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Nursing education leadership strengths in South Africa: An exploratory study

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ABSTRACT

Introduction and background: Numerous multifaceted issues continue to pose a serious challenge to the success of nursing education and training worldwide. In South Africa, distinct situations, such as the transitioning of public nursing colleges to higher education to be part of a unified higher education system, amplify the problems faced by nursing education leaders. To unravel these complexities, an exploration of South Africa's existing nursing education leadership strengths was undertaken.

Purpose: To describe the leadership competencies deemed as an existing leadership strength in a challenged and transforming South African nursing education context.

Method: As part of a larger study, embedded in social constructionism, an exploration of the country's existing nursing education leadership strengths was conducted with the purposefully selected nursing education leadership experts. Qualitative, descriptive, and contextual data yielded by the ten participants were analysed using thematic analysis.

Findings: Four main themes emerged namely, leadership competencies; governance, leadership, legislation, and policy; staff development as well as community engagement.

Conclusion: The authors propose that the described leadership competencies offered by the nursing education leadership experts as the existing nursing education leadership strengths in the country be considered as a foundational basis to navigate emergent challenges in wider contexts.

1. Introduction and background

Globally, there are many challenges that nursing education leaders continue to endure to maintain and sustain the quality of nursing education and training. General constraints relating to human resources, learning, and teaching, financial and material resources as well as factors affecting institutional leadership and management are some of the hardships alluded to in literature (NDoH, 2013; Armstrong & Rispel, 2015; Bvumbwe & Mtshali, 2018; Fawaz et al., 2018). Such complexities place nursing education leaders in a position of having to operate in an increasingly multifaceted higher education (HE) environment.

South African nursing education leaders, particularly those involved at the public nursing colleges, found themselves in a unique situation of participating in the HE transformation. The Higher Education Act 101 of 1997 obligates colleges to transition from the respective provincial departments of health to HE to form part of a unified HE system. Although this was an overwhelming milestone and appears to be continuing due to the gaps identified in the administration of colleges, a partial transition

has been realised. In 2020, the colleges implemented the new basic nursing programme approved by both the Council on Higher Education (CHE) and the South African Nursing Council (SANC). As a member of senate at a specific public nursing college, the first author experienced the existing nursing education leadership hardships and those emanating from transformation and believed that such challenges were hampering the college from delivering its mandate. Southwick et al. (2017), however, express an opinion that dealing with challenges is part of leading an organisation.

Realising an increasingly complex milieu that South African nursing education leaders, particularly those at a specific college continue to work in and acknowledging leadership competency as an element for survival, the college leadership needed strengthening. To achieve this, the views of Rath and Conchie (2008), who pointed out that focusing on people's weaknesses could have a pessimistic effect on their confidence, were considered. The authors therefore placed an emphasis on South Africa's existing nursing education leadership strengths instead of its deficits as a novel way to navigate the uncharted waters. The

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understanding of the country's existing nursing education leadership strengths from the perspectives of the nursing education leadership experts were viewed as an important part of what the college leaders could learn from in navigating their challenges, considering that the college does not operate in silos but forms part of the country's nursing education fraternity.

2. Methods

Flowing from a social constructionist paradigmatic stance, a qualitative approach was followed, employing an exploratory, descriptive, and contextual research design. The research was conducted within the domain of the South African HE with a particular emphasis on nursing education. Nursing education leadership experts in the country formed population for the exploration of the existing nursing education leadership strengths. These included incumbents who occupied nursing education leadership position in government as well as at the public and/or private NEIs. In line with Polit and Beck (2021), participants were purposefully selected by use of criterion sampling. By virtue of possessing SANC accredited nursing administration qualification, and experience of five years and more in South African nursing education leadership, these experts were deemed experienced to offer rich perspectives regarding the subject under discussion. Due to the vastness of South African nursing education context, it was difficult to predetermine the precise number of experts. The details of approximately thirty experts could be solicited electronically, and these incumbents were invited to participate.

Data collection started after ethics clearance was obtained from the relevant institutional research ethics committee. The following open-ended question guided the exploration:

“What are existing leadership strengths in a challenged and transforming South African nursing education context, which you regard to be necessary and appropriate to enable South African nursing NEIs to navigate higher education challenges of the 21st century?”.

To establish whether it would yield relevant data, the question was piloted with a head of an NEI within proximity to the research site. Based on the appropriate feedback received, no amendments were necessary, and the responses obtained were included in the research. An information package comprising proof of ethics clearance, a participant information document, informed consent form and one single exploratory open-ended question was sent to the potential participants either in hard copy or via email. Participants were granted an opportunity to choose the medium of response, reply to the question in their own time, and the reminders were sent after one month. A total of ten responses was received in either soft or hard copies. Two of the participants forwarded their audio recordings, which were then transcribed, and the rest emailed or sent their typed responses. Ten experts, including four from colleges, five from university nursing departments and one from national nursing education association participated in the study. The qualifications held by the participants included seven PhDs, one master's degree and two honours degrees. The participants' experience in nursing education leadership ranged between five and twenty years and were all registered with SANC as nurse administrators (nurse managers).

The electronic data sheets including the transcripts were printed and analysed manually, together with the two hard copies. Manual analysis was believed to enable the researcher to take a closer look at the data and engage in an immersive rather than a mechanical exercise (Polit & Beck, 2021). A thematic content analysis was done to condense the narrative data from the exploration into categories. The identified categories were sorted into meaningful conceptual patterns from which themes emerged (Grove & Gray, 2019; Polit & Beck, 2021).

To ensure trustworthiness, the five major criteria including credibility, confirmability, dependability, transferability, and authenticity were considered (Lincoln & Guba, 1985; Guba & Lincoln, 1994). Prolonged engagement, achieved through the manual analysis of data, addressed the credibility and authenticity of the research. Peer review

throughout the research process further enhanced credibility. In the discussion of data, presentation of verbatim quotations increased the authenticity of the research while triangulation with literature enhanced confirmability. In addition, an audit trail was kept for confirmability purposes. In attempting to enhance dependability and potential for transferability, a thick, rich description of the research design, methods, and findings is presented. Consistency in asking each of the experts the same open-ended exploratory question also addressed dependability.

Ethics clearance was granted by the Health Sciences Research Ethics Committee at the host university. The participants provided written informed consent and returned the form with their responses. A principle-based approach was taken to ethics by adhering to the Belmont principles of beneficence, respect for human dignity, and justice (Grove & Gray, 2019; Polit & Beck, 2021).

3. Results

On the analysis of data from the exploration of South Africa's existing nursing education leadership strengths, four themes i.e., leadership competencies; governance, leadership, legislation, and policy; staff development as well as community engagement emerged. However, for the purposes of this article, only Theme 1 of the findings from the exploration of South Africa's existing nursing education leadership strengths, namely leadership competencies are discussed.

Moghabghab et al. (2018) make the following distinction between competence and competency. Competence alludes to an individual's capability for consistently integrating the required knowledge, skill, and judgment to effectively execute job responsibilities, while competency focuses on specific knowledge, skill, and/or judgment demonstrated by an individual in a particular situation. The experts offered descriptions from their nursing education leadership experience. Table 1.

4. Discussion

Leadership competencies i.e., knowledge, skills, and abilities, attitudes, and behaviour are discussed with support of the participants' statements. Descriptive information about participants accompanies their quotations using codes including participant number, years of experience in nursing education leadership and highest qualification, for example (Exp 7, 12 yrs., M Cur). The pertinent literature is incorporated into the participants' perspectives as a way of triangulation, to enhance the richness of data, and unearth the deeper meanings of the experts' inputs.

1. Theme 1: Leadership competencies

Possession of relevant knowledge and skills as well as a demonstration of the appropriate abilities, attitudes, and behaviours that emerged as leadership competencies in this study are presented in this article for contemplation.

Table 1

Views of experts on South Africa's existing leadership strengths.

Theme 1: Leadership competencies	Subtheme 1: Knowledge and Skills Subject expertise and didactics Appropriate educational qualifications and experience Financial management skills Talent management skills Performance management skills Project management skills Subtheme 2: Abilities, attitudes, and behaviour Resourcefulness and innovation Proactivity Partnership and stakeholder collaboration Responsiveness Results orientation Acknowledgement and recognition Resilience and perseverance
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Subtheme 1: Knowledge and Skills

Subject expertise and didactics, suitable educational qualifications, clinical experience, as well as financial, talent, performance and project management were categories relating to knowledge and skills.

Two of the experts stated the existing leadership competencies in a form of having suitable qualifications and clinical experience.

“... lecturers had to work in the clinical areas for a period of time before being given an opportunity of studying and acquiring nursing education as an additional qualification. When an advert goes out looking for a lecturer... it specifies that the incumbent must be in possession of a qualification in that subject” (Exp 1, 10 yrs., B Cur Hons).

“Suitably qualified leaders with subject matter knowledge and the ability to navigate the ever-changing landscape of nursing and health education” (Exp 5, 20 yrs., PhD).

Supporting the views of experts 1 and 5, competent nursing educators with the relevant knowledge and skills would not only be able to facilitate theory and practice integration but also, be in a better position to navigate the uncertainties of nursing education (Fawaz et al., 2018; Salminen et al., 2021). Herberg and Torgersen (2021) accentuate the value of having the necessary capabilities as something that could promote preparedness for the unforeseen.

Other than nursing education related competencies, two participants referred to generic skills. Expert 4 spoke about financial and talent management skills while Expert 7 stated performance and project management skills.

“Incumbents (nursing education leaders) participated in financial and budget management system for the college and [were] able work within PFMA (Public Finance Management Act) and Treasury regulations...” (Exp 4, 16 yrs., PhD).

In line with Umeghalu et al. (2019), severe constant shortages of financial resources in nursing education require effective financial resource management that is vital in improving students’ learning experiences and realising an institution’s given mandate.

Experts 4 and 7 added management skills significant for career pathing.

Incumbents promote talent identification and retention for career pathing” (Exp 4, 16 yrs. PhD).

Mensah (2015) validates that when talent is effectually managed, staff tend to be more dedicated and make substantial effort in their roles. Thus, there appears to be a positive link between effective talent management and employee performance.

Expert 7 offered input regarding performance appraisal, career pathing and scholarship development.

“On an annual basis, I schedule appointments with each staff member to discuss their performance appraisal, career path, and to assess their needs regarding scholarship development” (Exp 7, 10 yrs., PhD).

Sherwani (2014) supports the implementation of performance management as a tool that allows HEIs to enhance their general performance and reach their goals. As far as the stated career pathing and scholarship development is concerned, charting a path toward the employee’s future development goals is supported as something highly significant (Stevenson, 2019). Incorporating goal, steps, experience, and the development required to get there, assists with one’s development of knowledge, skills, and behaviours vital for success (Manalo & Ojales, 2020).

Expert 7 continued by mentioning an example of managing a project over 4-years.

“... as [the] management team, we had to overcome our own fears... It was like white-water rafting: we had to cope with the turbulence, sometimes struggled to stay on board to show self-control and stay calm, work as team, and to work at an unbelievable pace,

... now that we are getting ashore safely – that is an indescribable reward” (Exp 7, 10 yrs., PhD).

The description in this quotation corresponds well with reading material about adversities that nursing education leaders have to navigate. Furthermore, the role of personal skills and teamwork in a

successful project management are confirmed. Coleman and Bourne (2018) confirm that project leaders ought to have skills, behaviour, knowledge, and values to deliver major, complex projects fruitfully.

Sub-theme 2: Abilities, attitudes, and behaviour

Other leadership competencies include possession of certain abilities as well as demonstration of appropriate attitudes and behaviours by the nursing education leaders. These include innovation and resourcefulness, proactivity, partnership and stakeholder collaboration, responsiveness, results-orientation, resilience, perseverance and acknowledgement, and recognition.

Regarding innovation, two of the experts cited creativity in the form of applying technology that improved communication among the colleagues.

“The college members use social media to the benefit of staff members and everybody, for instance WhatsApp groups are established for different layers of management to ease communication amongst themselves. Through this media, issues are handled with speed, and superfluous complaints are prevented” (Exp 1, 10 yrs., B Cur Hons).

The statement relating to creation of an alternative channel for exchanging information seems to be echoing the importance of effective internal communication in appropriately managing organisational matters to avoid grievances. Although the participant alluded to effective communication as means to deal with issues timeously to thwart unnecessary complaints, views relating to communication in terms of the focus of the article are offered. In relation to being resilient, Bui et al. (2019) assert that it would be difficult for teams to ‘bounce back’ or to prevail over issues in the presence of external peril, specifically in the case of deficient information about the environment and existence of other team-related challenges.

Continuing with innovation, Expert 7 relayed how external funding provided to their school facilitated establishing unit for continuing professional development (CPD) that continues to generate third-stream income, through which many health professionals have received additional training (Van Jaarsveldt & Joubert, 2018).

“... as sub-project leader of [funded project], I oversaw the establishment of a [unit for CPD]. Short learning programmes were presented... One thousand six-hundred and twenty registered nurses [have] enrolled for short learning programmes since 2013, and 125 programmes were presented. Today, the [unit] is self-sustaining through the income generated by the programmes offered. The profit is used to ensure sustainability of the infrastructure..., to pay incentives to staff members for research output, and to support scholarship development of academic staff and postgraduate students” (Exp 7, 10 yrs., PhD).

The significance of effective project management with positive results i.e., contribution to the nurse competencies and the generation of revenue that could be channeled towards better research productivity and scholarship advancement. Edson (2013) asserts that effective project leadership plays an essential role in shifting group norms and processes to foster adaptive aptitude.

With reference to being resourceful, experts 1 and 4 expressed how nursing education leaders were able to provide resources required by the NEIs to attain their mandates.

“The leaders in nursing education are very resourceful people... they make it a point that there are resources available for assisting the lecturers/facilitators to do their work ... they make sure that equipment, like teaching aids, are in a good functioning order, by visiting classrooms and listen[ing] to the needs presented to them” (Exp 1, 10 yrs., B Cur Hons).

“Incumbents (nursing education leaders) strengthen performance by providing resources for all employees i.e., lecturers, administrative, and support staff” (Exp 4, 16 yrs., PhD).

Usman (2016) avows that amongst others, adequate resource provision is essential to realise educational goals and objectives. In nursing education specifically, delivering adequate educational resources contributes to positive working conditions that allow nurse educators to employ learning and teaching methods that facilitate learning (Lateef & Mhlongo, 2019).

Another expert referred to resource provision to enhance students' well-being i.e., student support.

"... the ability to harness resources for student support (student counsellors, social workers, and psychologists) rests on the leadership, and effective utilisation of these support systems improves the chances of producing a better professional nurse" (Exp 2, 10 yrs., B Cur Hons).

Student success is widely attributed to student support. Expert 2's view finds support in Darling-Hammond et al. (2020) who accentuate vital educational resource provision. Academic support and social support in the form of counselling, financial assistance, and healthcare, were found to improve students' academic achievement (Kamunyu et al., 2016; Biasi et al., 2017; Thuryrajah et al., 2017).

Regarding being proactive, Expert 7 referred to taking initiative to ensure that their NEI recruits more applicants before the cessation of the legacy nursing programmes, a situation that was most likely to have a serious impact on the institution's survival.

The Minister of Health did not approve the Regulations for all the post-graduate specialist qualifications... no intake of post-basic students in 2020... that would pose a real threat for the School of Nursing. As a pro-active measure we spread the message that 2019 would be the last year to enroll for the existing legacy qualifications. We did a marketing roadshow in the Northern Cape and visited the local clinical platform... we placed special messages on the web page of the School of Nursing. We have received 663 applications for 2019..." (Exp 7, 10 yrs., PhD).

Taking initiative in the face of unforeseen and adaptive change is viewed as a crucial leadership strategy (Brodie, 2019; Mrig & Sanaghan, 2017). Setiawati (2016) supports the above sentiment in saying that facing certain predicaments, leaders ought to be proactive in thinking, planning, and effecting strategies to conquer a precarious milieu and craft the necessary changes, without losing their focus on primary tasks.

As far as partnership and stakeholder collaboration is concerned, three participants cited the importance of a good working relationship between nursing education leaders and other key stakeholders.

"... entities are coming together and discussing the way forward in nursing education. With issues pertaining to the new nursing qualifications, ... support from various bodies and CNO's office established links with universities, SANC, CHE, and DoHET to provide support towards making this change a reality. Strategic partnerships are with political principals also, thus involving them in crafting the future of the nursing profession" (Exp 2, 10 yrs., B Cur Hons).

"The incumbent (nursing education leader) collaborates and networks with other principals in sharing best practices" (Exp 4, 16 yrs., PhD).

Collaboration and partnership between HEIs for purposes of resource sharing, curriculum innovation, and reputation improvement has gradually become a norm (Chou, 2012; Pillay et al., 2014). Direko and Davhana-Maselesele (2017) confirm the cooperation established by interdependence and pooling of expertise, resources, and individual contributions. It is believed that creating and sustaining academic practice partnerships is an approach that could effectively address the intricate challenges and changes in healthcare and education.

In terms of being responsive, some experts mentioned the positive reaction to the current trends and developments in the profession such as interprofessional education (IPE) and applying technology in nursing education.

"... institutions are not only gearing themselves for the new qualifications, but also looking at global trends and buying into them, e.g., interprofessional education and the use of technology in strengthening teaching and learning" (Exp 5, 20 yrs., PhD).

"... nursing students, ..., are technologically-savvy, more than those who are supposed to facilitate their education, and the gap is even bigger with those in leadership ... The leaders of today are to a larger extent aware of the technology gap and are catching up with technology, using it to improve communication, and to be more effective" (Exp 2, 10 yrs., B Cur Hons).

The measures implemented to respond to the new nursing education trends, i.e., IPE and the required use of technology as required by the two participants are seen in a positive light as something that could

facilitate the survival of nursing education leaders amidst the global difficulties facing them. Andersen et al. (2019) support that tumultuous milieu like HE requires leaders who can take instant responsive actions to explore strategies that work in new situations and employ them to adapt operations to obtain a better fit with the changing conditions.

Interprofessional education and collaborative practice at undergraduate level are believed to enhance teamwork across professional boundaries in future practice (Reeves et al., 2013; Butler, 2016). Volmink (2018) supports IPE, stating that professional 'tribalism' is perceived as a significant obstacle against effective healthcare delivery.

Increasing digital proficiency is important especially with 4th Industrial Revolution being one of the challenges in the 21st century (Gleason, 2018; Penprase, 2018; Oke & Fernandes, 2020). Integrating IT into nursing education is reaffirmed by its positive effects i.e., enhanced student contentment, learning, engagement, and motivation as an important experience for their future lives (Eryilmaz, 2015).

Pertaining to results-orientation, a particular expert offered a view on how nursing education leaders strive for higher student throughput rates.

"Incumbents (nursing education leaders) improve the throughput of graduates by ensuring that teaching and learning is facilitated in a manner that promotes progression than demotion" (Exp 4, 16 yrs., PhD).

The current national healthcare demands obligate NEIs to educate and train sufficient nurses to meet the country's healthcare demands, and based on Expert 4's perspective, it seems as if the call to produce nurses has been well received amid the challenges faced by the South African NEIs. This is in line with De Lacerda (2015), who claims that results-oriented leadership consistently impacts on outcomes and connects leadership qualities to preferred consequences.

Concerning acknowledgement and recognition, the following sentiment was shared:

"Celebration of every success ... serves as encouragement for greater success. We advertise every significant achievement of our staff members on our LCD screen in the foyer of the building, on webpage of the School of Nursing, and announce all successes at staff meetings" (Exp 7, 10 yrs., PhD).

Acknowledging staff achievements has been seen to be having a definite influence on organisational performance and effectiveness. In educational settings specifically, Öqvist and Malmström (2018) confirm that motivation is an effort and inner state that invigorates didactic activities, expedites learning, and directs behaviour towards attaining academic aspirations.

A participant expressed how nursing education leaders managed to endure amidst the difficulties facing the country's nursing education atmosphere.

"Resilience to persevere in less-than-optimal environment, e.g., dealing with current challenges of [the] nursing education climate" (Exp 6, PhD, 5yrs).

Southwick et al. (2017) affirm that institutes with competences to regain balance after exposure to unfavourable events and/or to grow in a risky landscape, not only to survive but also to flourish in an environment characterised by change and volatility. Moreover, resilient institutions have leaders who display continual support of mission of institutions and encourage a higher tolerance for uncertainty and persistence when confronted with threats (Southwick et al., 2017).

Reflecting on sub-theme 2, Beer et al. (2016) affirm that leadership must include attitudes in addition to knowledge and skills if the organizations effectiveness is to be improved.

5. Limitations

One of the important limitations of this study included reaching the entire population of South African nursing education leadership experts for the exploration of the country's existing nursing education leadership strengths and receiving feedback timeously from those contacted. The second limitation was the low response rate. From thirty invitees who were deemed to be experienced South African experts, only ten of

them took part in the exploration of South Africa's existing nursing education leadership strengths, with the majority being attached to universities. South African NEIs i.e., university nursing departments and nursing colleges have been operating differently in terms of governance, curriculums, and resource. Therefore, it would have added value to hear the voices of more nursing college leadership experts. Failure to receive a sufficient input from the governmental nursing education leaders and private training institutions is also considered a study limitation.

6. Conclusion

The current HE demands continue to pose a threat to nursing education leaders globally, requiring them to effectively respond to these to survive. As indicated earlier, the South African nursing education leadership is not exempt from these difficulties of having to operate in a highly challenged and transforming context. Emerging from this study, the following leadership competencies are proposed as fundamentals for surviving emergent challenges: subject expertise and didactics, suitable educational qualifications, clinical experience; financial, talent, performance, project management proficiencies, resourcefulness, and innovation; proactivity; partnership and stakeholder collaboration; responsiveness, results-orientation, acknowledgement, and recognition and resilience and perseverance.

6.1. Relevance for educational practice

The role of competent nursing education leadership requires strategic consideration to sustain and advance South African NEIs into HEIs of the twenty first century. Investment in continuous development is therefore crucial to ensure that nursing education leaders remain relevant and effective in taking nursing education to greater heights.

6.2. Recommendations for future research

Similar research exploring nursing education leadership competencies in wider contexts could enrich the current findings. Future research should explore the extent to which nursing education leadership competencies could serve as the basis for organisational productivity and success.

CRedit authorship contribution statement

Lebuile John Mogakwe: Conceptualization, Data curation, Formal analysis, Methodology, Project administration, Validation, Writing – original draft, Writing – review & editing. **Deirdre Van Jaarsveldt:** Conceptualization, Formal analysis, Supervision, Writing – review & editing.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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