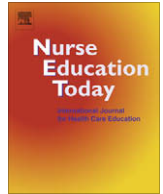




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Mature students' experiences of undergraduate nurse education programmes: The Irish experience

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SUMMARY

In recent years mature students have been encouraged into nurse education for the valuable qualities they are known to possess, along with their ability to assist in providing a sustainable solution to the current health care crisis. Unfortunately corresponding resources and support structures have not accompanied this widening of access and mature students are expected to fit into structures that already exist, structures that were formulated with eighteen year olds in mind.

This qualitative study explores the experiences of mature students in nurse education. Three discipline specific focus group interviews were used as a means of gathering data from 28 mature students. Data were analysed using thematic content analysis as described by Burnard [Burnard, P., 1991. A method of analysing interview transcripts in qualitative research. *Nurse Education Today* 11, 461–466].

Findings revealed that students continue to struggle with the academic component of the course. They also found it difficult to balance the home and university divide. Greater challenges were identified by female participants as they maintained their previous roles. Males on the other hand were provided with greater freedom to pursue their studies.

There is a need for curricular changes to be implemented in order to provide a greater flexibility and supportive experience for mature students. Further research is advocated in this area.

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Introduction

It is suggested that current strategies in the recruitment of nursing students place an emphasis on the recruitment of 'non traditional groups' (Fleming and McKee, 2005, p 236). This undoubtedly will increase the number of mature students choosing nursing as a career. Lowry (1992) suggests that mature students are better students for nursing because of their emotional maturity and intrinsic motivation, characteristics that are uniquely desirable in a highly demanding and ever changing healthcare environment. In addition, mature students have the potential to become a sustainable worthwhile solution to the current health care recruitment crisis as they are more inclined to work locally and stay in the profession longer once qualified (Bond, 1992).

An increase in the availability of more flexible nurse education programmes, which are sensitive to the needs of mature students, has been advocated throughout the literature (Harker et al., 2001; Cuthbertson et al., 2004). However, mature students are often expected to fit into the structures that already exist, making their

progression through nurse education programmes more challenging. Consequently they are vulnerable to attrition. While the experiences of mature students in nurse education have been documented elsewhere, there is a lack of information describing the Irish position. This is timely given nurse education's recent transition into third level education and the apparent increase in the number of mature students applying for places on nursing courses. The aim of this paper is to articulate the experiences of undergraduate mature nursing students undertaking either the general, psychiatric or intellectual disability programme.

Background/literature

Nurse education in parallel with higher education has engaged in a process of widening access to educational provision. This has resulted in a move from recruiting primarily young female school leavers in nurse education to increasing numbers of male and female mature students. In the Republic of Ireland, while the number of places available for mature students varies with each academic institution, they account for approximately 15% of each intake of general nurses and 35% of each intake of psychiatric and intellectual disability nursing courses (An Bord Altranais, 2005). A mature student is defined as an individual who is 23 years of age or over on the first of January in the year of application. In terms of admission procedure mature students can apply through the Central Applications

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Office like all other students where acceptance is on the basis of educational qualifications and students compete for places based on a point system. They can also apply as a mature student and are required to carry out a written assessment. Those who achieve a specific standard in the written assessment will be called for interview and if successful will be offered a place on the programme (An Bord Altranais, 2005). Most mature students enter by the latter route.

Previous research has shown that while the majority of full-time mature students have a positive experience of higher education (Inglis and Murphy, 1999), they often experience greater problems academically, psychologically, socially and financially when compared with traditional students (Leonard, 1999). They have to cope with family, relationships, money, exams, essay writing, health and the constant temptation to drop out (Fleming and Murphy, 1997). Along with all these problems, nursing students have demands over and above those which may be experienced by other students. These demands include shift work, being away from home on clinical placements along with the emotional burden of professional caring (Lauder and Cuthbertson, 1998). To date no such study has been reported in the Republic of Ireland.

The educational experience

Mature students generally find the first year of college particularly complex with most students identifying difficulties with study skills, essay writing, time management and concentration (Howard, 2001). The first academic assignment seems to cause the greatest heartache. Because the typical mature student has been away from any formal education for some time, there may be a lack of insight into what is required in the assessment and the standard that is required to pass (Inglis and Murphy, 1999). Despite this, mature students perform just as well as traditional students academically (Ofari, 2000).

Nurse education was found to be more demanding both physically and psychologically than other forms of higher education in Meachin and Webb's (1996) study. Students in that study felt that academic staff did not support them enough and that the course was not designed with the needs of mature students in mind. In order to survive the challenges they face, mature students identified various coping strategies which include; neglecting housework, planning assignments well in advance in case of family crisis and a short evening nap to allow study into the night (Meachin and Webb, 1996).

Previous research has shown that relationships and external commitments figure prominently in the lives of the mature student in comparison to their younger colleagues. Partners, children, family and work commitments play a crucial role in the success or failure of the mature student (Steel et al., 2005). For married/cohabitating students, particularly with families, a return to full-time higher education often places a strain on their relationships and precipitates relationship difficulties (Howard, 2001). In addition mature students often face hostility, resistance and a lack of support from partners over their decision to return to education (Mc Givney, 1993). As a mature student there may be a home to run and children to look after along with the academic pressures of exams, assignments and clinical placements. Role negotiation between partners is thus of paramount importance (Fleming and Murphy, 1997). For this reason most married/cohabitating women identify the importance of a partners support as crucial to survival in the world of education (Leonard, 1999).

Childcare was identified as a problem for most students in Meachin and Webb's (1996) study with childcare costs proving very expensive. Almost all students thought it was more difficult to be a student with children and feelings of guilt at not giving the family adequate time were commonly expressed. Gender differences

emerged in the types and extent of problems experienced by students in Lauder and Cuthbertson's (1998) study when over half the male participants did not identify childcare as a problem. Fleming and Murphy (1997) had similar findings. This is an interesting observation that childcare issues do not appear to cross the gender divide.

Methodology

Research aim

The aim of this study was to explore the experiences of a group of pre-registration general, psychiatric and intellectual disability mature nursing students undertaking the Bachelor in Science in Nursing (BSc Nursing) in the Republic of Ireland. A secondary aim of the study was to examine the gender differences in the type and extent of problems experienced.

Research design

A qualitative descriptive approach was considered the most appropriate to address the research question as it focuses on the experiences of individuals and emphasises their uniqueness (Streubert and Carpenter, 1999). This approach was chosen as according to Sandelowski (2000) it is the most appropriate method when the aims of the research are to describe the phenomena of interest. Focus group interviews were considered fitting to collect the data as they have been shown to be beneficial when exploring the experiences of a homogenous group (Holloway and Wheeler, 2004). Furthermore they are an efficient means of collecting rich data and have been used successfully as an alternative to one to one interviews (Curtis and Redmond, 2007). Holloway and Wheeler (2004, p. 110) define a focus group as involving "a number of people – often with common experiences or characteristics – who are interviewed by a researcher (or moderator) for the purposes of eliciting ideas, thoughts and perceptions about a specific topic or certain issues linked to an area of interest". This was in line with the aims of the research which was to encourage the sharing of perceptions and ideas (Morse and Field, 1996).

Ethical considerations

Following receipt of ethical approval and permission to access the sample from the university where the research was completed, an independent gatekeeper emailed the students inviting them to participate in the study. As the students were known to the researchers, utilising a gatekeeper helped to minimise any perceived coercion and to balance power differentials. The voluntary nature of the research was also made explicit in the initial contact with the participants and was reiterated in the information sheets distributed to interested students. Students were asked to read the information sheets provided which also clearly stated that there was no penalty associated with non participation or withdrawal. Students were invited to contact one of the researchers if they required any additional information or if they were willing to participate in the study. Throughout the study ethical issues in relation to human research were maintained. As the response rate was relatively poor the researchers were satisfied that those who took part, did so voluntarily.

Sample

All students who were admitted to the undergraduate BSc (Nursing) course under the mature student code and who were in years two, three and four of the programme were invited to participate ($n = 115$). First year mature students were excluded from

participating in the study as at that time they had only completed a few months of the course. Only students who were under theoretical instruction at that time agreed to participate. Three focus groups were carried out and a total of 28 students participated from all three disciplines. This accounted for 32% of the total number of mature students. The sample comprised of 24 female and 4 male students, of whom 18 students stated they were married or in a relationship. Twelve of the participants had at least one child. Participants' ages ranged from 25 to 46 years. To protect the anonymity of the male participants it was agreed not to disclose the exact numbers who attended in each discipline.

Data collection and analysis

Data were collected using three discipline specific focus groups. The researchers decided to interview students from the same discipline together as these students were together for theoretical instruction since they started the course and therefore may be more inclined to discuss their personal experiences more freely within a familiar group. Information regarding the study was reiterated at the beginning of the focus group and all questions were answered. The participants signed a consent form indicating that they provided informed consent to take part in the study and for the interview to be audio recorded. Participants were provided with a copy of this consent form. As with all ethically sound research, ground rules were set at the beginning of each focus group. Issues such as freedom of speech, mutual respect and confidentiality were discussed and agreed. The participants were requested to avoid mentioning specific lecturers' names and to discuss their experiences in general terms. Where this occurred the names were deleted from the transcript. The same moderator facilitated the three focus groups to ensure equivalence. The interviews were audiotaped and transcribed verbatim, to maximise the accuracy of the data. This also has the potential to enhance the validity of data analysis (Lane et al., 2001). Interviews lasted between 65 and 80 min. The observer, who had taken notes during the interviews, summarised the discussion at the end and sought verification from the participants. This helped in establishing the credibility of the study. Data were analysed using Burnard's (1991) framework consisting of a system of coding and categorisation and a descriptive approach as described by Sandelowski (2000) underpinned the analytical approach. The data were read and reread by one of the researchers which ensured familiarity with the data and the development of key phrases which described the experiences of the mature students in the study. This process was repeated by another researcher to ensure that all the data were captured and interpreted accurately in the analysis. The findings reported in this paper explore specifically the mature students' educational experience and balancing college and home life.

Findings

The categories which emerged from the analysis of the three focus groups are discussed in this section. The quotations presented are representative of a range of participants from the three groups. Interestingly no differences emerged between the disciplines although there were some marked differences between the male and female participants.

Experiences of the educational component

Mature students in the present study found it difficult returning to full-time education, particularly those who had been out of formal education for some time. All students found the first year of the course to be the most difficult as lectures were based at a level

mature students found difficult to comprehend. As the students described their experiences and their learning needs during interview they frequently compared themselves to the traditional students, clarifying why it is more difficult for them.

'I am ten years out of school. . . I can't remember how to write. . . this is the way it should be structured and this is how you go about references. It was all completely foreign to me'.

Essay writing was identified by all students as a major hurdle they found difficult to overcome and particular reference was made to the first essay and the first exam. A need for greater support for mature students and guidance on essay writing was a view expressed by all participants.

'if you had somebody to run things by just before you hand it in, not that you want to know the answer, its just where you are going wrong, because it's a long time since we were in school.'

Participants also expressed a need for the curriculum to be revised to incorporate the needs of the mature student. Areas they would have liked more guidance and information on included: study skills, how to write an essay, time management, the layout of exam questions and the standard that was required to pass.

Mature students were generally unhappy with the support they receive from academic staff and the college in general. The degree of support, guidance and feedback provided on assignments, varied depending on the individual lecturer. While participants were aware that there are support structures available specifically for mature students in the university, all students agreed that their timetable did not allow them to access these services so in reality it was not of any benefit to them.

'I'd like a better support system. I realise there are support systems here. . . but I tried to go to the class for academic work and it was 1–2 in the afternoon, I was starving it was my lunchtime. . .'

All participants identified other mature students as being their major source of support. This peer support helped them to comprehend the different demands of the course, meet assignment deadlines, overcome writers block and vent their frustrations. They felt that this support helped them to remain motivated and continue on the programme.

'If it wasn't for friends of mine that continuously either get me stuff or whatever, its fantastic'

The students grappled with the dilemmas associated with their return to full-time education. Their life experiences, general maturity and their ability to communicate were all assets they had brought with them into nursing. Students recognised that they are an investment to the health service and were angry that their specific educational needs as mature learners were not being met within the programme.

'We are an investment. . . A lot of mature students have done our travelling. . . its not as if we are going to leave the country. We are going to be working here after qualifying so they should take care of us more'

Despite the difficulties mature students encountered, they appeared to cope very well and indicated that they achieved very good results overall. No gender differences emerged from learning needs.

Balancing college and home life

Findings in the present study suggest that mature, female students particularly those with children experienced difficulty balancing their lives. Those who were single with no external

commitments found the course caused less disruption to their family life.

'I find its a constant juggling act as a mature student... you are trying to juggle college with your family, assignments and everything else, its continuous...there are never enough hours in the day to do what you want to do'

All students with children identified finding time to study as a problem and were frequently torn between the two. Feelings of guilt at not giving their child enough time were frequently expressed. Interestingly, the age of the child did not seem to matter. Those with teenage children were just as challenged as those with babies and younger children.

'Coming up to the first set of exams at Christmas I remember my daughter saying to me, I wish you weren't in school because I never see you anymore. You know that was very hard, it was at that stage that I said I'm leaving, I can't do this anymore...'

On a positive note the reaction of children to their parents return to education was very positive

'My kids see me as a role model and they tell their friends, my mam is in X (names college) and they are very proud of me'

Support was identified by all as crucial to survival on the course from a practical, emotional and financial level. All students spoke at length about the support they received or in some cases did not receive from partner, family and friends. For some that support prevented them from leaving the course.

'My husband was the one that said you are not leaving, you are going to do it...but then there is an awful lot of guilt on me because my husband is left to do the housework. He is left to do a whole load which I feel that I should be doing as well but I just can't.'

While most participants obtained financial support from their spouse/partner, emotional and practical support was more haphazard with some participants stating that the latter was provided as long as it did not interfere with their time together. Others were made to feel guilty by their spouse for not spending enough time with them. Gender differences were identified in the level of support received from spouses/partners in this study. Most of the female participants continued to carry out the same household duties that they had completed prior to undertaking the course:

'He (husband) complains that he never sees me. Then when I am at home I'm organising things that have to be done in the house, basic household things...then he is saying could you not just leave that for another time but otherwise the bills wont get paid or there's no shopping done you know, the laundry, all the usual sort of things that you need to do.'

Interestingly the males in the group did not identify as many problems with most stating that their wife provided lots of support as demonstrated in the following excerpts:

I have a very supportive wife ...she plays a big part in my survival e.g. typing my essays. She also does photocopying for me.

I am told by my wife when I need to be present (for the children) but otherwise she does everything, giving me time to study.

A few students commented on the relationship difficulties they experienced associated with full-time study. Exam time was identified as being particular stressful on relationships:

'It definitely puts a stain on things; you would need a very strong relationship'

Even though the students in this study faced significant challenges they still enjoyed the course and were glad of their decision to become a nurse. Not only was it considered to be their last attempt at gaining an academic and professional qualification it was also perceived as being important for the students' own personal development.

Discussion

It is interesting to note that while three different registration groups were interviewed there were no differences between the groups' experiences. The differences were gender based as opposed to discipline specific based. Male participants were represented in the same ratio as they are generally in nursing which adds to the validity of the sample.

Overall the findings in this study are in congruence with previous research on mature student experiences. The struggle with the academic component of the course is not confined to mature students in this study, with earlier researchers reporting similar findings (Steel et al., 2005). In this study participants expressed a need for the curriculum to be revised to incorporate the needs of the mature student. These findings are not ground breaking. For years similar findings are reported in studies investigating mature nursing student experiences, yet the problems remain. If nurse education was truly progressing towards a new paradigm and fostering an andragogical approach to nurse education this difficulty would not have emerged. Cuthbertson et al. (2004) suggest that the problems that mature nursing students experience may not be a result of the undergraduate curriculum, but may be rooted in the culture of nurse education itself. This culture often sees a conflict between the professional requirements of the nurse education programme and third level education. While support structures have been implemented in the university, mature students on nursing courses cannot access these structures as their theoretical component involves much more contact hours than mature students on other courses. Furthermore, students are required to attend clinical placements that are often geographically distant from the university which further distances them from mature students in other disciplines and impacts negatively on their ability to avail of structured support. This finding clearly indicates the need for greater flexibility by the university with revising the curriculum and reducing contact hours. This would allow greater flexibility when timetabling thereby freeing up the students to attend the support structures currently in place.

While all participants in this study experienced similar learning difficulties, it was the level of support received that had the greatest impact on their experiences. Davies et al. (1994) categorise support as practical, emotional or financial. While some partners may verbally state that they support their spouse, unless the adult learner is encouraged and supported emotionally along with practical assistance in domestic duties then the course may prove too difficult to continue (Mc Givney, 1993). Similar to Leonard's (1999) study this research found that women were supported by their partner if they adhered to conventional gender expectations within the household and time spent with their partner, while balancing full-time study. Mc Givney (1993) discusses the unequal power within relationships that is sometimes exposed when women seek to participate in activities outside the home, with many women abandoning their interest for the sake of family tranquillity. Others continue regardless of their partners' reaction. In this study it is not possible to determine if students will withdraw because of inadequate partner support. It would be

interesting to conduct a longitudinal study of mature students throughout their programme to identify how they coped with these dilemmas.

This study suggests that support in the college from lecturers is inadequate and that the mature students found each other to be their greatest source of support. This finding is congruent with previous studies (Steel et al., 2005) which found that support from fellow mature students played a pivotal role in their survival on the programme. It is therefore suggested that programme planners and academic staff encourage mature students commencing the course regarding the importance of fostering relationships with other mature students and forming study groups at an early stage. This has been found to be a successful coping strategy for mature students. According to West (1996) academic support is fundamental to the survival and success of the mature student. His findings revealed that when students received support, personal attention and recognition from their lecturers it increased their level of confidence and self worth and aided their survival, further emphasising its importance.

Historically nursing has been a predominantly female led occupation associated with devotion, domesticity and subservience, reflecting the patriarchal character of the health care system. Nursing and nurse education has traditionally come from a very hierarchical and authoritarian mindset where student nurses learn very quickly to conform and socialise into their nursing structures where authority, discipline and control are key element. In recent years the role of women in society has changed, largely through the women's movement and the efforts of women becoming more involved in political, social and economic activities (Galligan, 1998). Women's aspirations are no longer confined to home and family and there is an increase in the participation of women in the workforce including married women. However a large study ($n = 14,330$) carried out by Finlayson and Nazroo (1998) on gender issues in nursing, found that having dependent children increased the chances of women working part-time (45%) as opposed to men (5%). Likewise women were more likely to be the primary care giver for their children and were more likely to take a career break. In recent years because of the shortage of nurses along with the fact that nursing is a predominately female occupation it has become more family friendly in relation to the hours worked. Furthermore with initiatives to increase the supply of nurses it has become more acceptable for men to enter the profession. Although men still only account for seven percent of the profession (Report of the Commission on Nursing, 1998) forty percent of the senior posts in nursing are filled by men (Millar, 1990). These figures show that gender issues continue to be central to nursing and nurse education. This concurs with Lorber's (1994) suggestion that gender is a way of signifying power relations, with men generally in possession of the greatest portion of power. Women and men are frequently viewed as having different responsibilities, different rights, different rewards as well as different roles in society (French, 1985). The female students in this study continued to carry on their role as 'home makers' despite the challenges of the course. In some cases the dual role of student and mother was stressful and caused a strain on the individuals' relationships. However despite these challenges mature students coped very well which West (1996) attributes to the changing role of women in society over the years, which has resulted in them successfully adapting to a range of roles and demands. Men on the other hand do not appear to experience the same level of difficulties within the personal domain, arguably making it easier for them to return to full-time education. However our understanding of men's experience in nursing is limited, thus more research is advocated in this area.

Limitations

This study took place in only one college and makes generalisation to the wider population problematic however the findings are consistent with previous studies which support its usefulness. In addition only one cohort of students participated.

Conclusion

Mature students represent an increasingly important cohort of student nurses for many reasons. They are inclined to work locally and stay in the profession longer once qualified. In addition they are highly suited to professional caring because of their emotional maturity and personal experience. The findings of this small scale research study highlight the challenges that are a constant reality for mature students undertaking registration programmes. Although previous research has established that mature students experience greater difficulty than their younger peers, the position in Ireland has not been adequately addressed. We recommend that further research into the experiences of mature students be undertaken with particular emphasis on the experiences of mature men during their undergraduate nursing degrees. This could assist in the recruitment and retention of more male nurses. In addition, research aimed at evaluating the support structures in place for mature students on nursing programmes could help to illuminate gaps in the provision of supports particularly when students are on clinical placements. Providing for the needs of mature students is linked with sustainability and reduced attrition. This demonstrates that educating people mid life can be of benefit to the economy and to society in general. Because knowledge is a form of capital (Lynch, 1997) a greater financial investment in nurse education by actively recruiting mature students would eventually produce a larger return for the health services.

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