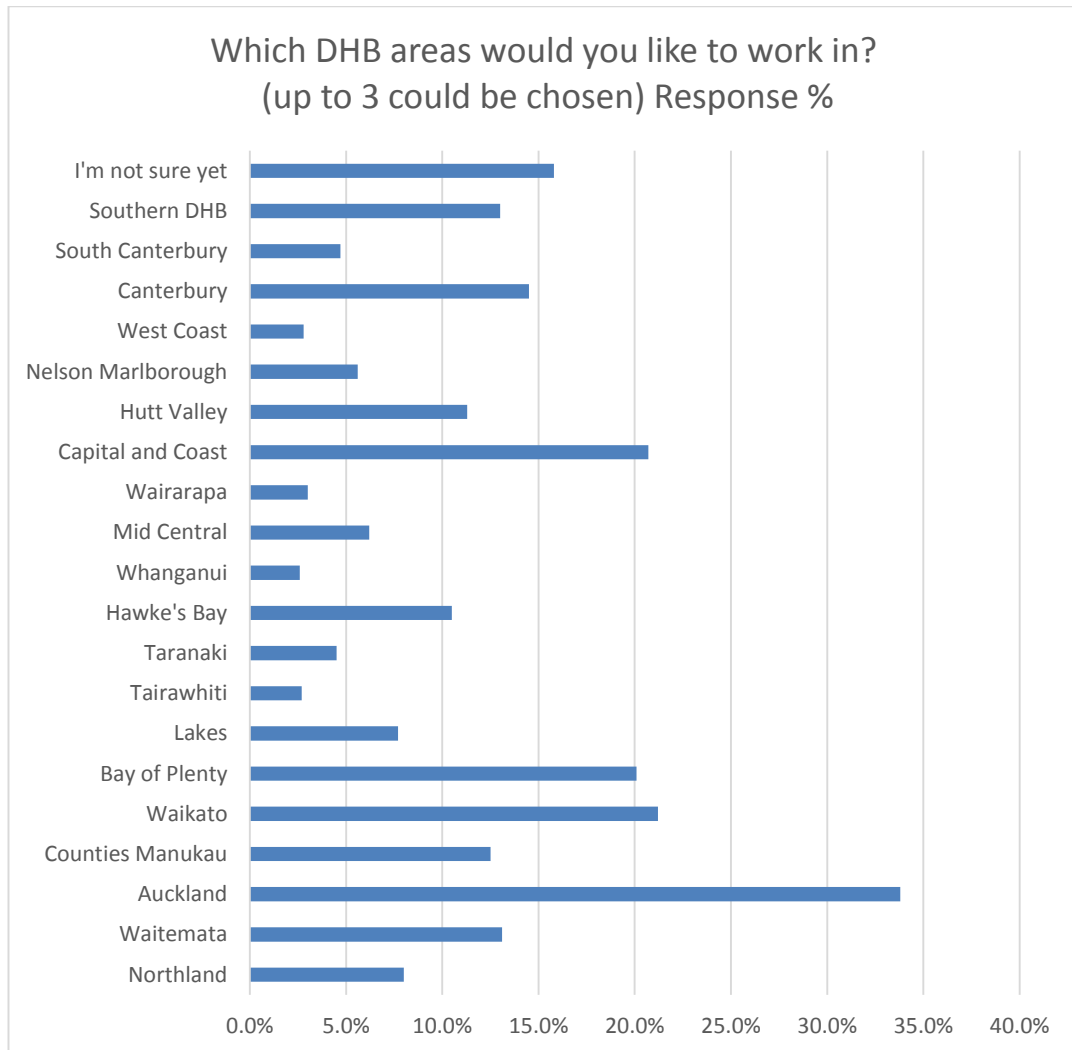
Asked about the ACE programme: (question wording shown in full)

Have you heard about the ACE programme? (ACE simplifies application processes for new graduates wanting to apply for their first positions within DHBs. It uses a centralised matching process between student preferences and DHB's preference of applicants.)

Options	Percent	Count
Yes	41.7%	421
No	47.1%	475
Unsure	11.2%	113

Preferred DHB area of employer

These roughly mirrored the distribution of the numbers of respondents by their school.



Preferred / least preferred area of clinical practice

The main choices are shown in a following table – though 11% were not sure yet which fields they might want to work in. Again, up to 3 could be chosen.

Most attractive		Least attractive	
Emergency and trauma	37.3%	Prison nursing	8.3%
Surgical	31.4%	Nursing research	7.0%
Child Health/ neonatology	29.9%	Infection control	4.5%
Primary health/ Practice nursing	24.0%	Occupational health	4.0%
Mental Health/ Addictions	23.7%	Intellectually disabled	3.9%

NZNO Research MEMBERSHIP:

Summary:

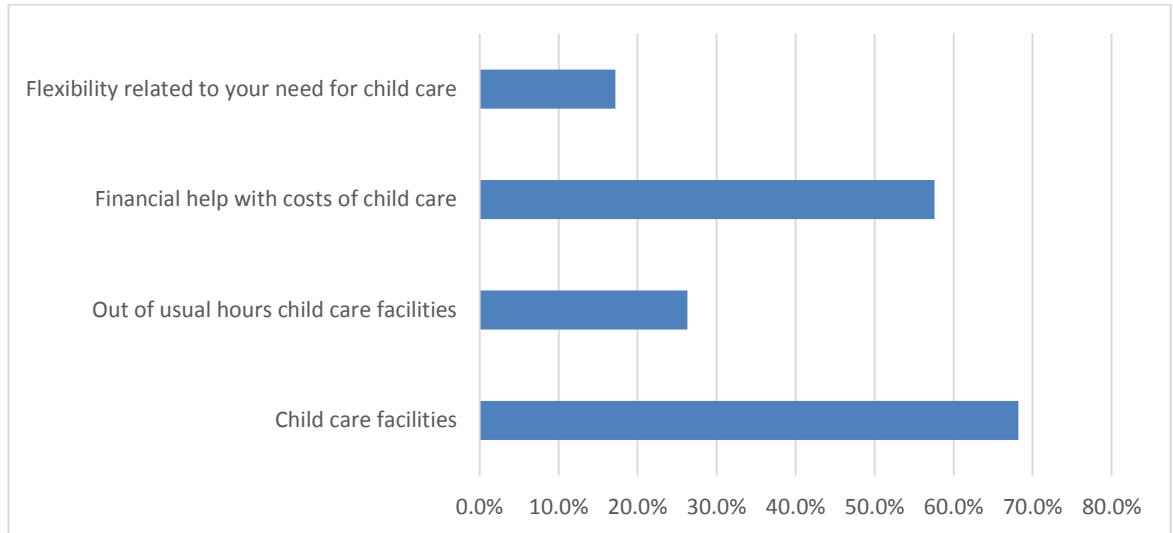
New Zealand Nurses Organisation PO Box 2128, Wellington 6140. www.nzno.org.nz

Childcare responsibilities

30.65 % reported responsibility for school aged or younger children – a small decrease on last year

9.73 % had responsibility for care of adults, a 2 % increase compared to 2013.

Those with responsibilities for school age or younger children were asked which of the facilities below were available to them. (Results show % of respondents)



**Comments were received from 171 parent / students.
Their responses could be summarised into four main themes:**

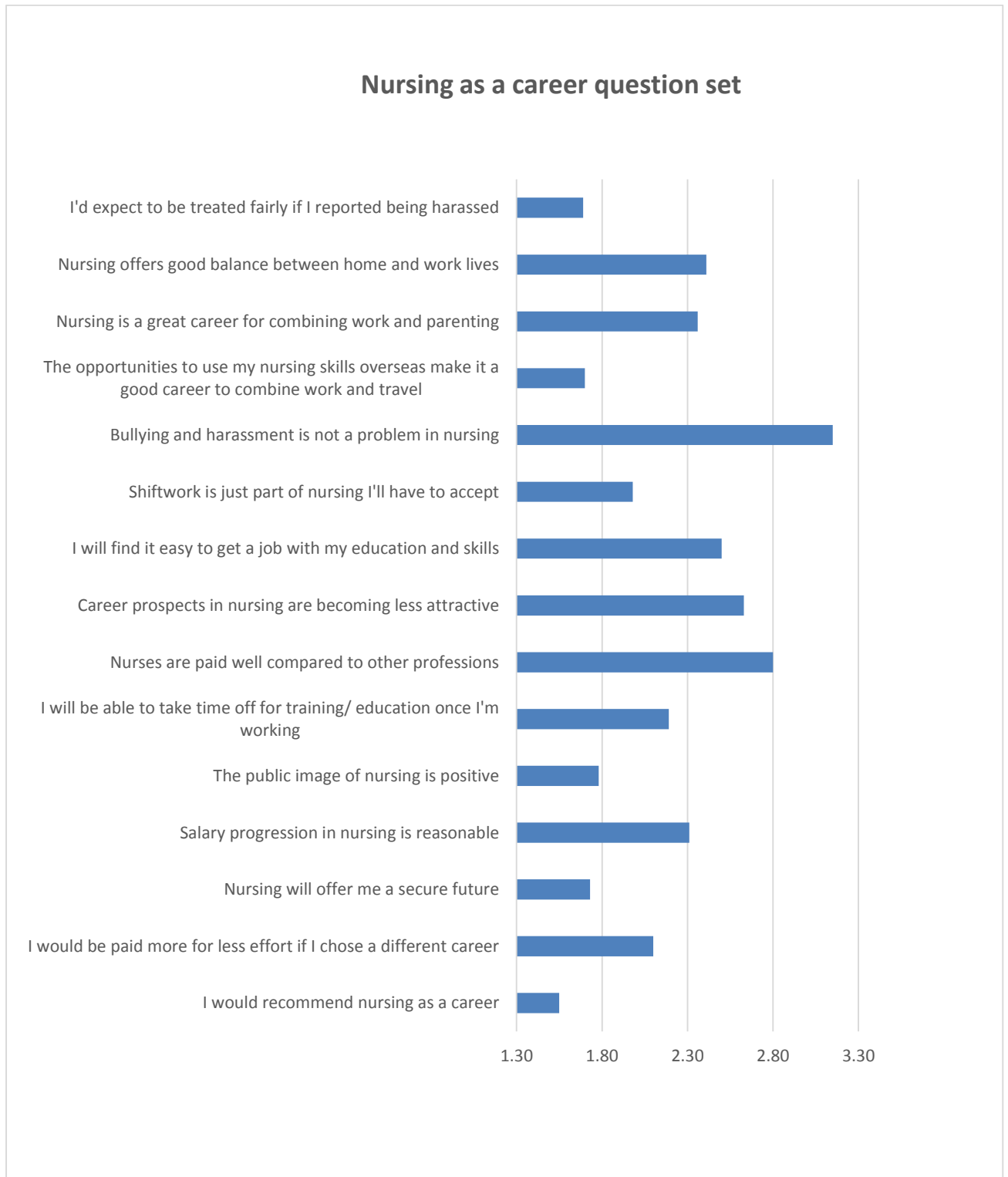
Themes:

- ▶ The costs and organisational complexity of being a parent and a student are significant
- ▶ Most felt there was little flexibility, and insufficient notice of timetables and placements
- ▶ Particular difficulties with school holidays, out of town placements and night shifts
- ▶ Single mothers especially struggle combining study and parenting

Morale / Views of nursing

This question set is part of the NZNO Employment Survey attitudinal block allowing comparisons with student responses from previous years and with qualified nurses to be made.

(A score of 1 indicates strong agreement, and a score of 4 indicates strong disagreement)

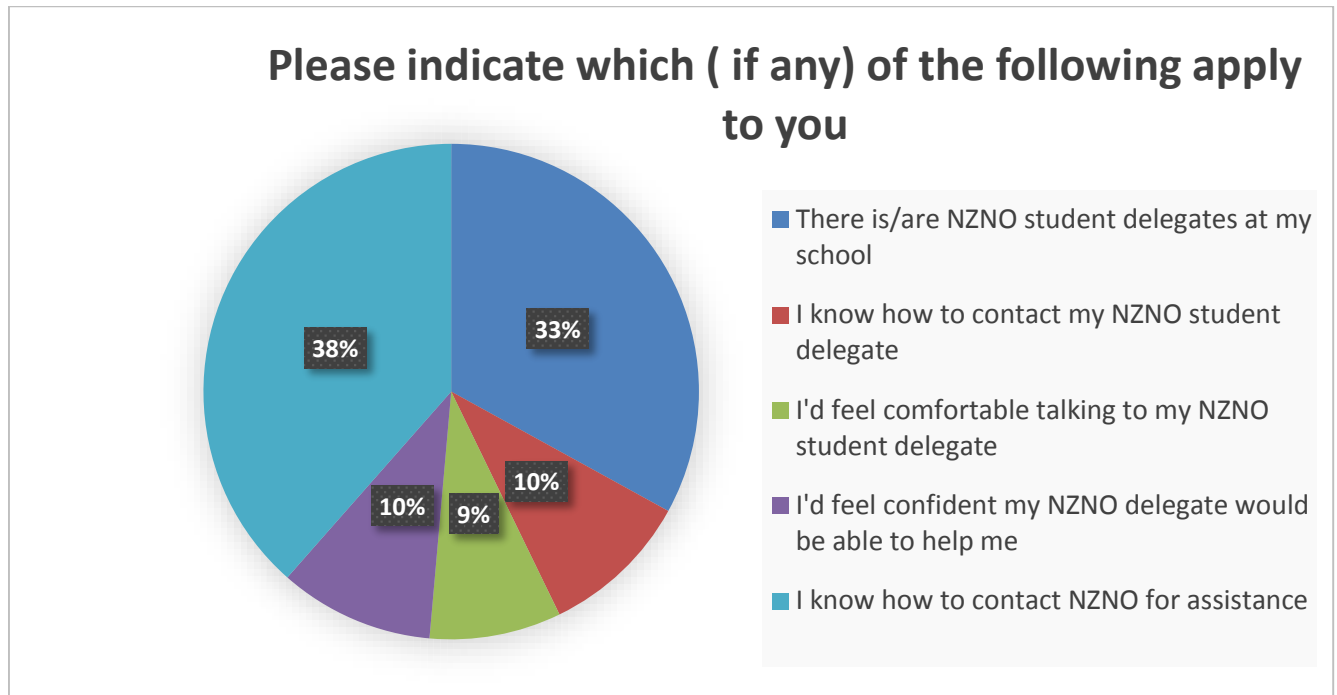


The weighted scores of students and RN respondents to the 2015 NZNO Employment survey (ES) are shown below. As above, the SMALLER the number the higher the morale. Four items were not found in the ES.

Views	Student	Employment Survey
I would recommend nursing as a career	1.55	2.26
I would be paid more for less effort if I chose a different career	2.10	2.54
Nursing will offer me a secure future	1.73	2.17
Salary progression in nursing is reasonable	2.31	3.41
The public image of nursing is positive	1.78	-
I will be able to take time off for training/ education once I'm working	2.19	3.37
Nurses are paid well compared to other professions	2.80	3.82
Career prospects in nursing are becoming less attractive	2.63	2.92
I will find it easy to get a job with my education and skills	2.50	2.66
Shift work is just part of nursing I'll have to accept	1.98	-
Bullying and harassment is not a problem in nursing	3.15	3.02
The opportunities to use my nursing skills overseas make it a good career to combine work and travel	1.70	-
Nursing is a great career for combining work and parenting	2.36	-
Nursing offers good balance between home and work lives	2.41	2.49
I'd expect to be treated fairly if I reported being harassed	1.69	2.79

Only perceptions of bullying were worse for students than RNs. Otherwise, students were more positive than RNs.

Awareness of NZNO



Further analysing this by school, mapping of delegates and awareness of delegates would be instructive. Additionally, where awareness of how to contact NZNO directly for assistance, more advertising of the Member Support Centre is clearly required.

Answer Options	Northtec	Auckland University of Technology	University of Auckland	Unitec NZ	Manukau Institute of Technology (MIT)
There is/are NZNO student delegates at my school	4	17	23	13	29
I know how to contact my NZNO student delegate	1	4	9	3	13
I'd feel comfortable talking to my NZNO student delegate	1	3	7	3	0
I'd feel confident my NZNO delegate would be able to help me	1	9	8	6	1
I know how to contact NZNO for assistance	2	11	5	21	1

Answer Options	Waikato Institute of Technology (Wintec)	Wairiki Institute of Technology	Eastern Institute of Technology	Western Institute of Technology, Taranaki	Massey University, Albany
There is/are NZNO student delegates at my school	21	23	11	8	4
I know how to contact my NZNO student delegate	2	5	7	1	2
I'd feel comfortable talking to my NZNO student delegate	3	4	2	10	1
I'd feel confident my NZNO delegate would be able to help me	4	9	4	7	2
I know how to contact NZNO for assistance	31	45	22	1	10

Answer Options	Massey University, Wellington	University College of Learning (UCOL)	Whitireia Community Polytechnic	Nelson Marlborough Institute of Technology	Christchurch Polytech Institute of Technology
There is/are NZNO student delegates at my school	22	0	10	0	9
I know how to contact my NZNO student delegate	2	0	11	1	4
I'd feel comfortable talking to my NZNO student delegate	8	0	1	0	1
I'd feel confident my NZNO delegate would be able to help me	4	0	6	0	4
I know how to contact NZNO for assistance	9	10	48	2	23

Answer Options	Otago Polytechnic	Southern Institute of Technology	Te Whare Wananga o Awanuiarangi	Massey Uni. Palmerstone North/Manawatu
There is/are NZNO student delegates at my school	29	29	2	4
I know how to contact my NZNO student delegate	7	11	0	0
I'd feel comfortable talking to my NZNO student delegate	6	8	0	0
I'd feel confident my NZNO delegate would be able to help me	2	4	0	0
I know how to contact NZNO for assistance	9	8	4	10

NZNO Research MEMBERSHIP:

Summary:

Finally,

Asked for any other comments related to their experience of studying nursing, 178 additional free text responses were received. Three or four quotes illustrative of each theme are shown in the appendix. Main themes were:

- ▶ There is *considerable* insecurity about the mismatch between the number of students, availability of placements (especially in Auckland), NEtP places and jobs.
- ▶ Some tensions exist too for overseas students: high fees, bullying, non-availability of NEtP and jobs / residency.
- ▶ Most students HAVE to work financially. Many are doing so in health care.
- ▶ Parents find juggling studying, placements, work and child care particularly hard.
- ▶ There is a range of satisfaction and dissatisfaction with the quality of the educational experience
- ▶ There were several calls for a consistent national curriculum.
- ▶ Dissatisfaction was expressed with courses with a high e-learning content in particular.

Appendix:

A small selection of representative quotes: 3-4 illustrating each of the main themes is shown. The number of quotes in each theme is also given.

Positive (6)

***** Nursing educators are a helpful and inspiring team of RNs with diverse career backgrounds.*

Very supportive lecturers.

I have had amazing placements, tutors, preceptors and lectures.

*Happiest I have been in years. The "package" that **** offer is world class. The tutors are absolutely top of their game and supportive real people with years of experience.*

***** Nursing tutors are so supportive and have a wealth of knowledge and clinical skills they freely share. My knowledge base has expanded and I am confident with my clinical skills, due to the continued encouragement from staff. They have made my learning experience an enjoyable one.*

Negative general (9)

I would not recommend my nursing educator to perspective nursing students I do not feel supported by my school.

***** is so cripplingly disorganised when it comes to enrolment administration for nursing students. The anxiety that this problem has caused myself and my friends in the nursing programme has caused us on many occasions to look into changing to another nursing school.*

***** is hands down the worst, most poorly run nursing school in New Zealand. The lack of communication, organisation and all round structure is appalling and it makes me sad to see the good teachers stuck in the middle of it.*

Negative about quality of education (9)

I wouldn't recommend my school of nursing as a place for study

Disappointed in the lecturer continuity and expertise. Some are too old to lecture with obvious cognitive issues and not up to date

Pay (12)

I have two jobs. I get paid 14.70 an hour at the rest home and 16.60 at the supermarket. The supermarket wage is the starting wage.

To be paid to work on placements would be nice as I find the students can work like slaves and have no real time to learn more

Fees are so (expletive deleted) expensive, considering many of us will be working as public servants having a huge student loan to do this seems a bit ridiculous.

E-learning specific (6)

Nursing is not a degree you can merge or do online. It is a people orientated degree where you need interaction to pass

There has been an increase with the online component of the course, meaning less face to face time but this did not affect the price of the course. Instead the course fees have increased. I have not enjoyed the online component

Parental issues (18) – additional comments were also received following the questions related to combining parenting with study.

I am beginning think it was a bad choice. Nursing feels so inflexible and time consuming, I don't know how I am going to be able to juggle kids when it comes time for me to have them; at the moment

I dislike the amount of self-directed at home study my course involves. It clashes horribly with having kids at home - can't get anything done

High stress levels, sacrifices of time with our children, all to look after others. It takes a toll.

I would love more selection options for clinical placements and to have lectures at decent hours so that I am able to drop and pick my kids up from school. I would also like clinical placements to be secure and organised before I start there

Concern about placements, jobs and NEtP places (28)

I have recently graduated, failed to get placement with NETP and I have found it really difficult to find work as nurse outside it. That is why I would not recommend it, and I don't think the career prospects are great. If you have experience it's okay, but GETTING the first job is not easy.

As an international student, I am concerned for my future prospects of getting a job plus residency in New Zealand.

The intake numbers are too high. This effects the quality and number of clinical placements available. It also means that the number of jobs available do not match the number of graduates being churned out, hence people skipping the country and leaving behind big student loans.

I graduated and used the NEtP, and despite surgeons giving me compliments on my practice in theatre in the role of a scrub nurse, and very +ve comments by excellent preceptors, there is no job for me.

Bullying / inconsistent assessment (13)

I am very disappointed in the way nurses treat nursing students, it is enough to make you want to quit nursing altogether. The bullying causes a multitude of stresses and anxiety and has made me doubt the choice I have made.

All the stress I feel related to placements is directly due to the fear of what nurses I will encounter and how I will be treated/belittled and made to feel like a pain in the ass. I have had my self-esteem shot down on numerous occasions and go home wondering why the hell I have put myself in this position.

*There is some bullying in my class room, to me that doesn't bode well for future working Classes felt bullied by lecturers and **** ward staff.*

*I have been bullied and harassed the **** organisation supports the bullies and has unjust assessment methodology*

National consistency (6)

I think some schools are easier than others. If you are studying nursing that we should all sit the same papers/ the same anatomy papers and everything. I think it's unfair that some should be trained with some papers that medical students sit and other schools do not and yet we all end up with the same nursing degree.

*There is a very big different in workload between different nursing school which seems unfair to end up with the same qualification (**** does 40hrs a week and 16week semesters)*

The national framework for each individual school is different, so if I wanted to transfer school I do not think I could cross credit many of the papers. I do believe that similarities need to exist within frameworks

Other suggestions (8)

Also a little bit of male oriented support wouldn't go astray, at least stop referring to the class as "ladies"

Would like to see more involvement from nzqa for feedback from students as well as more input from nzno

I feel like I would benefit MORE if I were able to have another year added to the degree working as a paid student nurse and rotating in all wards. We would gain confidence and probably wouldn't feel so 'swamped' at the start of our new-grad year (provided we are successful in actually obtaining a job).