The Emotional Journey of Independent Learning:

An Interpretative Phenomenological Analysis (IPA) of Undergraduate Adult Nursing Student's Experience of Self-Managed Independent learning (SML) in one UK University

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This thesis explores the phenomenon of independent learning - using the local vernacular of Self-Managed Independent Learning (SMIL) - through the lived experience of thirteen final year adult nursing students in one UK University. Independent learning as a key purpose of higher education is well established and increasingly promoted within today's unprecedented and globalised world where knowledge itself is recognised as constantly changing. Undergraduate independent learning is therefore positioned as an important developmental process from learner dependency to autonomy in order to help promote lifelong learning beyond graduation. Yet little is known about how contemporary UK student nurses themselves experience this.

Interpretative Phenomenological Analysis (IPA) uses in-depth qualitative analysis to interpret how people make sense of major life experiences. Data was collected using individual face-to-face semi-structured interviews from participants across three cohorts in order to gain insight into their individual SMIL experiences and "life-world." True to IPA, individual narratives were closely and repeatedly analysed to identify individual participant themes before undertaking a cross-case analysis to identify both convergence and divergence between participant accounts.

Three superordinate themes emerged of "feeling overwhelmed," "the pressure of time" and "connecting socially" supported by fourteen subordinate themes indicating that SMIL is lived as an affective, temporal and social phenomenon. These findings offer an alternative and unique insider perspective on SMIL as an emotional journey in which learning to regulate and positively transform emotions precedes cognitive change, and thus plays a key, yet until now unrecognised, role in student nurses' development and transformation from dependent to independent learner. This thesis recommends that the sentient nature of SMIL and a pedagogy of emotion needs to be more fully recognised by nurse educationalist alongside the promotion of social and empathic relationships as mechanisms for enhancing successful student-centred facilitation of SMIL for adult student nurses.

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Award for which this thesis is submitted:

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April 2022

1.1 Overview of chapter

This study adopts a broad psychological perspective to empathically explore the student experience of self-managed independent learning (SMIL) from the perspective of final year undergraduate adult nursing students in one UK university. This chapter therefore sets out to argue that a new, empathic and student-centred understanding of contemporary SMIL experiences is both timely and important if current and future students are to both flourish and autonomously learn in a dynamic world of higher education and professional practice.

The chapter starts by identifying the cultivation of autonomous independent learning (IL) as a key purpose of all higher education (HE) programmes. SMIL is then defined and positioned as a developmental process that enables undergraduates, with support, to both take control of their own scholarship and to embark on a journey of learning autonomy and transformation. SMIL is therefore conceptualised as representing a developmental stage between learner dependency and autonomy in which undergraduate learner autonomy cannot be assumed at the outset. Personal positions and observations are offered which also draw attention to the multiple misunderstandings that exist, and which motivated my personal interest in the topic.

The chapter then considers a number of potential challenges to the experience and facilitation of SMIL by locating this study within the policy and socio-economic context of contemporary UK higher and nurse education in order to both situate and strengthen the justification for this study. The chapter concludes with the research question, aims and objectives and an overview of the thesis organisation.

1.2 Purpose of higher education

While universities continue to operate within many diverse cultural and intellectual traditions (Zgaga 2009; Cuellar et al 2022), the essential nature and formative merits of a university education appear to hold widespread national and international consensus. For example, the development and cultivation of independent life-long learning alongside moral citizenship, social responsibility, scholarship and critical enquiry are all highly valued graduate outcomes (eg Steur et al 2012; Bates and Kaye 2014; East et al 2014). Kiziltepe (2010) and Siriwongs (2015) further maintain that a basic presupposition of all higher education is that it should be both a transformative and edifying experience in which undergraduates are encouraged and motivated to pursue knowledge in their own idiosyncratic manner. For Barnett (2008; 2020) this encapsulates both an epistemological and ontological purpose which enables undergraduates to not only increase a particular skill set or knowledge area, but to also enable them to "become themselves" through a wide variety of embodied and increasingly independent learning experiences. A conceptualisation he suggests helps students to experience and contribute to the world in a meaningful and Eudaemonic way. In doing so, he argues that higher education should increasingly enable students to realistically evaluate their own performance, appreciate their giftedness and strive to independently direct themselves to meet ongoing and future learning needs.

Independent life-long learning thus becomes both an attitude to and skill for one's own intellectual and moral development that encompasses the desire to critically and meaningfully change and direct personal learning beyond graduation to future situations that require knowledge and skills, as yet unknown (Steur et al 2012). An argument also taken up by Sze- Young and Hussain (2010), who point to the ever decreasing "half-life" of knowledge within today's dynamic, unprecedented and globalised world.

From a policy perspective, and in line with these ideas, the Quality Assurance Agency (QAA 2018 Ch B3) UK Quality Code for Higher Education requires all higher education (HE) programmes, irrespective of discipline, to proactively

enable students to develop as independent learners and become more deeply involved in the process of their own learning. However, while autonomous lifelong learning as a fundamental outcome of higher education holds much unanimity, much simultaneous pedagogical evidence exists to indicate that autonomy cannot be assumed to be an automatic attribute of all students as they enter into undergraduate study (Brookfield 2005; Thomas et al 2015a). Universities are therefore challenged by the QAA (2018) to take higher education students on a developmental and transformative "journey" from varying degrees of dependency to learning autonomy whilst an undergraduate on their chosen programme.

1.3 The nature of Self-Managed Independent Learning (SMIL)

For the purposes of this study, SMIL is understood and defined akin to Thomas et al's (2015a: 4) ideas, albeit they uniquely prefer the term "directed independent learning," as

"Learning in which students, - either on their own or in collaboration with peers, - are required and supported to play an active, engaged and increasingly independent role in their own learning experience, guided by curriculum content, pedagogy, assessment and the learning environment."

SMIL therefore describes an important, - and according to Thomas et al (2015a), an integral, - higher educational learning process that can both initiate and promote the undergraduate journey to future autonomous learning. For example, SMIL enables higher education students to actively engage with their chosen curriculum and significant others to achieve and transform their learning. It thus places students in control of their own scholarship giving them increased responsibility for personal and curriculum learning outcomes.

It is not, as Ottewill (2002), Timmins (2008) and Thomas et al (2015a) are all keen to point out, purely about what students do when they go off to study on their own. Instead, it relates to the essential nature of undergraduates as

enquirers; their holistic needs as learners within higher order learning; and the process by which learners both exercise and develop a sense of agency and learner autonomy through social interactions with others (Çelik et al 2012; Thomas et al 2015a). As such, it reflects an increased and increasing student centred responsibility to achieve learning goals as students both progress through and actively engage with their programme without assuming autonomous ability at the outset.

For most undergraduate nursing programmes in the UK, the provision of both intra and extramural SMIL opportunities are therefore seen as an effective means by which the journey to life-long independent learning can be facilitated during the initial pre-registration period (Levett-Jones, 2005). Indeed, Ottewill (2002: 14) describes this as "setting professional markers for learning beyond the boundaries of academe." Given the changing nature of health care and the nursing profession (HM Treasury 2015; NMC 2018b) this remains an increasingly important aspect of all undergraduate nursing curricula.

1.1 Researcher foreknowledge and personal observations

Yet my own personal observations as a senior lecturer on an undergraduate adult pre-registration nursing programme in one UK university suggest that nursing students often appear to psychologically struggle to become independent life-long learners and can be uncertain how to approach their SMIL. These observed challenges have been the stimulus for my own on-going professional interest in SMIL and how universities can effectively cultivate and facilitate this for the benefit of both nursing and society.

For example, I have observed some students positively embracing these learning opportunities. However, many appear to find it a confusing and emotionally labile process based on a number of unclear and tacit assumptions that they do not fully comprehend and thus do not always eagerly engage in. I have even heard students describe these pedagogical opportunities in a pejorative manner as "D-I-Y Nursing" implying perhaps that SMIL can be perceived by some as a poor - and by implication, "unwanted" - substitute for

more highly valued didactic learning opportunities on the path to their own goal attainment. This appears particularly salient for those students who appear to perceive a university education as a form of "Faustian Pact" to be "endured" as a means to their career aspirations. Such students anecdotally appear to hold a strong instrumental view of learning in which education is conceptualised as a passive process of acquiring *the* pre-requisite knowledge, skills, credentials and pedigree required for professional practice as a nurse. To what extent such students are motivated to engage in SMIL as a vehicle for lifelong independent learning is unclear if higher education is perceived as little more than what Zgag (2009) describes as "learning for earning."

Conversely, I have observed many academic and practice colleague's frustration at students' assumed lack of engagement with SMIL opportunities. For my colleagues, SMIL appears to be a largely existential, purely discovery and andragogic learning concept. Consequently, there appears an expectation that students will automatically value and proactively take responsibility for their own learning as well as any existential consequences that arise from what is assumed to be an unfettered choice to enrol as an undergraduate student. The potential in such situations for many fundamental attribution errors, flawed reasoning and mutual misunderstandings is perhaps great and inadvertently can work against the effective facilitation of such SMIL opportunities if not idiosyncratically understood and positively regarded.

Similarly, my own reflexive experiences of past and current learning experiences are that the structure of the self is highly influential in the development and maintenance of autonomous learning and the avoidance of escape style coping strategies. Indeed, even though I have a desire to flourish, a passion for learning, a fascination with concepts as yet unknown, have had many past academic successes, am an adult in middle age, am resilient and hard-working, I am not immune to intense challenges and fluctuations to my self-concept and self-esteem along the journey of this project. This is not unlike the experience of nursing students who I have observed making comparable comments and who, like me, have benefited from the empathic support of

others in order to re-energise me into further and active engagement and autonomy.

Thus, while this study is primarily the opportunity for student nurses to tell their own stories, the phenomenological philosophy embedded within it also requires me to share my own story so my foreknowledge is made explicit, and I can clearly position myself within the research. For example, I came to this research study as a white female nurse educator in her early fifties with twenty years of experience working with undergraduate nursing students in the UK higher education context. My professional background is in both adult nursing and health visiting/public health, both in the UK and abroad. My general education was undertaken in a small single-sex English grammar school where I gained a passion and aptitude for the natural sciences and mathematics. However, while I continue to find statistical and quantitative explanations fascinating and I am attracted to the intellectual stimulation that I gain from the logical deductive processes involved, I have found myself increasing disagreeing with the epistemological tenets of positivism on which they are based. Moreover, my increasing personal and professional interactions with people at times of vulnerability and personal challenge, both as clients and undergraduate students, has heavily influenced me to believe in a more constructivist, existential and humanistic world view.

Similarly, as I reflect on my experience as a nurse educator, I am aware that like Rogers' (1961) I became quickly dissatisfied during my early career with naively aiming to be an omnipresent authority that would "fix" or "educate" people purely by sharing expert knowledge. My initial helping role was more related to "caring for" rather than "caring about" and did not appear to produce the results I had anticipated. This led me to question the purpose of higher education itself and in doing so started a passion for understanding the nature of independent learning.

This disequilibrium and subsequent deliberations also helped me develop a more student-centred pedagogical philosophy and a fore-conceptional belief

that higher education is as much an ontological as it is an epistemological experience for all those involved. As such, I believe we have a humanistic and civic responsibility within higher education to develop people, not just award university degrees. This perspective has been further reinforced by my work with many first-generation undergraduates who never anticipated attending, let alone graduating, from university and who have had to overcome multiple structural barriers prior to their higher education. Their self-efficacy is often low, and their higher education journey is frequently challenging and hard work, albeit ultimately rewarding. I have found a more empathetic pedagogical approach that aims to understand students to be the most effective.

Over time, I have often also felt "out of step" with the market forces and bureaucratic nature of some governmental policies and approaches which appear to prioritise instrumentalism as well as short term hedonistic over long-term eudemonic student wellbeing and emancipation. My hope and for fore conception for this research study is that it will provide me with a way to further articulate this student-centred ontological approach and turn a philosophy into informed practical strategies that can be shared with others. Thus, helping to challenge some of the more neo-liberal ideas that appear to be sweeping contemporary higher education for nurses.

1.2 The changing nature of contemporary health care

Equally, health care today is hallmarked by proliferate and unprecedented demographic, epidemiological, technological, social, political, economic and fiscal changes. Against this dynamic backdrop, current and future nurses are required to provide safe, person-centred and evidence-based nursing practice in an interpersonal, compassionate, responsive and high- quality humanistic manner (NMC, 2018a; Willis Commission 2012). The need for practitioners to therefore flourish and continue learning throughout their career as a pre-requisite for managing the complex and dynamic nature of these multifaceted changes is now widely recognised (Borisova 2010; NMC 2018a; ICN 2021). Indeed, Saks and Leijen (2014) argue that if professionals are to both live and work in a world where extant knowledge will quickly become obsolete, learning

itself needs to be redefined by society, as a lifelong and largely self-reliant process.

For contemporary and future nurses working in today's complex health arena, this is highly significant and draws attention to the need for life-long learning skills to be nurtured and for them to receive positive regard during their undergraduate pre-registration programme if they are to transform their ontological self accordingly (Jarvis 2005; Falk et al 2015). An issue the NMC (2018b) themselves recognise in the emphasis they now place on future nurses being both resilient and emotionally intelligent lifelong learners.

Correspondingly, the nature of learning for nursing students, unlike many of their undergraduate peers, is highly contextualised incorporating not just academic but professional nursing outcomes related to the cognitive, affective and motor skills domains (NMC 2018c). For example, the independent Willis Commission Report (2012) into nurse education highlighted the positive relationship between excellence in nurse education and graduate nurses' ability to deliver high quality client- centred care. In doing so it also identified the need for a well-educated graduate nursing workforce to practise, lead and challenge future nursing. Thus, emphasising the importance of contextualised and applied knowledge for safe humanised practice as well as life-long learning skills in order to keep pace with both technical advancements and increasing complexities in health and healthcare. The recent COVID-19 pandemic arguably being an unexpected example of this.

1.3 The changing nature of contemporary higher education

How well undergraduate students, and in particular adult nursing students, understand and value these SMIL opportunities as learning opportunities "that matter to them" and help them develop their ontological and epistemological self remains nonetheless, a moot point. For example, the on-going reformation of higher education (HE) and the current political drive for more economically and market orientated higher education systems (Department of Education and Skills 2003; Department for Business, Innovation and Skills, 2011; Williams

2013), has arguably encouraged students to increasingly see themselves as consumers. To what extent students may therefore see themselves as consumers first, and a learner second, is a point taken up by both Ottewill (2002) and Williams (2013). Interestingly, both raise concerns that future students may be less interested in acquiring the skills and discipline needed for SMIL as financial constraints caused by a changed, - and changing - funding system (Bates and Kaye 2014; HM Treasury 2015; DfBIS 2016) may mean that the need to earn an income, takes precedence over SMIL.

According to Williams (2013) this commodification of higher education and the resulting consumerist attitudes of entitlement have also led to increasing number of new undergraduates seeking to passively "possess" their future degree without feeling the need for active and earnest intellectual engagement and independent endeavour. An argument supported by Bunce et al's (2017) UK undergraduate survey research in which students adopting a high student consumerist approach, tended to identify less as an independent and higher education learner. They consequently adopted more surface learning approaches with resulting lower average grades.

These same criticisms are also taken up, rather satirically, by both Collini (2012) and Rolfe (2012a) who, in coining the terms HiEdBiz and McVisity respectively, aim to draw attention to what they see as pernicious and increasingly ubiquitous policies and practice of many contemporary - and increasingly corporate - universities. As such, they warn against the prevalent "corporate" attention given to league tables, graduate employment rates, research output and student satisfaction in the publicity to recruit new undergraduates. They also see it as a potentially fallacious measure of educational quality. Indeed, they argue that the traditional verities or "truths" regarding the value of higher education in terms of personal and intellectual challenge and autonomous learning outcomes are increasingly being disregarded in favour of short- term economic indicators, graduate employment gains and student enjoyment. An issue also raised by Zgaga (2009) and Cuellar et al (2022) when discussing the key purpose and role of future higher education on a European scale

suggesting this concern for SMIL participation has similar international resonance.

Elliot (2016) also asserts that contemporary student satisfaction priorities tend to adopt a subjective and hedonistic approach to wellbeing where pleasure attainment and pain avoidance become priorities for both the organisation and the learner. Wellbeing thus consists of having student's desires or preferences fulfilled in a type of "desire-satisfaction" model of welfare (Heathwood 2006). Against this backdrop the challenging pedagogical and Eudaimonic ontological dimension of SMIL can easily be lost and go unrecognised by students making its facilitation potentially even more challenging.

Bates and Kaye (2014) also point to the reduced face to face contact teaching time many academics now experience as well as larger and more diverse student cohorts which makes the facilitation of SMIL potentially more challenging yet also more important. This potential salience is also highlighted by a nation-wide review of the highly influential National Student Survey (NSS) undertaken by Callender et al (2014) on behalf of HEFCE, the NSS commissioners. In their report they argue that the privileging of student choice and satisfaction significantly misrepresents the nature of higher education and the important role of student engagement and independent learning commitment within higher forms of education and the co-curriculum.

Massification has also brought diversity and additional numbers of students participating in higher education, with nursing being no exception. For example, the government's policy on widening participation in HE requires all HEI's to ensure that their admission procedures offer equal opportunities to all applicants, including those from under-represented social groups (DfBIS 2015). Over the last decade, nursing has consistently remained one of the most popular of all university courses with over 30,390 accepted applications for the academic year 2020/2021 (UCAS 2020). It also has the most diverse pool of applicants compared to other major undergraduate subject areas (UCAS 2020).

Nurse education today consequently reflects a complex mix of social, ethnic and age groups with a wider variety of educational experiences and readiness for SMIL type learning. However, there is also evidence that students who experience a dissonance between their expectations, skill level and experiences are more at risk of withdrawing from HE programmes, but effective academic and social integration of students with faculty staff that understand them, positively influences their retention (Tinto 1993: Pleitz et al 2015; Korstange et al 2020).

1.4 The nature of Millennial and Generation Z learners

The extent to which the current and new generation of undergraduates understand the expectations and value of SMIL at the outset of their academic career is therefore perhaps increasingly uncertain. Salzberger- Wittenberg et al (1999) point out that from birth and for a considerable period thereafter, human learning primarily takes place in a dependent relationship to another human being. They go on to argue that the quality of this relationship is vitally important for life-long human flourishing and learning since it strongly influences the hopefulness required to become and remain curious, open to new experiences and to discover new meanings as an independent adult.

Ramsden (2013) similarly highlights that prior to entry most students have a fairly limited view on what higher education is really like and with massification, a wider range of expectations and misunderstandings now arguably exists.

Ottewill (2002) also contests that the pre-occupation of schools and colleges with their own league table positioning based on student exam results, means that current and future students are less likely to start their undergraduate careers with the necessary skills, experience and willingness for SMIL. They are also likely to have enjoyed prior success with a national examination system that rewards a good memory and close attention to teacher direction (Raidal and Volet 2009). Issues supported by the replication study of Shayer et al (2007) in which it was found that the independent problem solving skills of UK school children appear to have stagnated, or even at times regressed, since the 1970's with pupils remaining heavily reliant and dependent on teachers to direct

their learning and solve their problems. It remains to be seen how the generation of current school children whose general education has been disrupted by the COVID-19 pandemic will fare in this respect as they too enter into higher education in the coming decade.

Barker (1999) and Van dem Boom et al (2004) are generally more sanguine in their pre-COVID analysis and point to the advent of pervasive new on-line and computer technology in highlighting the many innovative and student friendly possibilities that developing technology can bring for engaging "IT savvy" students within their SMIL. However, both Black (2010) and Montgomery et al (2013) highlight the nature of millennial and Generation Z learners (ie those born just prior to and during the 21st century) describing them as non-linear and irregular learners who are unaccustomed to delayed gratification, have a lower cognitive load ability then previous generations and who prefer technology for entertainment.

Interestingly, both Frien et al (2013) and Rosen et al's (2013) research studies paint a similar picture for millennial students who were high social media and mobile phone users. Both identified the cognitive overload impact of being distracted and multi-tasking while studying whether in isolation or with peers and irrelevant of context (Frien et al 2013; Rosen et al 2013). Given the pervasiveness of laptops and mobile devises in HE classrooms and the home, this can perhaps challenge the effectiveness of contemporary and future SMIL opportunities within this generation of students. Equally, Wright (2011) and Weimer (2002) while acknowledging millennials preference for experiential learning and team work as positive strengths for the development of independent learning, also describe them as anxious, tentative, disempowered, lacking in both self-efficacy and self-motivation and eager to cede to their customary passive learner role. All of which may challenge traditional notions of SMIL and work against students perceiving the value of such learning opportunities in terms of their own learning and developmental priorities.

1.5 Working in two worlds: The role of HE educators

Simão and Flores (2010: 207) also highlight that contemporary educators need to constantly work in "two worlds:" The world of their own pedagogical needs and concerns and the world of their student's pedagogical needs and concerns. A situation they assert demands a constant, but often overlooked critical exploration of discrepancies between the actions and intentions in both worlds. Both my own personal perspective and that highlighted, for example, by Weimer (2002), Blumberg and Pontigga (2011) and Wright (2011) suggest there are indeed discrepancies between academic action and intention related to SMIL that is worthy of contemporary and empathic exploration of the impact this has on student nurses. This study therefore offers an opportunity to contribute to this understanding by uniquely and empathically shining a light on today's student nurses' own perspective and concerns as well as supporting the contemporary higher education interest in student-centred pedagogy and SMIL.

Brookfield (1995:46) similarly asserts that the path to excellent adult teaching and facilitation is through the process of critical and vigilant reflection and that expert teachers are those that continually hone their personalised "authentic voice and pedagogical rectitude" to reveal the value and dignity of their work. He goes on to suggest four lenses by which this can be achieved, namely the autobiographical, the student, the peer and the scholarly literature. This study has the potential to reveal to nurse educators a little more about the student lens to enable educators to subsequently reflect on their own actions and assumptions in order to confirm or challenge the effectiveness of their existing SMIL practice.

1.6 The demand for student centred pedagogy

Given its epistemological and ontological foundations, SMIL reflects a student-centred pedagogical approach to the development of independent undergraduate learning. Student centred pedagogies have attracted much contemporary HE interest and scholarly debate (eg Ahn and Class 2011; Wright 2011; Costa 2013) and are present in many recent reform agenda across the HE sector. For example, the Teaching Excellence Framework (Department of

Business, Innovation and Skills 2016) aims to ensure that all students receive an excellent teaching experience that encourages student engagement and places them at the centre of their educational process. Interestingly, these framework proposals also aim to build a culture where teaching has equal status with research and where students are provided with information to judge teaching quality.

Nonetheless, Costa (2013) argues that definitions of student-centeredness within higher education are inherently imprecise making it is easier to understand than define. However, Costa (2013: 267) does go on to offer a description conceptualising it as the consequence of certain ways of teaching that places students "at the centre of the educational process" and therefore, focuses on student learning and "students as active, responsible and increasingly autonomous learners." Thus, while there is currently no consensus of what constitutes a student-centred pedagogy or student centred HE programme, there does appear to be consensus that is also founded on social constructivist and humanistic ideas where active and engaged learning alongside student responsibility for learning outcomes as well as future learner autonomy, are all key features (eg Ahn and Class 2011; Wright 2011; Costa 2013).

As such, student centred pedagogy has also been described as both a transactional and multidimensional learning approach since it has social constructivist implications for course design and organisational of materials; requires an engaging, facilitative and motivating delivery; and assessments that steer increasing learner independence (Ahn and Class 2011; Costa 2013). Blumberg and Pontiggia (2011) add that responsibility for learning is also transferred to the learner who can no longer just "come to class and listen" but must be prepared to bring questions, contribute to class discussions and manage group work. Weimer (2002) similarly argues that student centred teaching can lead to greater student success since it recognises learners as holistic human beings whose affective and cognitive needs interact to determine learning success. As such, she argues that student's psychological needs

should be at the centre of the educational enterprise within all student-centred pedagogies. Ahn and Class (2011) suggest that this acknowledgement of student's cognitive and affective needs makes student centred pedagogies particularly appropriate for undergraduates who may still lack experience of being agents of their own learning.

1.7 Research question, aims and objectives

In light of this multifaceted context and my desire to promote a student centred pedagogy within current and future nurse education based, the research question posed is:

How do undergraduate student nurses on a Bachelor of Science adult nursing programme articulate, understand and make sense of their unique lived experience of self-managed independent learning?

The aim of this research derived from this question is therefore:

To explore and interpret student nurses lived experiences of self-managed independent learning during a Bachelor of Science adult nursing programme through the development of an empathic, in-depth and critical understanding of their unique perspective.

In order to achieve this aim, and ultimately answer the research question posed, the objectives of this study are

- To critically and empathically examine and interpret the oral accounts of individual students' psychological experiences of self- managed independent learning
- To critically identify and analyse the salient emotional, motivational, cognitive and environmental influences, meanings and contexts that have significance, both negatively and positively, for student nurses when experiencing self-managed independent learning.

To contribute uniquely to the existing body of knowledge by adopting a broad psychological perspective related to self- managed independent learning and student engagement within contemporary higher education in order to give student nurses "a more nuanced voice" in terms of their own lived experiences of self-management of their learning.

1.8 Organisation of the thesis

This chapter concludes by outlining the thesis structure. This chapter defined and situated the concept of SMIL and my own foreknowledge within the contemporary and dynamic world of higher and nurse education to argue that student nurses will need to be independent lifelong learners as never before when they enter the uncertain future of graduate practice. However, student nurses and nurse educators face multiple challenges that make an updated understanding of SMIL one of significant and contemporary pedagogical relevance.

This is followed by a critical, albeit brief, review of the extant SMIL literature in chapter two which further sets the scene for this study by clarifying precisely what is known and unknown in relation to SMIL and student nurses as well as the nature of adult learning. Having established a gap in the literature related to UK pre-registration student nurses own lived experience of SMIL the chapter concludes by confirming the research aim and objectives.

Chapter three takes the research question as its starting point to critically discuss the philosophical foundations of the interpretative and constructivist paradigm underpinning both this study and my own philosophical positioning. The Interpretative Phenomenological Analysis approach adopted is then examined in terms of philosophical congruence. The focus then moves to the research method and study design including rationales for recruitment and sampling and the process of data collection, including the use of semi-structured interviews. The chapter concludes with an analytical exploration of the ethical, quality and methodological reflexivity considerations in line with the paradigm adopted.

Chapter four extends the research framework and methodology to examine the process of data analysis adopted in this study and in particular the chosen heuristic framework used to structure the six key stages of analysis employed.

This is followed in chapter five by the co-constructed phenomenological narrative that emerged from this cross case analytical process. It offers a detailed and unique interpretation of the phenomenon of student managed independent that gives meaning to the contextualised lived experience of this from the perspective of student nurses themselves. The narrative focuses on the participants convergent and divergent lived experience of SMIL in which three superordinate themes are identified related to students lived experiences of SMIL and the meanings they attach to this. These include "feeling overwhelmed," "the pressure of time" and "connecting socially."

These superordinate findings are then synthesised and discussed in relation to the extant evidence base within chapter six to demonstrate how this study offers support to what is already known as well as contributing unique phenomenological understandings.

Chapter seven draws the thesis to a conclusion and proposes that the experience of SMIL is lived primarily as an emotional journey in which learning to regulate and positively transform emotions plays a key, yet until now unrecognised, role in student nurses' development from dependent to independent learner. Implications for various stakeholders and future researchers involved with nurse education are also offered before study limitations and strengths are evaluated.

Personal reflexivity is the focus of the final chapter (chapter eight) which captures my wide- ranging personal journey, transformative learning and future directions.

1.9 Summary of chapter

This chapter has provided a contemporary, multidimensional and personal context for this research study in order to situate and strengthen the case for exploring how undergraduate nursing students themselves experience SMIL. Developing as an independent learner remains a key graduate and nursing outcome in a world that is increasingly defined by unprecedented health care change and the changing nature of twenty-first century learners and the higher education context in which this takes place. Against this changing world background, this study seeks to highlight the importance of understanding how student's nurses with direct experience of this phenomenon find meaning within this in order to shape future student-centred pedagogies and facilitation.



2.1 Overview of chapter

This chapter provides a narrative literature review of the research evidence and peer reviewed discussion literature related to SMIL. It outlines the principles and processes adopted in order to locate, frame and contextualise the study in order to confirm a gap in the current knowledge base existed. Given the qualitative approach adopted for this research inquiry, this section is not exhaustive to ensure that I did not inadvertently and prematurely bias any data collection and analysis. However, once data collection and analysis were completed, a further literature review was undertaken to enable an informed discussion of the findings. The chapter concludes with a confirmation of the research aims and objectives that arise from both the gap identified and the research question.

2.2 Search strategy

The literature search was undertaken using a variety of electronic databases, inclusion and exclusion criteria, search terms and Boolean operators in order to identify a gap in the extant literature (appendix one). Both the search terms and inclusion-exclusion criteria were used to search the title and abstract of articles only in each of the databases as an initial review indicated that too many false positive results were retrieved when the full body of the article was also searched. However, where the title and abstract were unclear, the full text was still retrieved and reviewed. Where possible email alert facilities from various publishers for new articles relating to the search were also used. As a consequence of the initial search strategy a large number (>1000) of articles were identified. On initial reading of each article's title and abstract, if the article did not substantially address the concept of independent self-managed learning within health care higher education, it was eliminated.

Reference mining in accepted articles was also undertaken to ensure that potential articles missed in the initial search were not overlooked. This reference mining identified one research paper outside of the initial inclusion

criteria publication dates, but this was included given its relevance to the research question at the centre of this study. The remaining thirty-seven research papers were thoroughly assessed to determine eligibility using Kable et al's (2012) twelve step guide for documenting a search strategy to help focus on synthesising, rather than summarising, the literature. The tabulated form also enabled the review to remain manageable and focused (appendix two).

2.3 Analytical framework

The analytical review framework by Benton and Cormack (2000: appendix three) was then used to systematically and critically assess, analyse and evaluate the quality and cogency of the included literature. Hart (1998) strongly advocates that researchers should also attend critically to the evaluation of arguments if they wish to develop the work of others, suggest alternative courses of action and/or offer other ways of explaining something. According to Hart (1998) arguments are important because not only do they attempt to convince others of the validity or logic of how a person sees the world, they also aim to cogently persuade others to see it that way too. As such, Hart (1998) proposes that the type of claim together with the reasons and evidence for the claim to be accepted by others, also needs to be analysed within literature reviews. Consequently, additional questions were added to the analytical framework used to evaluate the literature including the type of claim made eg claim of fact; value; policy; concept interpretation, (Hart 1998: 90) and type of fallacies, if any, inadvertently used (Hart 1998: 98).

2.4 Ubiquitous and ambiguous concept with multiple nomenclature

Interestingly, what is clear from the review of both the research and peer reviewed discussion literature is that SMIL is both a ubiquitous and ambiguous concept with multiple nomenclatures. For example, Ottewill (2002) is one of the few discussion writers who refer to "self-managed independent learning," rather than the term self-directed and to a lesser extent independent-, autonomous-, self-regulated- and directed independent-, learning. Hewitt-Taylor (2001) contributes to this debate by referring to it as an elusive concept that in many ways defies definition, especially if a reductionist lens is adopted.

Within the discussion literature (eg Ottewill, 2002; O'Shea, 2003) a distinction is often made between these terms and in particular self- directed (SDL) and self-managed learning. Consequently, the former is conceptualised a broader concept extending beyond programme learning outcomes and assuming greater existing autonomy on the part of the learner, while the latter is curtailed and bounded by them. Žydžiūmaitė et al (2013) similarly attempted to distinguish between independent-, self- directed-, self-regulated-, and self-managed- learning concluding that the latter is often the vital mediating role for undergraduates since this is often the environment in which "self" learning takes place.

Loyens et al (2008) also sought to gain conceptual clarity with regard to selfdirected and self-regulated learning within the context of problem- based learning only to draw similar conclusions in that while slight differences were noted, both were considered developmental processes towards autonomous life-long learning. More importantly perhaps they concluded that the "self" aspect is the most critical aspect connecting all "self-generated" learning terminology. In doing so they suggested that the structure, maintenance and enhancement of the "self" is key in promoting autonomous lifelong learning. Ottewill (2002) concurs with both this semantic ambiguity and the important focus on the self, claiming that while nuances of terminology may vary, beliefs, assumptions and underlying epistemological and ontological concepts are surprisingly shared, albeit not always explicitly reported. In light of this, a decision was made in this study, to retain the use of the term "self-managed independent learning" as this is a familiar vernacular in the university where the research took place. As such, it was likely to be familiar to the participants recruited and thus help orient them to better consider their lived experience and in turn produce potentially richer data.

In contrast, most researchers appear to prefer the term "self-directed" and draw on Knowles' (1975: 18) andragogical definition of self-directed learning as "a process in which learners take the initiative with or without the help of others in diagnosing their learning needs; formulating learning goals; identifying human and material resources for learning; choosing and implementing appropriate learning strategies; and evaluating learning outcomes." Justification for self-directed learning and its multiple nomenclature within undergraduate nursing curricula therefore appears primarily based on Knowles' (1975; 1998) concept of adult learning.

2.5 Student readiness and the nature of adult learning

A basic assumption of Knowles (1975; 1998) is that all adults, by virtue of their chronological longevity, are instinctively self-directing. However, both Brookfield (2005) and Timmins (2008) critically challenge what they view as a common andragogical fallacy suggesting that not all students are in reality well equipped to be self-directing at the stage they begin their undergraduate studies, in line with wider social constructivist and pedagogical thinking. While accepting that adults can achieve all the learning attributes attributed to them by Knowles (1998), they assert that these are not necessarily innate and automatic and may have to be developed over time through supportive and challenging facilitation within a psychologically and socially safe learning culture akin to many of Rogers (1961) humanistic ideas about the fragility of human development and learning.

The international research evidence with regard to student readiness for SDL lends support to these pedagogical challenges to the basic tenets of andragogy. For example, there has been significant research attention focused on developing and confirming, valid and reliable instruments to measure the degree to which undergraduate students possess the attitudes, abilities and characteristics necessary for self-directedness at the point at which they commence their undergraduate programme. Consequently, three SDL psychometric self-rating Likert scales designed specifically for nursing have

been developed based on Knowles (1975) andragogical ideas all operating within a positivist and quantitative research paradigm (Fisher et al 2001; Williamson 2007; Cheng et al 2010).

Fisher et al (2001), for example, developed the "Self-Directed Learning Rating Scale for Nurse Education" (SDLRSNE) consisting of three sub- scales of self-management, desire for learning and self-control, which has been widely used in the pre-registration nurse education in Australia. Based on a convenience sample of 201 first year Australian student nurses and subject to an initial Delphi technique, the SDLRSNE was found to have reliability and internal consistency for student nurses (Fisher et al 2001). Cross sectional convenience sampling with a further 227 first year student nurses also confirmed factorial validity of a revised version of the SDLRSNE (Fisher and King 2010). Smedley (2007) further confirmed reliability, validity and internal consistency of the 2001 SDLRSNE (Fisher et al 2001) in her study of 67 first year Bachelor of Science nursing students in Australian tertiary education. Her findings suggest that although younger students were often less ready for self-directed learning than their peers with more life experience, the majority of first year students struggled to be self-directing due to a lack of self-management and control.

Similar "struggles" were found (using a Chinese translation of the same instrument) by Yuan et al (2011) when using a cross sectional multi-site survey of 536 Chinese undergraduate nursing students on a Baccalaureate nursing programme in mainland China. In addition to age, they found that final year students were often more prepared for SMIL and struggled less than those in their first year. Fujino-Oyama et al's (2016) Japanese version of the SDLRSNE also confirmed instrumental reliability and validity among 376 graduate nurses who also varied in their readiness for SDL at the commencement of their postgraduate studies. Participants in this study also described SDL as emotionally and cognitively challenging.

Conversely, Williamson's (2007) "Self-Rating Scale for Self-Directed learning" (SRSSDL) was originally developed for a UK audience and contains five sub scales of awareness, learning strategies, learning activities, evaluation/monitoring and interpersonal skills. While the instruments initial construct validity and reliability was confirmed by a limited number of first and third year student nurses (n = 30), the SRSSDL has since been translated and further validated in the Italian context by two large scale quasi-experimental design studies (Cadorin et al 2010; Cadorin et al 2012).

These Italian studies provided cross-cultural confirmation of validity and reliability and extended the sampling to include not just student nurses but registered nurses, health care assistants and radiology professionals and students (n = >1,000). The findings from all three studies also suggest that first year student nurses can struggle to be self-directing at the outset of their career but even final year students (Williamson 2007) and qualified nurses (Cadorin et al 2010; 2012) who report greater insight and SDL ability, continue to express a need for ongoing help and support to develop their ability and confidence to overcome the challenges of self- directing their learning.

Cheng et al (2010) developed a similar tool for Taiwanese student nurses entitled the "Self-Directed Learning Instrument" (SDLI) which utilises four sub scales of learning motivation, plan and execution, self-monitoring and interpersonal relationships. The validity and reliability were similarly confirmed using a Delphi technique to confirm factor analysis and a survey of 1,072 student nurses across two higher education institutes confirmed both content and construct validity as well as internal consistency and reliability. Self-directed learning was once again found to be a developmental process which students initially found challenging and uncertain.

Together these international research findings offer valid and reliable instruments for culturally sensitive assessment of students' learning needs in relation to learning independence. Indeed, Fisher et al (2001) Williamson (2007) and Cheng et al (2010) all argue that their respective self-rating skills have

value in helping student nurses not only self- diagnose their own learning needs and thus help develop cognitive understanding of the attitudes, abilities and characteristics required for self-directed learning, but also by helping faculty to match responsive facilitation with SDL readiness. However, the exact nature of students' understanding and the initial struggle this research evidence repeatedly alludes to remains unclear as the positivist paradigm adopted prevents an in-depth exploration of the potential nuances of this experience and sense making processes.

2.6 Student facilitation

SMIL nonetheless emphasises learning over teaching and consequently a facilitative and supportive role for the academic team to help students overcome the reported challenges and struggles in order to enable students the opportunity to control, actively engage with and ultimately be responsible for their own learning. A pedagogical approach that Weimer (2002) poetically describes in the discussion literature as requiring the academic to move from the traditional "sage on the stage" to a "guide on the side." Students thus become conceptualised within SMIL as knowledge-seekers to be guided along their intellectual journey, rather than empty vessels to be filled with knowledge (Wright 2011).

Regan's (2003) study of UK undergraduate nursing students in one university used 12 students in three focus groups to help design a questionnaire that was then administered to a further 97 students regarding the facilitation of SMIL and in particular what motivated nursing students at all levels of their studies towards SMIL learning. Their findings indicate that students wanted specific guidance, support and feedback to motivate them to undertake self-learning and to help overcome uncertainties and emotional turmoil they associated with this type of learning. Interestingly, all students responding to the questionnaire agreed that a "good lecture" and supportive faculty had a significant motivational effect on their SMIL experience and subsequent sense of agency.

Seccombe and Stewart's (2014) descriptive correlational exploration of New Zealand final year nursing students similarly identified strong motivational links to class lectures and activities, effective feedback and manageable facilitated tasks that were perceived to be relevant to the assessment process and helped them feel confident in their ability to direct their own learning. Findings also identified by Amandu et al's (2013) examination of an e-learning module as a method of fostering self- direction in undergraduate nursing courses in Oman. Correspondingly, Tao et al's (2015) educational module designed to help Chinese undergraduate nursing students by providing specific guidance and capacity building meta-cognitive skills also appeared to be highly motivating for students. Senyuva and Kaya's (2014) research based on a correlational survey design of Turkish nursing students resonates with this also in that they found that self-learning readiness improved after exposure to a web-based learning module that provided structure and facilitated support to their self-learning

Clear and enthusiastic faculty guidance and regular constructive feedback on progress were also key findings in Thomas et al's (2015a) UK research into effective design of self-managed learning from the perspective of both staff and students. Equally creating space through unstructured and regular tutorial support assisted the Italian nursing students in Cadorin et al's (2015) quantitative study which used multiple linear regression analysis within their quasi-experimental research design. These findings support the claim that SMIL is a relational and co-constructed concept in which supportive facilitation and feedback are key elements. However, these studies operate from a largely positivist paradigm preventing in- depth understanding from the student's own perspective of effective facilitation.

Nonetheless, the qualitative studies of both Hewitt-Taylor (2001) and Lunyk-Child et al (2001) both adopted an interpretative approach to exploring faculty and student perceptions of self-direction learning and its facilitation in the UK and Canada respectively. Lunyk-Child et al (2001) collected focus group data of 47 academic and 17 student nurses in order to identify common themes through content analysis. They identified that while many faculty members wanted to

commit to self-directed facilitation, they doubted their ability to do so as they were unclear about the exact nature of students learning needs and how to respond these. Hewitt- Taylor's (2001) UK research with post-registration nurses and academics during a post-registration paediatric intensive care module also found facilitation problematic as both faculty and students felt mutually misunderstood and their needs not fully respected by the other, findings which support my own personal observations.

Such findings are also similar to Kim and Park's (2011) Korean survey research focused on 202 master's level advanced practice nurse students while in clinical practice which sought to explore the factors that motivated their self-directed learning. Their quantitative study found students were motivated only when they felt a strong sense of belonging with faculty and were supported to maintain positive self-esteem. Combined these findings help illustrate the complex, psychosocial and multifaceted nature of SMIL experiences in which the individual, relational and collective sense of self appear important features for facilitation but one in which nurse educationalists can struggle if they do not have a shared understanding of and positive regard for student needs and experiences.

2.7 Student experiences

O'Shea (2003) in the discussion literature suggests that students' openness to and experience of SMIL is strongly related to the epistemological nature of various disciplines. An assertion substantiated by Otting et al's (2010) sixty-five question Likert scale survey of 617 mainly social science undergraduates in the Netherlands who valued self- directed learning only when they held epistemological beliefs of social constructivism. Moreover, Žydžiūmaitė et al's (2013) descriptive correlation-based research of 568 science-related undergraduates across 10 Lithuanian universities found students continued to place high value on the "certainty of knowledge" and the transmission of "expert" binary knowledge throughout the period of their undergraduate studies. These students also experienced significant emotional and cognitive difficulty with all forms of SMIL including uncertainty of task, purpose and anxiety.

Similar findings were reported by Raidal and Volet (2009) whose mixed method approach, using both survey and thematic analysis, of 128 reflective assignments submitted by Australian undergraduate veterinary students. Their findings identified comparable preferences for strong external teacher regulation of learning by the veterinary undergraduates alongside similar affective and cognitive difficulties, including significant anxiety, feelings of stress and uncertainty, with the introduction of more SMIL opportunities within their programme.

Interestingly, the highly prescriptive nature of professional undergraduate programmes based as they are on mandated national standards was also viewed in both studies as influential in contributing to students' perceptions that their lives were, to a large extent, externally controlled by "experts." These difficulties, not fully explored in the nursing literature, have the potential to relate to the experience, at least in part, of UK nursing students who are also part of externally structured professional programmes (NMC 2018c). Nursing students may thus hold similar epistemological beliefs beyond the start of their academic career making SMIL a similar psychological and learning challenge for them.

Such pedagogical explanations may, at least in part, also explain the research findings of a UK wide student survey conducted by the National Union of Students (NUS 2012a) which aimed to provide an overview of student experiences of independent learning and contact hours in UK universities. The findings suggest that while the vast majority of students expected to engage in independent study, many found the experience challenging, - especially, but not exclusively, - at the outset, and few had received explanations as to its potential value. The idea that SMIL was central to success through the effective engagement in the learning process was positively recognised. As a national overview this research helps contribute to the existing body of knowledge on SMIL among UK undergraduates and was also reflected in Thomas et al's (2015b) qualitative thematic analysis of student diaries and semi-structured

interviews across sixteen UK higher education institutions. However, neither, nor did they aim, to provide in-depth explanations of students' actual psychological experiences.

Arguably the most comprehensive research evidence exploring the cognitive and affective experience of SMIL derive from the very small number of qualitative studies that appear in the research literature, all of which appear to have been undertaken in response to the limited exploration of this. For example, both Hewitt-Taylor (2001) and Lunyk- Child et al's (2001) interpretative studies used constant comparative thematic and content analysis respectively to illuminate students' own lived experiences. Both studies concluded that SMIL increased student self-efficacy and was overall deemed educationally and professionally beneficial by students and their faculty staff.

However, they also identified the process as an emotionally labile and often uncertain process, especially at the start of an educational experience. The post-registration students in Hewitt-Taylor's (2001) study spoke of a perceived lack of control engendered by a lack of conceptual understanding as to the exact nature of learner independence. Both studies identified that students themselves undergo, an often painful and initially distressing transformation that begins with confusion, dissatisfaction and frustration and ends with increased learning self- efficacy and skill.

Similar transformative arguments related to negative pedagogical emotions and self-directed learning are also highlighted in Taylor's (1986) earlier longitudinal interpretative phenomenological research which used a comparative sequential analytical method to qualitatively explore eight Canadian postgraduate nurses lived experience of self-directed learning in the classroom during a thirteen-week educational based module. In discussing her research findings, Taylor (1986: 59) argues that, from the perspectives of learners themselves, learning to be self-directed begins with a painful collapse in the students pre-existing "frame of reference or assumptive world." This leads to distressing feelings of disorientation, anxiety and negative emotions, including uncertainty, but is also

a necessary starting point for the transformative learning process from dependence to independence. The journey to independence as a learner is then conceptualised as learner's cognitive attempts to explore, reflect and develop a new and meaningful set of epistemological assumptions and frames of reference toward "greater personal responsibility, self- direction and perceptions of the role of external authority" (Taylor 1986: 69).

The "assumptive world" on which Taylor's (1986) thesis argument is based is a theoretical framework conceptualised as a broad set of core beliefs and an organised psychological schema that reflect all that a person confidently assumes to be fundamentally and benevolently true about the world and the self. Formed on the basis of previous life experiences developed and confirmed over time, these core beliefs refer to the pervasive, fundamental and strongly held tacit assumptions at the core of a person's internal world (Cann et al 2010). They therefore function as an implicit and powerful guide to not only selfnavigate the world but also provide a sense of reality, coherence, wellbeing, meaning and purpose to life (Janoff-Bulman 1989; 1992) as well as educational learning experiences (Taylor 1986). These core beliefs therefore unconsciously guide and structure an individual's daily thoughts, world views, expectations and behaviours (Cann et al 2010).

Nonetheless, Hewitt-Taylor's (2001) study was conducted on UK post-registration students and Lunyk- Child et al's (2001) focus group study was conducted on Canadian undergraduate nursing students, while Taylor's (1986) was conducted with Canadian post-graduate students. These students may have differing cultural experiences and professional meanings to that of contemporary undergraduate nursing students in the UK. While all three studies do arguably offer a unique contribution in providing a much-needed student voice within the pedagogical discourse, they were also undertaken two or more decades ago. Consequently, there appears to be scope for a more updated exploration of SMIL, particularly from the largely unexplored UK undergraduate nursing student perspective.

Moreover, Thomas et al's (2015a) study using a mixed method research design and appreciative inquiry approach does appear to be a valuable addition, albeit is not exclusively focused on student nurses. However, their own exploration suggests that many UK undergraduates, irrespective of age, discipline and academic level, find independent learning both challenging and unclear. This study however primarily sought the views of practising academics in terms of effective design of "directed" independent learning opportunities and the nature of the challenges mentioned were not explored in depth. The on-going semantic ambiguity surrounding the concept of independent learning did however appear a key theme to emerge.

Thomas et al's (2015b) follow up study of 126 UK undergraduates did nonetheless examine students' own perspective and HE experiences of directed independent learning using a range of innovative qualitative approaches, across sixteen HEl's. This study combined student learning diaries kept over a three-week period and semi-structured follow up interviews undertaken by trained student-peer researchers during 2015. Participants were drawn from a range of disciplines and year of study, including but not exclusively, nursing and their findings appear to provide a more detailed picture of current student experiences than previous studies. Both studies also adopt a similar definition to SMIL operationalised in this study making comparisons and analysis more effective.

For example, Thomas et al's (2015a; 2015b) findings confirm that UK students today can struggle to self-manage their learning and face a wide range of emotional, motivational and cognition "battles," which they were able to identify more specifically as including feeling overwhelmed, frustrated, procrastination, problem solving and difficulty with the newness of epistemological uncertainty. Participants expected that higher education learning would be different from school but felt psychologically unprepared for the reality. They were also surprised at the amount of responsibility they bore for their own learning and continued to underestimate the difference between SMIL and more familiar school- based homework.

These findings also confirm the emotionally charged and psychologically demanding nature of SMIL experiences highlighted by previous studies such as Taylor, (1986), Hewitt-Taylor (2001) and Lunyk- Child et al (2001). Thomas et al's (2015b) study however used a narrative inquiry and thematic approach and did not identify specific discipline differences and similarities. As such, the psychological experience of SMIL as lived by contemporary student nurses remains largely unknown within the existing research literature.

2.8 Positive and beneficial concept

Correspondingly, within the discussion literature, SMIL appears to be concordantly accepted as a "good thing." The overall message conveyed is that it is a transformative concept required for current and future graduate and academic success. It also reflects, although this is rarely made explicit, a constructivist and social constructionist epistemology in which students are helped to be actively motivated and independently involved in the process of meaning and knowledge construction. However, the empirical research-based evidence on which to substantiate these claims is limited with few studies having explicitly examined this.

For example, Avdal's (2013) Turkish survey of 220 nursing students across all four years of their undergraduate degree programme indicated that higher self-directed learning scores - (as measured by a Turkish validated form of Fisher et al's (2001) self-directed learning scale) – led to a positive and moderate statistically significant (p < 0.01) average academic grade increase. Improved academic achievement was also noted in Caza and Schipias's (2014) Romanian study of 121 nursing students that used a translated version of Williamson's (2007) SRSSDL which identified high SDL readiness scores predicted academic achievement. Nonetheless, Linares's (1999) self-reported survey findings of 301 American undergraduate nursing students, using a different rating scale of self-directed learning ability, failed to identify a correlation with academic success.

Pedrey and Arber's (1997) mixed method research using Jarvis' (1992) experiential learning framework and a convenience sample of 135 UK student nurses to evaluate a nine-month self-directed learning module did however identify self-reported benefits of increased choice, autonomy and responsibility. These benefits were identified via open-ended questions on a questionnaire and supplemented by focus group feedback and discussion. Such findings resonate with the qualitative studies of Taylor (1986), Hewitt-Taylor (2001) and Lunyk-Child et al (2001) all of which imply a sense of transformation and increased autonomy and self-efficacy.

2.9 Gap in the literature

This review therefore highlights that there is a strong global and professional nursing interest in SMIL, and a range of research questions related to this have been asked from a gamut of perspectives and disciplines. This literature has positively illuminated both the ambiguity and complexity of this much advocated pedagogical learning opportunity. This canon of work has also highlighted some key disparities between the ideological stance of many promoters of SMIL and the reality of students themselves. In doing so, it has also identified a number of themes that students themselves appear to consider significant in what can be assumed to be an important yet stressful aspect of their higher education experience. However, these studies have been conducted primarily from within a positivistic and quantitative paradigm, which has prevented a deep and rich understanding of students own lived experiences. It is thus unclear which aspects student nurses themselves experience specifically and uniquely. Indeed, Seccombe and Stewart (2014) are not alone as quantitative researchers in calling for the holistic needs of learners themselves to be taken into account in future studies.

Conversely, the more limited qualitative studies undertaken do begin to highlight these experiences, but these have been undertaken on both post-registration and international nursing undergraduates as well as UK undergraduates as a homogeneous group. These studies do however suggest that this is an appropriate research approach when exploring nursing students' own

experiences of SMIL. The predominantly thematic analysis and descriptive nature of these research studies also leave scope for research through an interpretative lens that seeks to understand and explain, rather than just describe, the experience of SMIL by students themselves. This review also starts to highlight the important role emotions and psychological responses of students play within their own higher education learning and developing autonomy and the interplay between these. Yet the exact nature of these emotions and psychological influences in terms of SMIL remains largely unexplored, especially in terms of nursing students and their SMIL experiences. Much of the previous qualitative research also appears to have been undertaken outside of the UK, albeit with some recent exceptions (eg Thomas et al 2015a; Thomas et al 2015b).

2.10 Confirming the research question, aim and objectives

Differences in approach, design, sampling, country of origin and time lapse all appear to suggest that there remains scope for a richer, more up-to-date exploration in the UK that focuses on undergraduate nursing students today. This study therefore sought to expand on the existing literature and uniquely fill a gap by providing a richer, more interpretative, empathic and idiographic contemporary understanding of how SMIL is lived and experienced by current UK undergraduate student nurses themselves. In doing so the literature review confirmed there was scope for my research question alongside the study aims and objectives.

Moreover, I live in the world of nurse higher education where the study of and respect for unique human experience is highly valued and promoted. Such experiences are significant to me and as explored in chapter one I am impassioned to better understand student nurses own lived experiences of their independent learning from their own unique perspective so that I can continue to develop a responsive student centred pedagogy in myself and others at a time of increasing massification and commodification within UK universities. Both the extant literature and my personal observations of being in the world suggest significant misunderstandings by nurse academics of this lived student

experience. This is understandable given that this chapter has illustrated the research evidence to date provides only a partial understanding of this. A gap that this study aims to fill and which gave rise to the following research question, aim and objectives.

Research question:

 How do undergraduate student nurses on a Bachelor of Science adult nursing programme articulate, understand and make sense of their unique lived experience of self-managed independent learning?

Research aim:

 To explore and interpret student nurses' lived experience of self- managed independent learning during a Bachelor of Science adult nursing programme through the development of an empathic, in- depth and critical understanding of their unique perspective.

Research Objectives:

- To critically and empathically examine and interpret the oral accounts of individual students' psychological experiences of self- managed independent learning
- To critically identify and analyse the salient emotional, motivational, cognitive
 and environmental influences, meanings and contexts that have
 significance, both negatively and positively, for student nurses when
 experiencing self-managed independent learning.
- To contribute uniquely to the existing body of knowledge by adopting a broad psychological perspective related to self- managed independent learning and student engagement within contemporary higher education in order to give student nurses "a more nuanced voice" in terms of their own lived experiences of self-management of their learning.

2.11 Summary of chapter

This chapter has presented a review of the existing literature on self- managed learning relevant to this research study. It has identified that self-managed learning has and continues to attract global attention within the higher education and nursing context. However, the majority of research is quantitative in nature and thus the experience of learning to be independent as lived by contemporary UK student nurses is not as well understood. This has enabled a timely gap in the literature to be identified and the research question, aim and objectives first posed in chapter one to be confirmed in order to explore in more depth how student nurses themselves experience student managed independent learning.



3 Methodology, Method and Design

3.1 Overview of chapter

This chapter examines the philosophical and methodological basis of this qualitative study together with an exploration of how my own beliefs, values and assumptions contribute to my choice of an interpretative constructivist paradigm. This is followed by a consideration of the research framework including the philosophical perspectives of phenomenology and hermeneutics and the rationales for ultimately choosing an IPA approach. The research method and design are similarly described together with strategies to ensure quality and rigour were maintained throughout all stages of the research process. Ethical and quality considerations are addressed alongside a methodological reflection to aid the transparency of this IPA study.

3.2 Philosophical positioning and paradigm choice

The aim of this study was:

To explore and interpret student nurses' lived experience of self- managed independent learning during a Bachelor of Science adult nursing programme through the development of an empathic, in- depth and critical understanding of their unique perspective.

Creswell (2009) advocates that researchers, particularly at doctoral level, are required to both define and justify their choice of paradigm or "world view" since the research methodology itself (how knowledge may be gained from the world) will ultimately depend on the paradigm choice. The essential rationale being that paradigms help link the study aims with the methods, thus ensuring ontological, epistemological, axiological and methodological congruence (Houghton et al 2012). Paradigms thus provide an overarching conceptual framework to organise our approach to being in the world and thus enable researchers like myself to position their assumptions, intentions, beliefs and values so that any theoretical knowledge produced will be consistent with the view of reality supported by the paradigm (Creswell and Poth 2018).

This study is therefore nested in an interpretative constructivist paradigm since it is this world view that best reflects both the aims of the research and my own philosophical assumptions as a constructivist researcher and nurse educationalist. My research question arose from my personal axiomatic perspective (values and beliefs) of the need to understand the lived experience of student managed independent learning from the perspective of students nurses themselves and I am aware from my experience as a nurse educator that there will be multiple realities. Such realities are I believe constructed epistemologically through a mutual process of interaction and modification and that an understanding of this is gained though interpretation and meaning as I make sense of participants making sense of their unique experience. I am aware that I also bring my own prior knowledge and experience as a nurse educator to this study which is explored in more detail later in this chapter

The interpretative constructivist paradigm adopted enables me to understand in depth the subjective world of a particular human experience, itself a central tenet of the interpretative paradigm and the various qualitative methodologies that derive from this (Kivunja and Kuyini 2017). For example, emphasis within this study was placed on empathically and inductively understanding how student nurses themselves uniquely interpret, understand and make sense of their lived experience of SMIL ("verstehen"), rather than explaining ("erklaren") a consensus of opinion about identified SMIL issues that a more positivist paradigm would seek (Hughton et al 2012). The constructivist paradigm relies on the participants view of the phenomena (in this case SMIL) in a particular time and space in their journey and allows them to construct meanings related to the world in which they live. In doing so it will enable me to make sense of their learning journey from their point of view and for me to construct meaning related to their lived experience as well as allowing me to challenge and refine preconceptions (Creswell and Poth 2018).

Choosing an interpretative constructivist paradigm and inductive methodology from within this allowed me to gather and interpret rich data though the active listening of participants own voices, feelings, experiences and contexts in order to uncover new meanings related to the experience of SMIL. A positivist

paradigm with a resulting knowledge based on objective reality was not therefore deemed appropriate as I wanted to understand the experience of students as lived by them, not quantify or measure this, nor did it resonate with my own philosophical position. Moreover, past positivist and post-positivist studies on student managed independent learning, while contributing much to the existing body of knowledge have not, nor did they intend to, provide detailed accounts of participant's unique experiences as reflected in my research aim. In contrast, I aimed to delve deeper beyond surface phenomenon to offer qualitatively detailed portrayals using "thick description" (Holloway and Wheeler 2010) from which to describe, analyse and interpret these differing experiences within the students own lived world of SMIL.

In line with this constructivist paradigm, the study adopts a relativist ontological position in which social reality is considered to be experienced by people who each interpret events differently, leading to multiple perspectives and subjective meanings. No singular one to one relationship between individuals (subjects) and the world (object) is therefore considered to exist, albeit individuals are deemed to seek understanding of the world in which they live and work (Gray 2014; Creswell and Poth 2018). This study therefore assumed that student nurses develop experiential subjective meanings and socially construct their own worldview of SMIL based on their unique perceptions and lived experiences of this. As such, subjective meanings are not considered to be simply imprinted on an individual but formed through interactions with the others and through the historical and cultural norms that operate in their lives (Creswell and Poth 2018). It was these meanings, interactions and context that the study aimed to capture. Reality was therefore recognised as multifaceted, complex, individually distinct and shaped by experiences leading me to search for an indepth and detailed understanding of this phenomenon. An arguably important and analogous issue for a research topic such as SMIL, which itself has been conceptualised in similar complex and differing terms within extant research.

This relativist, - and closely linked socially constructivist, - ontology consequently acknowledges that more than one "truth" exists and thus interpretative based research studies such as this become less concerned with

finding *the* truth and generalising this, and more with "opening up of possibilities" since understanding is considered to be embedded in these unique interactions and personal interpretations of the world (Houghton et al 2012). Truth and meaning are therefore not held to exist as object reality but rather created and constructed by people and their idiographic interactions with their world. Hence, multiple, contradictory yet equally "real" accounts of the world are deemed to exist despite people's apparent "sameness." It was these subjective and multiple accounts that this study sought to capture.

This paradigm choice and consequently the qualitative methodology that flowed from this, although guided by its potential to answer the research question, also resonates with my own philosophical assumptions, values and beliefs. For example, my experience as a nurse educationalist as explored in chapter one (personal observations and foreknowledge) reflect a fusion of my fore-having, historicity and my being-in-the-world. Much of my understanding of student managed independent learning derives from interpreting my own and other's experience and this has influenced my own facilitative approach to nurse education in which I offer reflective class time to students to enable them to give meaning to their past, current and future learning experiences. This has led me to respect the reality of students own subjective experiences as they are lived and the value of the meaningful-ness they themselves give to this as they continue to make holistic sense of the higher education nursing world they inhabit. Each student I have met has been unique and shaped by their own personal background and holistic history.

During my nursing and academic career, I have therefore come to appreciate the value of adopting attentive student/client centred dialogue and authentic collaboration so that understandings can become a mutually insightful endeavour where we both gain a new, revised and ultimately deeper co-constructed interpretative understanding. This active listening and responding to the unique stories told have revealed something of the personal significance that I previously missed when adopting an omnipresent expert stance which was a hallmark of my early career and previous positivist philosophy. In empathically and actively listening I have also learnt that there is almost always

more at stake for the person themselves than is revealed by the constructed surface narrative of our encounters. As such, I have learnt to value the three core humanistic conditions of Rogers (1983), namely empathy, unconditional positive regard and congruence within my interactions with others since these enable individuals to better articulate, know and understand themselves and the experiences in their life that have significant import for them. Like Rogers (1983) I have learnt that I do not need to "fix" others' problems but rather than I need to enter into, respect and be in their world in order to understand, value and respect their lived world perspective.

As such, a key epistemological tenet of my own interpretivist philosophy is that knowledge can never be objectively observed from the outside, but rather must be "observed" from inside through the direct, specific, and unique experiences and multiple realities of others. For example, interpretivism primarily adopts a subjective and transactional epistemological position where knowledge is considered to be internally, subjectively and contextually constructed, rather than something that is objectively discovered by another (Kivunja and Kuyini 2017).

As such, the knower can never be separated from what is known, nor can knowledge be reducible to simplistic and superficial interpretation (Gray 2014). My epistemological focus for this study was therefore on gaining knowledge through an inductive methodology that enabled me to capture the participant's subjective experiences and their own realities in order to develop a deeper and more in-depth understanding of the phenomena of SMIL through an on-going process of interaction and interpretation of the constitution of meaning of each participant accounts.

In line with this a key assumption of my subjective epistemology is that I would need to engage with participants in an interactive process in which I could actively listen, question, record and read their own stories and informed by these mutual interactions, could make meaning of this data through my own thinking and cognitive processes. The knowledge gained would thus be socially and co-constructed. However, this transactional and subjective epistemological

position adopted also meant that as the investigator I needed to be aware of the potential impact my own perceptions on the collected and analysed data since it is acknowledged that my own beliefs and values could negatively affect the research. Reflexivity thus became an epistemological and axiological prerequisite to help both reduce bias and enhance rigour by promoting and maintaining self-awareness throughout the research process (Houghton et al 2012). This is particularly important within interpretative research since interpreting the data means that the experiences, meanings and self-awareness of the researcher also become part of the data. This is addressed under the sub-heading reflexivity later in this chapter and reflects my axiological values for transparency and rigour within the study.

My own axiological perspective also extends to the internalised professional values of nursing as embedded within the NMC (2018a) code of conduct and my desire to prioritise people and respect unconditionally their moral status and agency. Nursing is primarily concerned with being perceptive to and empathically understanding as well as ultimately respecting others as unique human beings. Personal lived experiences therefore have value and are unconditionally respected by myself and my profession. This personal and professional deontological position was also embedded in this study in my understanding that every action that I took as an inquirer would have its own moral consequence to everyone involved including participants, the scholastic community and myself. This is further detailed in this chapter's ethics section and goes beyond gaining formal ethical approval from the institution where the study took place.

3.3 Choosing a methodological approach

Qualitative inquiry is not homogeneous and encapsulates a range of theoretical and research approaches that embrace the ontological belief of social reality that reflects my own philosophical position and the research question. Indeed, Creswell and Poth (2018) argue that a topic area can be researched using a range of methodologies but ultimately needs to be chosen by the nature of the research question, the audience of the study and the researchers own philosophical stance if it is to underpin quality and rigorous research.

Although phenomenology was finally decided upon, an initial appeal was narrative inquiry or life history approach as SMIL is widely considered in the extant literature to be a transformative learning journey and a developmental process (eg Hewitt-Taylor 2001; Lunyk-Child 2001). Narrative inquiry aims to interpret personal stories and lived experiences and from this to co-construct meaning chronologically. However, I remained doubtful about whether this could achieve sufficient interpretative depth to understand the salient affective, cognitive, motivational and environmental contextual influences that formed part of the study's objectives. Moreover, given the multiple nomenclature and ambiguity surrounding SMIL as portrayed in the existing literature, I wanted to explain and understand the phenomenon itself, rather than the stories of the participants per se.

An ethnographic approach was similarly discounted. Ethnographical studies tend to focus on understanding cultural phenomena with the researcher observing and seeking to understand the society participants inhabit from their own perspective (Hammersley and Atkinson 2007). While this approach may have helped to understand certain cultural influences and norms related to participants experience of SMIL, this was quickly rejected as my research question and objectives were more focused on understanding individual experiences and the similarities and divergence between them, rather than primarily understanding cultural influences and the dominant social norms and beliefs in which SMIL is experienced and lived.

Grounded theory, although also an early contender, was likewise rejected. This approach would have enabled me to gain a contextual and iterative understanding and explanation of the factors and processes of SMIL through the generation, testing and refining of a theory. This was not however fully congruent with my research aims and my desire to focus on the unique experiences, including both similarities and divergence, as grounded theory tends to be directed towards more macrolevel analysis. As such, I wanted the opportunity for more in-depth cross case interpretations in which the meaning of individual lived experiences could take precedence over theory building and

testing. Grounded theory inquiry also advocates omitting or limiting background reading of the academic literature in advance of data collection and analysis (Glaser 1998). Given my pre-existing knowledge of the topic area and my philosophical position, this would have been both challenging and problematic.

In contrast, phenomenology is concerned with the way that humans experience consciousness and the way in which individuals express and take meaning from this (Eagleton 1996). The main goal of phenomenology is therefore to examine, describe and interpret phenomena, as participants consciously experience them (Beck, 1994) and not to generate theories or general causal explanations (Elliot et al 1999). Phenomenology was therefore the clearest approach available that deliberately directed me to the participants' subjective perceptions of their own (lived) experiences in a way that would enable them to tell their own first person stories, in their own words and through their own "reality lens," rather than as a purely abstract account of these experiences. For example, phenomenology focuses on meaning and how meaning arises through experience. In doing so it aims to capture the lived experience of participants in the context of their everyday lives without attempting to control the context in which they are being explored (Streubert-Speziale and Carpenter 2007). It was thus considered best suited to my research aims and objectives as I wished to better understand how participants themselves made sense of SMIL and the meanings, influences and context that held salience for them in their own lived world.

Interestingly, Streubert-Speziale and Carpenter (2007) pose two key questions that they suggest researchers should ask themselves before deciding upon a phenomenological study. The first relates to whether there is a need for more clarity of understanding of the phenomenon. The literature search in the previous chapter strongly suggests that this is the case for SMIL as it appears a complex, dynamic, poorly understood concept for many undergraduate students and nurse educators alike. Yet the exact nature of the phenomena is not clearly understood as it has been inadequately studied from the perspective of UK undergraduate nursing students themselves. The second question posed by Streubert-Speziale and Carpenter (2007) relates to sampling and whether the experiences of participants can provide this information. The exposition in

response to this is outlined later in this section under the sub-heading "sampling" and did have the capability for meeting the second criteria.

Nonetheless, phenomenology as both a philosophical movement and a method of inquiry is eclectic. For example, the epistemological emphasis of Husserlian transcendental phenomenology, differs from the ontological emphasis of interpretative Heideggerian hermeneutics (Lopez and Willis, 2004) and the relatively more recent interpretative phenomenological analysis with its emphasis on the idiographic (Smith, 2007). The latter of which also claims to try to "work with, rather than around" the interpretative nature of phenomenological enquiry (Ellis and Standing, 2010: 35). However, the foundational concern of descriptive phenomenology in solely describing the "universal essence" or "eidetic structures" of experiences (ie the universal and immutable truths lying at the heart of every human experience), did not fully resonate with my research question and objectives. In line with my own philosophical position, I was also unconvinced by both my ability and the desire to achieve Husserl's (1964) notion of transcendental subjectivity through the use of "epoching" and bracketing (Lopez and Willis 2004). Thus, while I agree philosophically that the impact of my own presuppositions on the inquiry needed to be constantly assessed and biases and pre-conceptions identified, I do not believe, like Smith et al (2009), that my foreknowledge can, nor should be, held fully in abeyance. As such, I was drawn more to interpretative phenomenology which explicitly recognises the transparent role of the researcher in the co-construction of the phenomena of concern. Consequently, an interpretative phenomenological methodology was chosen.

Within the rubric of interpretative phenomenology, interpretative phenomenological analysis resonated best with my own philosophical and axiological perspective regarding idiography and social constructivism. Idiography is a psychological concept within humanism that views individuals as unique holistic beings whose experiences are personal to them and where people are not considered to be nomothetic creatures (Shinebourne 2011). As such, interpretative phenomenological analysis would enable me to understand and appreciate in depth the experience of each participant, before considering

similarities and differences as identified in my research objectives. It would also provide me with a structure to my study as Creswell and Poth (2018) highlight that the methodologies underpinning hermeneutic phenomenology are not always clear leading to inadvertent philosophical incongruence throughout a study. An important issue for me as a relatively novice researcher. Moreover, it also echoed my desire to give undergraduates a "voice" within the educational literature. An objective reinforced by the dearth of evidence related to UK student nurses lived experience of SMIL within existing research as outlined in the previous chapter. Interpretative phenomenological analysis while used in much health and health psychology research also offered me a relatively innovative approach to exploring the phenomenon of self-managed independent learning within contemporary nurse higher education.

However, prior to any final decision I needed to ensure philosophical congruence within the research framework chosen. This was deemed particularly important as IPA has received some on-going criticism in both the research and psychology literature for seemingly lacking a credible and sound theoretical basis (Smith, 2010; Shinebourne 2011). Some of this criticism does appear to have been provided by researchers immersed in a positivist world view and may thus represent a differing and strong personal commitment to their own philosophical and paradigm perspective. However, in light of these IPA philosophical and theoretical criticisms and in recognition that all scholarly work should be challenged and defended the philosophical and intellectual basis of IPA is rigorously examined and established in the following sections.

3.4 Introducing Interpretative Phenomenological Analysis

Interpretative Phenomenological Analysis or IPA offers a philosophical framework in line with my own positioning and as a method of enquiry draws inspiration from both phenomenological philosophy and hermeneutic theory alongside a belief and valuing of idiography (Smith et al 2009). This dual phenomenological and hermeneutic framing has subsequently been described as a distinctive approach to conducting qualitative inquiry within a constructivist paradigm which offers a cogent theoretical and philosophical foundation as well as a detailed, yet flexible, procedural guide (Brocki and Wearden, 2006).

IPA, based on the seminal work of Smith (2007), - a UK psychologist, university researcher and lecturer, - is therefore phenomenologically concerned with an endeavour to understand lived experience and how people consequently make sense of these and interpretatively, how we come to be situated in the particular world in which they inhabit. As such, it makes an explicit commitment to clarifying and understanding phenomena from a first person perspective and values subjective knowledge and multiple realities as they are lived by embodied sociohistorical and situated individuals.

IPA research is therefore concerned with a detailed and joint examination of personal lived experiences and the subjective meanings people themselves impress on their own experiences by first examining in-depth accounts of each case before looking for patterns of convergence and divergence across cases. The focus is thus on the researcher making sense of the participants own sense making. As such, it has been suggested that the IPA methodology and method is ideally suited to areas of inquiry that appear complex and may have multiple hidden meanings (Smith and Osborn, 2003). Given the current knowledge and evidence base related to SMIL, IPA was deemed highly suitable for this study.

3.5 Phenomenological philosophy and IPA

Phenomenology philosophy underpins IPA inquiry as it is concerned with the study of human experience and in particular, the way in which things appear in our consciousness and are perceived to hold personal significance (Creswell and Poth 2018). Smith et al (2009) reinforce this describing IPA as the study and understanding of everyday life as it is actually lived and experienced. In this way, IPA draws heavily upon the phenomenological ideas of Husserl (1964), Heidegger (1927), Merleau-Ponty (1962) and Sartre (1943), all of which contribute in different and at times overlapping ways to IPA's phenomenological philosophy. For example, in the philosophical assumption that experience, as perceived by human consciousness, has value and should therefore be the object of scientific study (Lopez and Willis 2004) is also reflected in IPA inquiry. As is the ontological and metaphysical notion that human actions and behaviour are influenced by what people perceive to be real, as opposed to objective

Kantian reality whereby reality is considered completely ontologically independent of the mind, conceptual schemas and subjective meanings.

3.5.1 Lived experience and the life world

Experience within IPA is thus a central concern and is recognised as both complex and subjective because what individuals consciously experience is a phenomena within a relevant context, rather than imprinted direct reality (Smith et al 2009). As such, IPA is phenomenological in its concern with exploring and capturing the lived experience of an identified phenomenon while also giving detailed consideration of participants lifeworld (*Lebenswelt*) from the perspective of a reflective meaning-making participant. IPA therefore attends to the aspects of the experience that matter to people and which have a quality of "mine-ness" (Smith 2010) since these are considered to provide a basis for human action, judgements, positioning and "*concern-ful*" engagement in the world (Yancher 2015: 109).

In line with this and the original thinking of Husserl (1964), the goal of IPA research is therefore not to produce an objective record of the experience per se, nor to capture objective knowledge from a detached and objective stance that views social actions from the outside positivist worldview. Indeed, within IPA, such knowledge is phenomenologically considered to presuppose the lifeworld and reflect only a partial description since it ignores aspects which are personally significant and meaningful to people themselves. Instead, IPA aims to empathically understand the personal conception of the phenomenon in order to understand how individuals perceive and attach unique meaning within the context of their lived world (Larkin et al 2006).

3.5.2 Phenomenological attitude

To achieve this Husserl (1964) himself advocated that it was essential to understand the experiential content of consciousness, but that this is nearly always elusive and obscured by various obstacles in everyday human life and the vicissitudes of living. Husserl (1964) thus claimed that while human beings, by nature are capable of, self-reflection on their consciousness, they generally go about their daily lives without critical reflection on these experiences and

therefore "meanings" are not always immediately explicit, nor known to either themselves or others (Lopez and Willis 2004). As such he advocated that people must first be encouraged to disengage from the taken for granted experience and reflexively move their gaze away from objects in the world, towards their inner world perception of these objects.

This phenomenological perspective is embedded within IPA research in that a sustained inquiry-based approach is adopted and a flexible, yet systematic, framework is provided within the methodology to gradually guide this process of inquiry in uncovering these, often implicit, meanings (Smith and Osborn 2003). In doing so, IPA also draws on Husserl's (1964) belief that the task of the researcher is to question the "natural attitude" or "taken for granted experience" of participants in order to clarify and elucidate the phenomenon being studied. In essence, this involves a type of "phenomenological attitude" which Husserl (1964) argued involved reflexive questioning of participants (and researchers) presuppositions with the phenomenological intention to understand the things themselves (Zu den Sachen). A reflexive process that includes uncovering unconscious pre-conceptions, prejudice and biases in order to expose the "taken for granted" and ultimately reveal the phenomenon. For Husserl (1964) and the IPA researcher, phenomenological inquiry therefore focuses primarily on what is experienced in the consciousness of the individual ie the realm of absolute being, through the starting point of reflection. Within IPA, intentionality (Husserl 1964) therefore phenomenologically describes this relationship between the process occurring in consciousness and the object in the world being attended to since experience is always consciousness of something.

3.5.3 Being in the world

However, the phenomenological focus in IPA also differs from Husserl (1964) in that rather than transcend the particular, IPA aims to capture the context and qualities of an experience as it is lived by the individual (Smith et al 2009). In this respect, IPA connects more with Heidegger's (1927) interpretative phenomenological ideas and the ontological understanding of what Heidegger (1927) himself called "Dasein" and which is more commonly translated as "being in the world" in order to focus on "how" people live in the world and "how"

they assign meaning to their experiences. Philosophical concepts that closely align with my own research objectives and IPA's understanding of the mutuality of people and the world they live in being holistically contingent and contextually bound.

Heidegger (1927) in developing Husserl's (1964) phenomenological ideas of the life world diverged from Husserl's (1964) epistemological focus to the more ontological, and for him the more fundamental, question of existence. In doing so Heidegger (1927) started by questioning what it means to be a person and how the world is intelligible to them. He therefore believed that before we can consider the epistemological question of knowledge, we first need to consider the ontological nature of being as he argued that we cannot ontologically exist or be in the world (Dasein) without a world, nor can there be a world without ontologically being in it.

For Heidegger (1927) and the IPA researcher, a key aspect of a person is therefore their inevitable relationship and "intersubjectivity" with the world they inhabit. In other words, the meaningful set of relationships, practices and languages which a person is born into and lives culturally. The latter is considered important since it creates the possibility for feeling, sense making and intelligibility within a shared cultural context. For Heidegger (1927) the world is therefore so self-evident to us that is also completely oblivious as it is already "unveiled in advance" as we do not "specifically occupy ourselves within it, nor apprehend it" as the world is both constituted by and constitutive of, the self (Heidegger 1927).

In doing so Heidegger (1972) uses the term "thrownness" (*Geworfen*) to denote the enigmatic nature of Dasein in the sense that people are always "thrown into" ie born into and live within a particular cultural world at a given moment in human history and are finitudinally framed by this. Consequently, IPA therefore also draws on the theoretical foundations of symbolic interactionism which itself has roots within phenomenology (Shinebourne 2011) to argue that social life consists largely of a complex fabric of on-going interactions between people, and it is from these, largely human, interactions that people understand their

experiences and ultimately their own life takes shape and meaning (Porter, 1998). The argument follows that during interactions, people interpret cultural symbols, - not merely to communicate with each other, - but also to create and maintain impressions of themselves and thus forge a personal sense of self. Individuals therefore behave according to the meanings they themselves ascribe to themselves, others and the situations - laden as they are with the symbols, - they experience. According to symbolic interactionism, thinking, - as a form of mental conversation with oneself, - dynamically modifies these interpretations and thus also has an influence on individual behaviour (Benzies and Allen 2001). However, language, speech and communication with others also provide the means by which meanings, thoughts and ultimately behaviour are identified, made meaningful, and understood.

This aligns with Heidegger's (1927) ideas that things have significance and value to human beings within "Dasein." To understand the things that people care about, a person's behaviour must therefore be studied in context since significance and meaning remain dynamic and can reveal differing contextualised meanings and understandings in differing time periods and situations. Contradicting Husserl's (1964) argument that interpretations and meaning are a product of an individual's consciousness (as subjects related to objects), Heidegger (1927) believed that such interpretations of significance and meaning are made sense of in shared linguistic and cultural contexts. A phenomenological position, IPA also adopts (Smith et al 2009).

IPA's focus on studying experiences in context also reflects the Heideggerian (1927) view of temporality as a persuasive constitutive of being that is both directional and relational. Temporality thus refers to an awareness of time through the experience of being in time within each persons' lifeworld. Thus, within IPA there is a phenomenological concern to understand people in their temporal context and to recognise the meaning of both their "having-been-ness" and "being expectant" (past and future) to their life world story in order to gain a sense of the significance of these temporal elements for them in the present. This is considered important within IPA as an individual's view of their own world is closely tied to what has been experienced in the past, what is being

experienced now and what they therefore perceive as part of their future lifeworld (Eatough and Smith 2012). Indeed, Heidegger (1927) argued that it is temporality that gives rise to history, what he called "authentic history," since all things have a time and place and give rise to the "simultaneity" of the past, present and future in the (historical) actions a person resolves to undertake. IPA consequently draws on Heidegger's (1927) ideas of historicality to seek to question and then analyse participants about the historical, social, cultural, motivational, affective and political context (and possible contextual constraints) and background in which they live and operate in, as a way of understanding the meaning that arises from this.

However, being-in-the-world also means existence is spatial as well as temporal since everything in the world "belongs somewhere" (Heidegger 1927).

Spatiality therefore refers to the lived space that surrounds us, grounding people in a location and is therefore also a phenomenological concern of IPA in terms of what people might choose in discourse to relegate to the background or bring to their foreground within their unique situatedness (Smith and Eatough, 2012).

In IPA this is closely aligned with an individual's subject reality which is invariably influenced by, not isolated from, the socio-cultural and political world in which they live (Lopez and Wallis, 2004). In line with this belief, human beings are similarly thought to be unable to extract themselves from this, even if they wished to; ideas that further reinforce Heidegger's (1927) ideas of the "lifeworld" and "being-in-the-world." IPA thus seeks to not only understand participant's unique subject reality but also to understand how the (life) world inhabited by them contributes to their own understandings (meaning), actions and experiences (Shinebourne, 2011).

From this phenomenological perspective, IPA in embracing "being in the world" does not view people as reflecting a Cartesian dualism but rather involved in the world in a mutually interwoven and related manner. Thus, individuals are not only ontologically considered to "be in the world" but also to "be-with" (*Mitsein*) and to be in a "with-world" (*Mitwelt*). For example, when constructing the

interview framework and to ensure philosophical congruence, I avoided asking, descriptive phenomenological style questions such as "tell me what SMIL is like for you," and instead tried to obtain information about the socio-cultural context as well. For example, by asking participants, - similar to the suggestions made by Lopez and Willis (2004), - to describe in detail a typical day of self-managed learningand to encourage them to describe, for example, their interactions, workload, relations to others and their experiences of time and space.

3.5.4 Embodiment

IPA is also indebted to the phenomenological philosophy of Merleau-Ponty (1962) and the embodied nature of our relationship to the world as well as the primacy of our inescapable situated perspective of this. Like Heidegger (1927), Merleau-Ponty (1962) offers a contextualised phenomenological perspective and commitment to understanding our being in the world but considers the "body as subject" (not object) and in doing so reflecting our means of communicating and making sense of the world. As such, the body is considered inextricably linked with how we live our lives in the world, representing as it does the juncture between the self and the world by drawing the self into the world and the world into the self (Smith et al 2009).

The concern of Merleau-Ponty (1962) with embodiment and subjectivity means that while we can and should feel and express empathy for another, we can ultimately never share entirely the other's experience because of our embodied position in the word means that experiences belong solely to the person living them. For IPA researchers the phenomenological perspective that the body shapes our knowing about the world is crucial and while it can never be fully captured, should not be ignored as being a body in the world is a key aspect of our lived experience.

3.5.5 Existentialism

IPA is also underpinned by the phenomenological thinking of existentialism (Smith, 2010). The core message of existentialism is, in essence, that every one of us, as an individual, is responsible for who we are, what we do, and how we face and deal with the – absurd and essentially meaningless - world around

us, including both the everyday choices we make and the consequences this produces (Solomon, 2004). Heidegger (1927) is said to have used the term "situated freedom" to describe this, asserting that humans are existential beings and thus free to make choices, but, that this freedom is not an absolute one. Instead, it is constantly circumscribed by the social, cultural and political context of people's lives (Lopez and Willis, 2004). Consequently, individuals are forced to make choices every day and act based on the decisions made and it is ultimately this that produces a dynamic and ever changing existential reality and "meaning," similar to the humanistic concept of personal agency, a psychological approach which itself is heavily influenced by existential thinking (Malim and Birch, 1998).

Sartre's (1943) existentialism, from which IPA draws heavily (Smith et 2009), emphasises that as human beings we are caught up in the projects of our own world and seek after meaning in the ongoing process of becoming. For Sartre (1943) the existential concern with what we will become, rather than what we are, is of significant import as it highlights that things that are absent are just as important as those that presently define who we are and how we see the world. This inevitably leads us to often tense encounters with others and the life projects they themselves are engaged in, all of which equally shape our perceptions and meanings.

For IPA researchers, Sartre (1943) therefore extends Heidegger's (1927) emphasis on the worldliness of experiences to the realm of personal and social relationships. As such, IPA contends that we are better able to understand the lived experiences of others when we conceive them as contingent upon the presence or absence of their relationship to other people who are also engaged in their own projects in the world as these all contribute to our embodied, interpersonal, affective and moral encounters as human beings (Smith et al 2009).

3.5.6 Summarising the phenomenological contribution to IPA

While Husserl's (1964) phenomenology establishes for IPA the importance of focusing on experience and its perception, the ongoing and collective

phenomenological contributions of Heidegger (1927), Merleau-Ponty (1962) and Sartre (1943) help offer a view of people as complex, immersed in the world of objects, concerns, projects, culture, language and relationships with others as a key feature of being in the world. Together these ideas help establish phenomenological philosophy within IPA as reflecting a more interpretative and worldly philosophical position than that originally intended by Husserl's (1964) transcendental approach since access to the lived world is always considered to be through interpretation and contextualised. For IPA researchers "lived experience" therefore reflects a process of unfurling perspectives and meanings unique to the embodied person and their situated relationships to and being in the world (Smith et al 2009). In doing so, IPA becomes concerned with interpretating and understanding the relationship participants have with their world alongside their attempts to make meanings from this.

3.6 Hermeneutic theory and IPA

IPA therefore considers phenomenological inquiry to be an interpretative process and thus intellectually draws on hermeneutic theory to uncover meanings concealed by the phenomenon's mode of appearing (Shinebourne 2011). The etymology of hermeneutics relates to the Greek God Hermes, who was responsible "for making clear, or interpreting messages between Gods." Today hermeneutics is considered a theory of interpretation. As a process for understanding it is considered both a process and method for manifestly clarifying and interpreting phenomenologically that "what is normally hidden in human experience and relations" (Lopez and Willis 2004) with the ultimate aim to make meaning intelligible (Eatough and Smith 2012).

A central tenet of this within IPA is that the understanding of "being" is closely linked to interpretation since access to such things as they appear in our consciousness is inevitably via interpretation itself. For IPA, interpretations are therefore attempts to understand how people have come to be situated in their particular world. Therefore, every interpretation is considered already contextualized in previous experience (fore-having) and can never be presuppositionless (Shinebourne 2011). In doing so hermeneutic theory in IPA draws heavily on the work of both Heidegger (1927) and Gadamer (1976).

3.6.1 Heidegger

In concordance with Heidegger's (1927) philosophical focus on deriving meaning from being, IPA considers phenomenological inquiry to be an interpretative enterprise and like Heidegger (1927) that hermeneutics is by nature ontological since it relates to the fundamental condition of being in the world. From a Heideggerian (1927) perspective, phenomenology requires the uncovering of meaning in order to understand "the thing as it shows itself." However, while things may have a clear and explicit meaning, they can equally reflect a meaning that is concealed, latent or disguised. Heidegger (1927) thus considered hermeneutics, - although developed as a separate philosophical movement, - as a pre-requisite for phenomenology since the process of revealing and making manifest the implicit or hidden unequivocally necessitates the analytical engagement of interpretation since understanding is deemed existential and involved in the nature of possibilities. A position also adopted by IPA (Smith et al 2009).

This philosophical positioning relates closely to Heidegger's (1927) notion of logos which he translates as discourse and relating to the primordial human capacity that enables people to communicate with each other. In this way, discourse becomes what he refers to as the articulation of intelligibility and therefore underpins both interpretation and assertions so that meanings inevitably become expressed in language. However, Heidegger (1927) also noted that such disclosures are already immersed in the context of being in the world and thus every interpretation is already contextualised in past experience and thus cannot be considered presuppositionless. Similarly, perception, as a single conscious act, is at once interpretation. Philosophical perspectives that diametrically oppose those of Husserl (1964) and his transcendental phenomenology.

In doing so Heidegger (1927) introduces the ideas of fore-structure of understanding and argued that this is always implicit within the interpreter's own interpretation and sense making process since interpreters are already contextualised in their world and interpret their own and others world in line with

their socialisation and culture. Fore-structure of understanding thus reflects the interpreter's own taken for granted knowledge and lived experience of Dasein which they inevitably bring to the encounter. In this sense, fore-structure of understanding encompasses all that is already known and understood in advance of interpretation, encompassing both past awareness and an interwoven future orientated anticipation of meaning. For both IPA and Heidegger (1927) interpretation is therefore the process by which fore-structure can and should be made explicit and revealed in order to uncover meaning and understand "the thing as it shows itself."

In developing these ideas, Heidegger (1927) argued that interpretation, and ultimately understanding, is always grounded in a three-fold temporal fore-structure of understanding consisting of fore-having, fore-sight and fore-conception. Fore-having embodies the existing practices that the interpreter beings to each encounter and their familiarity with the phenomena under study. Fore-sight, although derived from the interpreter's own background and fore-having, is the interpretative lens by which they make their own interpretation, while fore-conception reflects their future orientated anticipation of the interpretation alongside their expectations of what they hold to be a satisfactory question and answer.

Since these aspects of fore structure are always there and precede encounters, they have the potential to act as an obstacle to interpretation of the taken for granted experience. However, unlike Husserl (1964), IPA draws on Heidegger's (1927) ideas that making sense of the fore structure can reflexively become a tool to interpretation since understanding may actually flow from the thing to the fore structure, rather than vice versa. In this sense, Heidegger's (1927) philosophical unravelling of the relationship between interpretative work and the fore structure of understanding offers what Smith et al (2009) highlight as an opportunity to re-evaluate the role of bracketing in the interpretation of qualitative data in order to arrive phenomenologically closer to the thing itself. Indeed, Heidegger (1927) perceived understanding as both existential (involved in the nature of possibilities) and two-directional, namely to the *world* and to Daisein, the latter of which enables greater self-understanding.

An underpinning assumption of IPA is therefore that the presuppositions and expert knowledge of the researcher are valuable, rather than unwanted, tools to guide and make meaningful the subsequent research inquiry since they provide an opportunity for more insightful and creative hermeneutic interpretations. Indeed, Smith (2007) himself accepts understanding as multidirectional and argues it may not even be possible to know in advance which preconceptions and biases are relevant in each situation as fore structures change during the process of interaction and interpretation.

This Heideggerian (1927) notion, also highlighted by Lopez and Willis (2004), aligns itself with my own belief that it is, and was, impossible to rid myself of the very interest and understandings that led me to the research topic of SMIL at the outset. It also reflects my epistemological stance that it is social interaction and a contextualised being in the world that construct knowledge since individuals are inextricably related to others and the world they inescapably inhabit. Consequently, and in the context of this study, I have explicitly acknowledged my own fore structures that I bring to, - and which were modified and revised by, - the study alongside the process of interpretation embedded within this. These appear throughout the thesis to avoid any undue biasing effect and were first made reflexively explicit within ongoing analysis of a reflective log maintained throughout the life of this study. This has helped to clearly illustrate how they were being used before and throughout the development of my project to ensure philosophical harmony at all stages. An issue further addressed under quality and rigour issues within this chapter.

Likewise, in Heideggerian (1964) hermeneutic philosophy human action and text are not considered objects "out there" but have a mutuality that is negotiated during the process of interpretation, rather than simply discovered (Smith et al 2009). Meaning thus becomes created through engagement with the discourses of others "being in the world" and the making explicit of one's own fore structures. This stance is in line with Heidegger's (1927) concept of "co-constitutionality" that IPA embraces (Lopez and Willis, 2004; Smith, 2007). The concept of co-constitutionality acknowledges that the findings of such

studies will, in the end, be co-constructed, in this instance between the participants and myself. As such, this study reflects "a blend of meanings and interpretations" (Lopez and Willis, 2004: 730) articulated by all involved, given that we are always influenced by our life world and none of us will be able to escape "being-in-the-world."

IPA therefore supports Heidegger's (1927) notion that interpretation is a circular process, - often referred to as the hermeneutic circle, - whereby fore structure of understanding is made explicit and explored in terms of the whole understanding of something before being reconsidered in new ways while continuing dynamically to be in the world. Smith (2007) therefore advocates the use of Heidegger's (1927) and Gadamer's (1976) ideas about "double hermeneutics" and a "hermeneutic circle" to refer to the fact that IPA research is also a constantly dynamic and iterative interpretation of the lived world. In the search for understanding, this requires on-going movement from parts to the whole as the researcher will themselves apply an interpretation using their inescapable presuppositions to the participant's own subjective interpretation. Understanding and meaning are not therefore isolated entities but form a symbiotic relationship whereby pre-understanding gives meaning to the interpreters understanding which in turn gives further meaning to their interpreted preunderstanding provided the inquirer opens themselves to the phenomena to allow it to speak to them (Eatough and Smith 2012).

3.6.2 Gadamer

In this way, IPA also draws on and concurs with the philosophical hermeneutic ideas of Gadamer (1976) who extends Heidegger's (1927) concept of coconstitutionality in the metaphorical term "fusion of horizons" (mixture of understandings) to go beyond what is immediately obvious. In doing so Gadamer (1976) supports the notion that hermeneutics is fundamentally ontological and focused on the relationship between fore structure and the studied phenomena. From this he argues that understanding and interpretation are inevitably bound and linguistically and dialectically mediated through conversations with others.

Likewise, he argued that the omnipresent nature of pre-understanding means that knowledge development and understanding are not linear processes and that we cannot start developing understanding of a phenomenon from scratch (Gadamer 1976). Instead, understanding is considered circular in character in so far as our pre-understanding provides an initial grasp of the phenomenon under investigation, which although becoming enriched through further hermeneutic engagement with the phenomena and our fore structures, is what subsequently also provides us a new and dynamically revised pre-understanding for further interpretative endeavours.

For Gadamer (1976) and IPA researchers this means that knowledge development and understanding is never complete as there is in essence, no determinacy to understanding, nor by implication, can any absolute ontological truth ever exist. Instead, it reflects an ongoing process of continuously revised pre-established understanding that we always bring to a phenomenon we want to investigate. Interpretation and understanding therefore become constantly dynamic and iterative processes in which the whole in terms of situated reality is understood via the detailed examination of everyday existence (the parts) and the ongoing movements between these two positions.

The hermeneutic philosophy of Gadamer (1976) embedded with IPA and the hermeneutic circle also adopts a positivity towards prejudice. Like Heidegger (1927), Gadamer (1972) considered the notion of "bracketing" absurd as he believed it was illusionary to think fore structures could or needed to be eliminated. Ergo he argued that it is our prejudice that opens us up to what it is to be both understood and to understand others in the first place. In this respect Gadamer promotes a positive conception of prejudice (*Vorurteil*) drawing on the original pre-Renaissance etymology of prejudice as prejudgement. Gadamer (1976) therefore argued that the fore-structures of our understanding act as anticipatory structures allowing what is to be interpreted or understood to be grasped in a preliminary fashion. The fact that understanding operates by means of such anticipatory structures means

that understanding always involves revisable presuppositions in the process of sense making and the interpreter needs to be constantly open to this.

Gadamer's (1976) framing of hermeneutics also relates to what he terms the "linguisticity of understanding" where he builds on Heidegger's (1972) notion that language is the "house of being." As such, he argues that language is the medium through which it is possible to understand, and that understanding is ultimately situated in language. As such, Gadamer (1976) argues that we think in words and that reality and phenomena only become determinate and significant through linguistic and dialogical articulation and analysis. Thus, to understand the meaning we must first understand and interpret the language.

Equally, Gadamer (1976) in fusing phenomenology with hermeneutics also supports Heidegger's (1972) notion of historicity to propose that understanding always occurs against the background of our prior involvement and therefore determined on the basis of our personal history and historically-determined situatedness. In doing so he developed Husserl's (1964) seminal use of the metaphor "fusion of horizons" to propose that understanding is a dialectical, negotiated and co-created process of fused understandings and perspectives in which the historical horizon is continuously fused with the present horizon but the latter is also influenced by prejudice. For Gadamer (1976) this fusion is essential for understanding the unfamiliar. Indeed, he went on to argue that all understanding involves a dialogue of horizonal engagement between what is familiar and what is alien with neither remaining unaffected, provided a constant reflexive and questioning motion is adopted. For Gadamer (1976) this constant reflexivity enables horizons to change and broaden in order to capture a new, wider, more insightful and unexpected synthesised understanding and sense making.

3.6.3 Summarising the hermeneutic contribution to IPA

Hermeneutics offers important philosophical insights for IPA which is itself an interpretative phenomenological and analytical approach. In fusing the philosophy of phenomenology and hermeneutics, both Heidegger (1927) and Gadamer (1976) help researchers like myself understand how the inquirer is

also implicated in making sense of the chosen phenomena and the positive relationship with fore structure and reflexivity. Understanding and sense making is framed by close hermeneutic engagement and interpretation that also attends to the important role of language, discourse, fused horizons, temporality and historicity.

3.7 Idiography and IPA

IPA is also resolutely committed to idiography and in doing so continues to reflect a subjective epistemological position characterised by relativism and a constructivist ontology (Eatough and Smith 2012). For example, IPA views each individual as a unique holistic being whose contextualised experiences of being in the world are personal to them and are not philosophically considered to be nomothetic creatures (Shinebourne, 2011). Thus, while IPA does acknowledge and value possible similarities between lived experiences, - and in turn interpretative phenomenology does imply an idiographic element, - IPA explicitly aims to primarily respect and understand the uniqueness of each person before attempting comparative analysis in which similarities and divergence also become identified within an idiographic methodology.

To ensure philosophical concordance this means examining closely within the hermeneutic circle what the experience is like for the one person and appreciating the way in which that person makes sense of what is happening or has happened to them before attending to other participants and their life world. Eatough and Smith (2012) argue that commitment to the detailing the diversity and variability of human experience alongside a common contextualised humanity among participants can create tensions. However, these tensions encourage creative thinking and provide a deeper level of hermeneutic engagement that can help researchers get closer to the phenomena while at the same time broadening their fused horizons and the understanding of their forestructures.

Having established the intellectual and philosophical basis of my chosen methodology and then congruence with my own philosophical position and research question, attention is now given to the method and design of my study.

3.8 Recruitment and sampling

Thirteen adult nursing students (appendix four) across three different cohorts and two university campuses were recruited from the final year of the undergraduate BSc (Hons) Adult Nursing programme at one UK university where I am a faculty member, using purposive and broadly homogeneous convenience sampling techniques. Purposive sampling is used within both qualitative research and IPA to help select participants who "best" illustrate some feature of the phenomenon under study and for whom the research question will therefore have significance (Silverman, 2005; Smith et al 2009). In this study, willing and eligible participants were recruited from the final year of the programme on the basis of their greater lived experience of SMIL and the potential to therefore provide richer data for analysis.

Exclusion criteria, based on various ethical considerations and risks, were that participants were not drawn from student groups that I currently "teach" and/or were likely to in the near future so that any potential power imbalance created by my professional role would be reduced. Mental health and child health students on similar undergraduate degree programmes were also discounted due to their smaller cohort size. Similarly, I was not aiming to achieve a representative sample in terms of both probability and population, but rather to select participants to best help illuminate my research question and to develop a comprehensive and rigorous interpretation of the data. My sample size was therefore relatively small. Indeed, Smith and Osborn (2003) argue that for IPA, and its embedded idiographic mode of inquiry, a sample size of approximately eight to twelve is reasonable for doctoral studies in order to gain "subtle inflections of meaning," albeit it can be used with a single case study as well as larger data samples.

Subsequently, the sample size was determined by the significant amount of time required to collect, transcribe and analyse the participant accounts and subsequent cross case analysis (Cormack, 2000) while also needing to consider attrition risks and sufficient data sources to enable saturation, whereby no new information is discovered (Silverman, 2005). In the end no participants withdrew, and all entered into the research study with passion and enthusiasm.

Interestingly, Smith and Osborn (2003) appear to consider "saturation" a moot point within IPA and draw attention to the iterative nature of analysis whereby transcripts are repeatedly analysed in light of insights obtained from other sources. They suggest that this process could, theoretically at least, continue ad infinitum as the next interview might always be the one to produce additional and confounding evidence. This also links to philosophical argument posed by Gadamer (1976) who maintains that there is no, nor will there ever be a final determinacy to understanding.

Instead, they (Smith and Osborn 2003) argue that the aim of the IPA researcher is slightly different and aims to produce a persuasive, empathic, illuminating, coherent and in-depth interpretation of nuances and accounts that otherwise would have remained enigmatic. Correspondingly, they (p54) also advance the proposition of "theoretical generalisability" as opposed to more traditional and positivist notions of empirical generalisability. Consequently, they argue that data does not necessarily have to be "saturated" but rather findings from IPA studies can be used in a broader context to make links with practitioners' own personal and professional experiences as well as the extant literature. I therefore aimed to capture richness of data, both in the data collection and data analysis stages, and was not necessarily overly considered with saturation and reification of sample size to ensure this. In line with this all students, fitting the inclusion criteria of being a final year adult nursing student with experience of SMIL and willing to participate in the study were contacted by way of an opening email inviting them to take part in the study.

In addition, a participant information document (appendix five) was provided at this time. This included full details of the research purpose, what was expected of participants, practical as well as ethical considerations, a written consent form (appendix six) and my contact details. The remoteness of this strategy was chosen at the outset in recognition that some student nurses may struggle to assert their views if approached to participate in person and/or in small groups and may thus commit, at least initially, without authenticity to themselves; an issue developed further in the ethical and risk consideration section. This

decision was further reinforced by my desire to reflect the humanistic value of unconditional positive regard alongside anti-oppressive non- judgmental methodologies throughout the study.

All students who expressed an interest in being selected for involvement in the study were invited to an informal face to face meeting in which the research aims and objectives were broadly discussed. Conversations thus aimed to be natural and to build trust, equality and involvement. Indeed, Smythe et al (2008) suggest that approaching interviews with a mind-set of "conducting" is likely to "freeze the phenomenological spirit" and thus presumably best avoided. A "cooling off" period of one week was also provided following this meeting to provide time for students to make an informed and voluntary decision regarding participation but not too long that they lost interest and/or felt neglected.

3.9 Data Collection

Brocki and Wearden (2006) in their critical evaluation of the use of IPA argue that data collection approaches within IPA need to be detailed and subject to more rigorous examination than more traditional quantitative studies given the dynamic role of the IPA researcher in both "co-constitution" (Heidegger 1927) and the "fusing of horizons" (Gadamer 1976).

3.9.1 Individual face-to-face semi-structured interviews

To reflect my chosen IPA approach, data collection was gathered from individual face-to-face semi-structured interviews which were digitally recorded and transcribed verbatim in order to capture both nuances and content. Follow up interviews to fully capture a "fusion" of understanding between myself and the participants and thus clarify any potential misunderstandings as well as reduce potential bias, also took place for over half of the participants. However, a few participants did not wish to participate in follow up interviews as they agreed with the initial transcribed analysis emailed to them.

Walker (2011) recommends using a small digital recorder with built in microphone and with at least 300 minutes of recording time. Her rationale being, that each participant will have the freedom to talk without interruption

from change of audiotapes. The extended recording time allowed me to pay active attention to what was being said, rather than focusing on the available time or the equipment reliability. That said, most interviews lasted 55 to 65 mins and helped balance the need for rich and interesting data while at the same time also respecting the needs and well- being of participants in terms of concentration, attention and potential fatigue. This time frame also reflects what Walker (2011) advocates as an ideal length for semi-structured interviews. One interview lasted 40 minutes and was curtailed as the participant appeared increasingly fatigued following a day at university and was followed up with a further 30-minute interview when the participant was more rested.

Indeed, Smith and Osborn (2003) suggest semi-structured face to face interviews are the ideal method for IPA and, in line with this, the vast majority of published research studies reviewed appear to have also adopted this data collection method, with most valuing face to face as opposed to more indirect methods (eg Carradice et al 2002; Warwick et al 2004). Interestingly where other indirect methods have been used - eg telephone (Older et al 2010) and email (Murray, 2004) – these have not supplanted face-to-face interviews, but rather supported them.

3.9.2 Rejecting focus groups

Similarly, some IPA researchers have effectively used focus groups in their IPA studies. Indeed, Dunne and Quayle (2001) claim this was an effective strategy for the largely homogeneous sample they obtained. However, while my proposed sample was arguably also broadly homogeneous, and, focus groups may help promote a more organisationally manageable data set, I remained aware of Smith and Osborn's (2003) caution that IPA aims for detailed exploration of personal idiographic experiences.

Equally, Tame (2011) reports on the seminal concept of "secret study." Secret study emerged as significant theme within her qualitative research and indicated that not all qualified nurses in her sample felt comfortable discussing their "self-managed" learning with their peers and work colleagues. Such hesitancies appear to have been based on the perceived influence of

marginalised academic discourses within the workplace, academic self-efficacy and potential ramifications – both practical and psychological - of perceived failure. As my sample were student nurses and I am a faculty member, it could be argued that such influences have the potential to be experienced even more intensely and could subsequently lead to an inadvertent flattening affect. For these combined reasons, focus groups were discounted.

3.9.3 Rationale for individual interviews

Equally, the fundamental research question that prompted the need for interviews relates to exploring nursing students own lived experience of SMIL within their undergraduate nursing studies. As such, a semi- structured interview style was selected in order to uncover the salient, and potentially serendipitous, themes of their own unique lived experience. This was likely to offer a desirable balance between flexibility and control as well as helping to ensure the research aims could be achieved. In this sense participants were offered the flexibility and freedom to explain their idiographic position in their own words and I had the opportunity to demonstrate both an empathic and inquiring approach which Smith and Osborn (2003) argue helps build rapport and rich data for IPA. They also reflect the central philosophical underpinnings of IPA embedded as it is in both hermeneutic phenomenology and idiography. For example, a central tenet of hermeneutics, itself a key feature of IPA, is the analysis of language since language itself is viewed as central to the understanding of "being" (Gadamer 1976). Thus, it is through language that individuals assign and articulate meaning to phenomena. Individual semistructured interviews thus allowed me to gather students own linguistic accounts of their lived experience in order to later interpret the meaning of being during data analysis.

3.9.4 Timing and location of interviews

The timing and location of the interviews formed part of a negotiated agreement with participants. The aim was to provide a quiet, safe, relaxed and undisturbed atmosphere and to avoid the "environmental chaos" described by Duncan et al (2009) whereby participants were, at times, disturbed and distracted by ambient noises and participant multiple role demands. All interviews therefore took place

in a quiet room in the university that did not engender uncomfortable feelings in the participants.

3.9.5 Practising and reflecting on interview technique

Beck (1994) also highlights the importance of practising interview techniques on independent people who can provide critical feedback prior to entry into the research field. The rationale being that this has the potential to offer personal insights into common pitfalls – particularly in the need for me to avoid interpreting participants narratives prematurely – in asking participants to reflect on phenomenon. Thus, in order to ensure the research conclusions reached arise from the data generated and not from my own "prematurely and imposed" interpretation, I arranged with a colleague with experience in qualitative research interviewing, to practice my interview and active listening technique prior to commencement of the research study. In turn, they provided honest and constructive feedback from which I learnt experientially before entering the research field. For example, I learnt to make bullet point one-word cues in my notes to follow up ideas rather than distracting extended notes where I lost eye contact and appeared distracted causing the "participant" to lose focus.

3.9.6 Semi-structured interview framework

A semi structured interview framework was developed in advance of data collection (appendix seven). Smith and Osborn (2003) propose that this preplanning is essential as IPA data collection is not solely a co-determined interaction. Producing an advanced framework therefore forced me to think explicitly about what I wished the interviews to cover and to guide my initial questioning. More specifically, it enabled me to anticipate how any potentially problematic and sensitive questions might be addressed prior to participant involvement.

The interview framework therefore guided the interview but did not dictate its exact course, as it was important to embrace the idiographic and iterative, rather than researcher imposed and linear, nature of the inquiry. As such, questions at times were adapted in light of the presenting participant narratives in order to explore first person areas of significance. Such on-going attention

and amendment helped ensure that I did not inadvertently structure the analysis before the process of data collection had begun or ended.

To avoid this Walker (2011) suggests providing a mix of closed and open questions and to start with a "grand tour" question as advocated by Spradely (1979) who himself contends that such broad descriptive questions help place the interview in the context of the participant's own lived experience and allows them the freedom and flexibility to direct the subsequent narrative. Interestingly, Spradley (1979) suggests that grand tour questions ask for a description of "how things usually are" and can be followed up with both "specific grand tour" questions (eg asking about the most recent experience) and "mini tour" questions (eg asking about a smaller unit of experience eg affective experiences). Walker (2011) in her own reflective discussion of phenomenological interviewing then advocates the use of more focused questions (to elicit specific detail), akin to Spradley's (1979) specific grand tour questioning; open ended non-directive questions (to enrich the description); and probing questions (to help participants elaborate on the issue being discussed and thus gain a more in-depth response) similar to what Spradley (1979) describes as "mini-tour" questions. All issues considered when developing the interview framework.

This probing is argued by many authors (eg Fade, 2004; Walker 2011) to be a key interview skill in order to achieve a rich data corpus but one which also needs to be handled with sensitivity and care to avoid participant distress and study bias. Walker (2011) therefore recommends pre-specifying some probing questions on the interview framework to serve as reminders to explore certain aspects of the participant responses to particular questions.

The use of a range of non-directive active listening responses to subtly encourage participants to reveal their thoughts, feelings and experiences were therefore used including the use of paraphrasing, reflective, echoing and clarifying responses. Freshwater (2003) argues that such responses, when used with deliberation and intention, - and not unthinkingly and interrogatively, - can help open up channels of communication and provide numerous

opportunities to develop rapport and an empathic bond. She adds that they can often prompt individuals to go further with their exploration of their own feelings, emotions and thoughts, provided they are not overused to create an inadvertent relationship barrier. Such strategies also enabled me to "member check" (Smith and Osborn, 2003) to clarify my understanding of the meaning of what was being said. However, while using such responses I constantly monitored the effect of the questions on the participant to ensure I remained aware of any early indications of distress.

This is something that I have some previous experience in terms of my academic role in active listening and responding to undergraduate students in both tutorial and group seminars. This transferable skill enabled me to gently probe beneath the superficial level of consciousness and Husserlian type "natural attitude" or "taken for granted experience" (Jasper, 1994). However, my early reflexive diary entries indicate that this was a skill I needed to continually refine in the research context as initially the first two interviews started to move away from the research question as I used active listening responses without recourse to the interview framework.

3.9.7 Rejecting on-line communication as a method of data collection

I also discounted various on-line communication data collection methods (eg instant messaging; one to one video conferencing) even though such technologies are more ubiquitous, familiar and often valued by undergraduate students. Interestingly, Murray (2004: 865) in an IPA study exploring the embodiment of artificial limbs used email interviews to support face—to-face interviews with participants and suggested that the data obtained in the former was more focused, forthright and "more reflectively dense" than the face-to-face interviews conducted. The supposition being that these on-line interviews facilitated more naturally occurring communication and provided greater participant control in turn enabling more considered responses.

However, this type of data collection is not perhaps without its risks. For example, Coleman and Briggs (2007) warn that participants can be reluctant to engage in additional activities due to time constraints and perceived invasion of

privacy and role boundary concerns. Given that I am an academic member of staff and the participants engage in both faculty and practice-based learning opportunities, this was deemed a salient reason for rejecting this specific data collection method alongside my own unfamiliarity. Equally, such tools do not always provide visual or intonation cues making it difficult to establish trust and a sense of community which as an academic member of staff I was keen to achieve.

3.9.8 Challenges during interviews

On a slightly differing note, Walker (2011) reports that all participants in her phenomenological study sought her own views and opinions on the research topic at some stage during the interviews. At other times, an assumed and shared level of knowledge was evident together with acceptance seeking behaviours as exemplified in such participant questions as "isn't it?" "is that right?" or "you know what I mean." I experienced similar participant behaviours and responded by using a range of active listening responses and reassurances about not seeking right or wrong answers but rather their own perspectives to ensure I did not prematurely impose my own views and introduce bias into the gathered data.

Similarly, Hogg and Vaughan (2008: 138) define impression management as "the active use of strategies to get others to view us in a positive light" and argue that self-promotion - ie attempts to persuade others that we are competent - and ingratiation - attempts to persuade others to like us - are the most pervasive. The need to be aware of these, often unconscious processes, was also an issue I remained aware of during data collection. For example, concern was expressed by Reynolds and Prior (2003) in their phenomenological study that in the course of their interview's, participants may have tried to convey replies congruent with the perceptions they deemed desirable. Such self-presentational work however has the potential to reduce the credibility and trustworthiness of the data if not addressed during data collection. As such, I aimed to promote a non-judgemental atmosphere of unconditional positive regard on the premise that the higher the participant's self-esteem, the less likely they are to try to "manipulate" their impressions to

others (Hogg and Vaughan, 2008). This again involved reiterating to participants at each interview that I was not seeking "right or wrong" answers but rather a deeper understanding of their experiences as they experience them. The need to ensure congruence between my verbal and non-verbal communication was also paramount as was non-directive active listening responses.

3.9.9 Ending the interview

At the end of each interview, Carradice et al (2002), in line with IPA philosophy, also suggest summarising the content to ensure that the participants perspective is fully understood, while Walker (2011) similarly advises against any sudden and abrupt end. As such, I terminated each interview by asking participants whether there was anything else they would like to share on their experience of SMIL and any questions they would like to ask. Walker (2011) also advocates asking about what they have enjoyed about participating in the research as determining the benefits of participation can help encourage ongoing engagement and satisfaction. With these aspirations in mind, I also included within the participant information document a non-directive recommendation that participants might wish to consider spending sometime directly after the interviews, doing something positive for themselves and their own well-being. Not only is this likely to help promote their own health and wellbeing, it also has the added potential to develop, based on behavioural psychology, a positively conditioned response to help maintain engagement over time.

3.9.10 Notetaking as part of data collection

I had intended to take notes during the interviews but the pre-entry practice interview with a colleague indicated that this has the potential to be distracting and adversely influence participant concentration. I did however make one-word bullet point prompts when needed and digitally audio-recorded my thoughts and observations directly after each interview and before leaving the location in order to contextualise the interview in readiness for subsequent data analysis and interpretation.

3.9.11 Interview transcription

Verbatim transcription subsequently took place at the semantic level (Smith and Osborn, 2003) and reflected the conceptual understanding of communication as more than the transfer of spoken words to also include the transfer of "important" emotions and shared meanings (Hargie and Dickson 2004). As such, transcripts included all the spoken words as well as any false starts, significant pauses, laughs and all other features of paralinguistic communications. General prosodic talk features were also transcribed as these may reflect the emotional and salient state, not fully captured in participant word choice (eg intonation, tone, stress, and rhythm). However, this was not as detailed as if I had decided upon a conversational or discourse analysis.

Transcriptions took place in solitude within a week of interviews, except two which were sent to a professional and confidential transcription service. A wide margin was left on both sides of the transcription to enable analytical and critical comment. For example, Carradice et al. (2002) recommend that following a close reading of the transcript, the left margin is used for preliminary interpretations and the right-hand side margin is used following further close scrutiny to identify preliminary themes which I found useful.

Given the recognition in IPA of the researcher's interpretative role in analysis (Smith and Osborn, 2003), I also acknowledged and recorded in broad terms my preconceptions, beliefs and aims prior to the commencement of data collection. In this instance I was not aiming for Husserl's (1964) transcendental notion of epoché (bracketing) that presupposes I should avoid "contaminating" the data, as this is essentially antithetical to both my own philosophical ontology and that of IPA itself. Indeed, IPA arguably draws more heavily on Heideggerian hermeneutics whereby the doxic positing (ie positing of belief) as a neutral phenomenon is not widely advocated or assumed (Brocki and Wearden, 2006).

As an IPA researcher, I have a role and reflexive effect on both data generation and data analysis which Smith (2007) conceptualises a "hermeneutic circle" and to which I needed to engage in order to work out any pre-understandings in

relation to my study. This recording of my preconceptions in a "fusing of horizons," (understandings) based on the philosophical ideas of Gadamer (1976) thus helped ensure that any subsequent analysis was rigorously undertaken without the introduction of premature bias and deviation from the participants' stories.

3.10 Rigour and quality consideration

Morse (1999), in an editorial, claims that it is a misconception to believe that reliability and validity are not relevant to qualitative research studies, albeit she steers clear of advocating any positivist paradigm application in her argument that qualitative inquiry can meet these important conditions and circumstances. In line with this thinking, Yardley (2000) advocates four key domains by which all qualitative methods can be assessed, irrespective of specific theoretical orientation, namely:

- Sensitivity to context
- Commitment and rigour
- Transparency and coherence
- Impact and importance.

3.10.1 Sensitivity to context

Sensitivity to context is multidimensional and relates to sensitivity to relevant theoretical literature, - including philosophical congruence, - the socio-cultural context of the study as well as participant involvement (Yardley 2000). Much of the early part of this project was thus used to critically review existing research evidence and literature related to SMIL and adult student nurses in particular. This also involved keeping update with relevant findings and setting database alerts throughout this study. From this it was also possible to develop a research question that had not been addressed previously which Yardley (2000) argues is also a key aspect of sensitivity and in establishing an original contribution to knowledge.

IPA is committed to both idiography and hermeneutics in line with this sensitivity hypothesis as well as its desire to value, understand, interpret and report on the uniqueness of individual's own lived experiences intertwined and influenced as they are by their social context. For example, Shinebourne (2011) highlights sensitivity to context is involved in all stages of the IPA research process from philosophical underpinnings to sampling, data collection, data analysis and final reporting.

This submission reflects this in its purposeful recruitment of participants with a particular SMIL lived experience; the great care and attention given to data collection decisions in order to engage empathically with participant's lived experiences; and the grounding of analytical claims in participant's own accounts as well as the relevant and extant literature. This also extended to the ethical decision making made particularly in terms of my dual agency role and how I sought to address the potential power imbalance between myself and participants (Bradley-Jones and Alcock 2010). Verbatim extracts were also used in the findings chapter to support my interpretative findings to ensure that "participants are given a voice" (Smith and Osborn 2003) to further illustrate this context sensitivity. Indeed, Smith et al (2009) argue that this latter point is the most convincing way in which researchers can demonstrate sensitivity as it enables the reader to make validity judgements about my interpretations of the raw data.

3.10.2 Commitment and rigour

Commitment and rigour in IPA research are reflected in the thoroughness and completeness of the data collection and analysis (Shinebourne, 2011). I have therefore tried to embrace this within the comprehensiveness of this submission and my commitment to detailed and meticulous planning and research execution. Indeed, Smith et al (2009) argue that commitment can be demonstrated by attentiveness to participants in both data collection and analysis as exemplified in the research chapter and interview extract. This necessitated significant and prolonged engagement and immersion to ensure this domain was upheld but also the development of competence and skill in the method used.

To assist this, I joined and was an active participant in an IPA academic community whereby individuals interested in IPA research met on a three-

monthly basis to offer both support and challenge for their own and others scholarly IPA studies. When this disbanded, I joined and followed an online community of IPA researchers as well as attended an IPA workshop on data collection and analysis. I also attended a master class on IPA philosophy.

The demands of rigour also required me to seek regular critical feedback during research supervision to ensure Smith's (2010) conceptualisation of rigor as also related to analytical completeness and quality. As a team they agreed with the themes created and could see how they had emerged from the transcribed interviews. This was also demonstrated in the write up by selecting extracts from all participants to offer different and shared perspectives as well as demonstrating how the analytical interpretations were embedded in the various participant accounts, rather than just one.

However, commitment and rigour also started earlier than this in terms of remaining committed to the IPA approach in the setting of the research question; the selection of individual semi-structured interviews, rather than focus groups, to ensure individual voices were heard; the purposeful sampling to ensure participants were able to offer rich data for analysis; and the reflective and ethical consideration given to participants during data collection. Thus, upholding Smith et al's (2009) demand that IPA researchers remain committed and attentive to the participants they recruit.

3.10.3 Transparency and coherence (including reflexivity)

This latter point arguably relates closely with Yardley's (2008) third criterion of transparency which Shinebourne (2011: 27) describes, in the context of IPA research, as "the clarity of descriptions of the stages in the research process." To uphold this in my study, supervisory and peer feedback was regularly reflected upon however uncomfortable this was at the outset. To enable this to be effective I defended and made explicit my underlying assumptions, premises, reasoning and conclusions at each meeting so that any fallacies that inadvertently crept into my work could more easily be identified and addressed.

Smith et al (2009) suggest that transparency refers equally to the descriptions in the final report writing. As such, I have carefully explained the choice of IPA over other approaches and have set out my rationales throughout this chapter. In doing so I have provided justification for my methodical decisions and have kept a clear audit trail of the coding. Rodham et al (2015) similarly argue that Yardley's (2008) commitment, rigour and transparency criteria also assist in the demonstration of trustworthiness though the thorough, careful, honest and accurate data generation, analysis processes and final report writing. This was particularly important to consider as IPA has been described as a creative, fluid and flexible process and not a matter of "following a rule book" (Smith et al 2009: 184). As such, I have aimed to be detailed, transparent and rigorous throughout to make explicit the trustworthiness of this study given IPA is a flexible and fluid method.

Reflexive validity refers to the way in which the researcher's way of thinking is changed by the data (Smith 2007). A strong reflexive element is a hallmark of IPA research as through engagement with the hermeneutic circle (Gadamer 1976) during the data collection and analytical stages, the researchers understanding and interpretation should arguably change, develop and be elaborated on. Indeed, Heidegger's (1927) notion that it is not possible, nor desirable, to set aside ("bracket") experiences and prior understanding in the hope that it will not influence the findings has resonance within IPA. Instead enhanced self-awareness is required to enable the co-constituted fusion of both the participants and my own understanding as a basis for on-going interpretation and sense making.

I therefore adopted a reflexive and self-aware stance throughout the research process and kept clear and detailed notes as well as an audit trail on any reflections and thoughts regarding the study. This helped illuminate any preconception values and experiences that I may subconsciously hold which could inadvertently bias and/or shape data interpretations if my awareness is not raised. For example, Holloway (2005) advocates the need to always be a "stranger in a familiar setting" to fully reflect the hermeneutic basis of the

research. Similarly, Ahem (1999) offers a number of suggestions for "reflexive bracketing" which I adopted including, recognising feelings that might indicate a lack of neutrality and identifying taken-for-granted assumptions about the research topic, participants and process.

A tutorial with a senior academic colleague experienced in IPA similarly reinforced this aspect and provided me with various practical strategies. For example, writing down in advance what I anticipate my participants might say and then comparing and contrasting this with my actual interview transcripts and findings. If I then only obtained what I anticipated, this may be a clue that I might be biasing my data collection. During the research I was pleased to uncover much unanticipated findings adding to the rigour of this study.

Elliot et al (1999) also suggest including a personal statement of pre-existing epistemological and theoretical beliefs as well as a self-reflexive statement within the thesis which I have provided throughout the thesis. I have also included a methodological reflexive section at the end of this chapter in order to address differing types of reflexivity relevant to qualitative research as highlighted by Willig (2013).

Correspondingly, in terms of participant transparency, I offered regular "member checks" by inviting participants to review and comment on their transcripts in terms of both accuracy and the extent to which this reflected their experience. Interestingly, only two participants took up this offer to review the transcripts but follow up interviews that needed further clarification were enthusiastically engaged in. Meyrick (2006) points out that this need not be problematic as participant reviews of transcripts can move the analysis away from the researcher's interpretation of the data thus compromising the IPA approach adopted. Smith et al (2009) therefore advocate the use of verbatim interview extracts in the thesis writing to allow the reader to check my interpretations and to clarify that any conclusions are grounded in the raw data. Such transparency has the potential to enhance the external validity of qualitative research (Lincoln and Guba 1985).

Coherence is also part of Yardley's (2008) third quality criterion and relates, in significant measure, to how well the research design reflects the underpinning epistemological and ontological foundations of the chosen approach. In terms of IPA, Shinebourne (2011) states that this will mean ensuring that my study design closely and consistently attends to participants experiential claims and my own interpretative role. As such, I needed to ensure that both the phenomenological and hermeneutic nature of this study were apparent in order to ensure participants perspectives were given a clear and coherent voice throughout. I therefore needed to consider how my own writing and the participant grounded analysis would "resonate with the reader" in order to reflect Smith's (2010) claim that at its core, "validity" lies in whether the findings tell the reader something *interesting, important or useful*.

This position arguably extends and reflects a key philosophical perspective of IPA in which interpretative phenomenology and the concept of "double hermeneutics" also considers how the researcher is trying to make sense of the participant trying to make sense of their lived experience. In this case, the researcher (myself) when considering coherence, must also perhaps consider a "triple hermeneutics" to uphold Shinebourne's (2011) point that I needed to also consider how the imagined reader of my work will be trying to make sense of me, making sense of the participant who in turn is trying to make sense of their own experiences.

3.10.4 Impact and importance

This concern was also significant in addressing Yardley's (2008) fourth aspect of impact and importance. For example, the relevance and importance of more effectively understanding the complexities and nuances of SMIL following previous and more recent reformations across the higher education sector has been the subject of the first two chapters.

This and equally relevant justifications are developed further in the discussion chapter to meet Yardley's (2008) quality standards more fully. Indeed, it is argued that the most decisive criteria by which any research should be judged is its impact and utility (Yardley 2008; Smith et al 2009; Willig 2013). This

research not only offers a new, often neglected and original way of understanding SMIL from the perspective of adult student nurses themselves, it also offers an original methodological approach in studying this since IPA has

not been used previously in this context. It is therefore hoped this will encourage future qualitative researchers to consider its use. Consequently, this research is likely to be of interest to policy makers, nurse educationalists and researchers as well as anyone interested in how undergraduates develop independence in their learning.

3.11 Ethical and risk considerations

As this study involved human subjects, ethical approval prior to requesting student participation and field entry was gained from the University Research Ethics Committee (UREC) via the online checklist process. Throughout the study I remained both cognisant of and adhered to the university Research Ethics Code of Practice (RECP). Indeed, the data collection process involved semi-structured interviews and was therefore unpredictable, since subsequent data was guided by the emerging participant narrative. As such, questions were often unknown at the outset. This process therefore potentially violates both informed consent and any ethical approval gained. It also highlights Cohen et al's (2000) suggestion that ethical decision-making within the evolving qualitative enquiry remains the prime responsibility of the researcher. An issue I remained cognisant of throughout my study in terms of the complexities of, and need for, on-going "ethical mindfulness" (Duncan et al 2009).

3.11.1 Meaningful informed consent

My obligation to obtain freely given and meaningful informed consent from each individual is also a desire to reflect the ethical principle of respect for autonomy and the ethical issues of confidentiality, privacy, veracity and fidelity, all of which remained paramount. As such, an explicit informed consent document was developed (appendix six) and full verbal explanations together with an unhurried opportunity for participants to discuss and explore these issues prior to study and interview commencement. This document included information on the purpose and aims of the research as well as information on confidentiality,

anonymity, right of withdrawal, protection mechanisms and questions participants may wish to ask.

A participant information sheet inviting participants to participate in the research study (appendix five) together with an opportunity to discuss this via an informal follow up meeting was provided. While the information is sufficiently detailed to enable informed consent, the information was in some aspects broad due to the inherent limits of quality and rigour and in particular the need for participants to enter the research field in a pre- reflective self-conscious or "for-me-ness" state (Gallagher and Zahavi, 2010). As such, an opportunity for full explanations on completion of the study was also provided.

On-going consideration was also given to the fiduciary relationship I had with the student participants to prevent participants from feeling coerced into - and remaining in - the research study. Lemmens and Singer (1998: 862) conceptualise this as one in which there is a potential power imbalance and where "the more powerful person is entrusted to protect the best interests of the less powerful or dependent person." Ferguson et al (2006) also refer to the "dual agency" role of nurse educators who wish to undertake pedagogical research in order to address questions of epistemology, but who also face conflicting educational obligations to facilitate student learning. As such they, as well as Leentjens and Levenson (2013), advocate that nurse researchers only engage students as participants if they have no direct teaching responsibilities. An ethical obligation upheld throughout this study. This was also important given my desire to understand student's lived experience and not to gain insights into what they thought I wanted to hear.

3.11.2 Right to withdraw

Participants were also advised that if they wished to withdraw from the study at any point, either during or following their interviews that their request would be respected and that no explanation to justify this would be required. Data collected would then be deleted. This right to withdraw remained throughout the study and was detailed in the participant information document alongside explicit information about how participants might go about withdrawing (eg via

the more remoteness of email) as advocated by Duncan et al (2009) who argue that such strategies can help enhance participant self-efficacy and reduce any sense of disempowerment. This was deemed important as the proximity created by face to face interviewing combined with the atmosphere of safe intimacy that I hoped to create and my faculty role, had the potential to make withdrawal highly challenging for participants. I therefore aimed for an atmosphere of positive unconditional regard in acknowledgement that feeling vulnerable and situational vulnerability (Rogers, 1997) are all part of the existential human condition. No participants however withdrew.

3.11.3 Confidentiality and privacy

Confidentiality and privacy were similarly assured for all participants and were outlined within the information document as well as reiterated during each interview debrief and research stage. Data collected and analysis were also stored on a password-protected computer on the university campus.

Correspondingly, the interests and concerns of individuals were respected, and all interviews took place at a time, date and location suitable to the participant. Privacy was maintained during data collection by the use of a private, quiet room, the removal of telephones and the switching off of mobile devices. A visible notice requesting no interruptions was displayed to avoid what Duncan et al (2009) describe as distracting "environmental chaos."

3.11.4 Anonymity and data protection

My phenomenological obligation to describe and then interpret the lived experience has the potential to open participants to exploitation through the research process. Included within the informed consent document were agreements regarding restriction, accessibility and anonymity on the use of the data collected. During the research process, participants are therefore referred to using coded pseudonyms and summary demographics only eg a broad description of gender, brief biography and stage within the undergraduate programme. Correspondingly, the research findings may have the potential to harm the HEI (higher education institution) and personnel within it, especially where negative views and experiences are uncovered. As such, a broad statement of the locale coupled with pseudonyms were used to maintain

anonymity and maintain the maxim "primum non nocere," embedded within the principle of non-maleficence.

In compliance with the Data Protection Act (2018) all data collected, and transcript analysis were stored securely in a locked filing cabinet and on a password protected computer in a locked office at the university. Data will only be kept for as long as it is needed (eight years) before being deleted and/or shredded and will only be used in relation to my research study and any subsequent papers that arise from this. The use of digital audio tapes, their safe storage and final destruction were also incorporated into the informed consent document to protect participants against the principles of non-maleficence, while simultaneously upholding autonomy and justice principles.

3.11.5 Protection and safeguarding of participants

It was not anticipated this study would cause any distress to participants, but the process of reflecting upon a phenomenon, with the guidance of the researcher, can potentially change the participant's views and have both positive and negative consequences for individual well-being; consequences that cannot necessarily be predicted at the outset. I therefore aimed to use active listening and to acknowledge events described in an atmosphere of unconditional positive regard without probing in such a way as to produce emotional harm.

Nevertheless, as Duncan et al (2009) highlight, the nature of the relationship between researcher and participant in qualitative research is particularly amenable to disclosure of sensitive information which can add an extra dimension of psychosocial risk for participants. Moreover, while the participants will all be adults, some have only just entered adulthood. They may not therefore have much experience in foreseeing the reactions they themselves may have in response to such dialogical and reflective discussions and disclosures. Thus, if emotional harm was inadvertently induced there were a range of university support services that I was able to refer the participants to (eg counselling service, health care service and chaplaincy) and access to these services was also identified within the participant information document.

Walker (2011) also draws attention to the issue that participants may provide very useful and illuminating data at the end of the interview when the tape recorder is switched off. Walker (2011: 26) herself managed this by respecting the recorded narrative as "the definitive conclusion to the interview." This is an ethical decision I too adopted in accordance with the ethical consent agreement I made with participants.

3.11.6 Health and safety issues

It was not anticipated there would be, nor were there, any significant health and safety concerns. The university location of the interviews has public access and therefore has their own health and safety processes which both participants and myself, remained obligated under existing Health and Safety at Work Act (1974) and related guidance. Indeed, all participants remarked on the therapeutic and insightful nature of offering personal narratives of what they acknowledged to be an emotional and challenging learning process.

3.12 Methodological reflexivity

Reflexivity requires the qualitative researcher to become critically aware of and explore the ways in which their own values, actions (including inactions) and assumptions have affected not only the methodological processes and design but also data interpretation and the conclusions reached (Willig 2013).

Methodological reflexivity is thus an important part of this study in offering ongoing transparency. Although in choosing IPA, my own subjectivity and forestructures of my knowledge, values and assumptions contribute to the contextual co-construction of data and fusion of horizons, I also needed to retain a primary focus on participants own lived experience and meaning making process. While this formed part of the rigorous study design, enacting it during data collection and analysis also required active and ongoing reflexive monitoring. In doing so it raised a number of issues that I needed to attend to in situ to ensure rigour was maintained. For example, the following examples from my reflective diary offer a window into the most salient issues I encountered.

3.12.1 Being vigilant to my own prism of perception

Being reflexive enabled me to remain sensitive to the risk of framing the data collection and analysis purely within my own particular "prism of perception" (Rapport 2004), rather than the participants and their lived experience. As such, I used Ahem's (1999) suggestions for reflexive bracketing to monitor my progress and learnt after the first interview transcription the importance of using participants own words when reflectively probing an experience. For example, I had intended to do so as part of active listening, but it was only when transcribing the first interview I realised at times during the interview I paraphrased their words instead. This appeared to result in a hesitant response on the part of the participant which was less noticeable in subsequent participants when I made greater use of their own word choice. Such insights enabled me to focus more on their lifeworld and helped increase the trustworthiness of the data collected.

3.12.2 Keeping interviews focused

Another early and unexpected challenge I encountered was how to keep the interview focused and natural in response to the rich data that emerged without participants feeling interrupted and prematurely closing down or failing to explore salient phenomena of importance to them. Prior to entry into the field I worried that participants might be reluctant to engage, and I would not gain sufficiently rich data to rigorously answer my research question. However, all participants engaged with surprising enthusiasm, openness, honesty and a willingness to provide very rich data which I struggled to follow in the first two interviews as so many potential lines of inquiry appeared to emerge in response to a single question. On reviewing these transcripts and accompanying field notes, I decided to continue to allow participants uninterrupted time to consider the questions but to make greater use of follow up probing questions to redirect them back to their original lines of thought where necessary. To help with this I developed a further list of probing questions which I kept easily accessible during interviews together with my own form of shorthand to identify phenomenon that appeared worthy of returning to and further inquiry. This was important as I had decided against extensive note taking during the interview to

avoid distracting away from the participants own story.

3.12.3 Sample size and being inundated with raw data

Willig (2013) argues that IPA studies need to do justice to the phenomenon under study and in doing so reveal both divergence and convergence in the lived experience. Another challenge I faced was not losing sight of the idiographic nature within the large volume of data collected from all thirteen participants. Interestingly, Wagstaff et al (2014) suggest this is a common conflict with a relatively large IPA corpus and that this balance represents the greatest weakness in IPA. However, Smith et al (2009) accept that with large sample sizes convergence is likely to dominate over divergence and the analysis is likely to be at the group level and what most participants experienced. However, they also argue that it is still possible to identify how individual differences manifest themselves within each super-ordinate theme by returning to the idiographic differences and inserting them once the commonly shared experiences have been articulated as part of the dynamic movement from part to whole within the hermeneutic circle.

To achieve this, I took up Finlay's (2009; 2015) advice that the researcher needs to keep revisiting the raw data during the interpretative stages in order to remind themselves to keep focusing on the phenomenological lived experience. As such, the data analysis became a constant negotiated process between commonality and individuality so that I retained an "idiographic focus on the individual voice" (Smith et al 2009: 107), while at the same time making commonality claims. I also adopted Smith et al's (2009) suggestion of a tabulated format to identify recurring and salient themes within large data sets but adapted it slightly to make explicit idiographic differences as they revealed themselves. Thus, while divergence was achieved, if I were to repeat this or other IPA studies in future, I might consider a slightly smaller sample size in order to make even more explicit the idiographic and divergent complex nature of the lived experience. However, as a novice IPA researcher I was heavily influenced by Smith et al's (2009) advice that at doctoral level a sample size of approximately twelve is recommended.

3.13 Summary of chapter

This chapter has critically explored and established the philosophical position and constructivist paradigm guiding the interpretative methodology, method and design of this study. It has then applied this to the choice of Interpretative Phenomenological Analysis and how phenomenological philosophy, hermeneutic theory and idiography enable philosophical congruence to the research framework, method and design chosen as well as the research question, aim and objectives. In doing so this chapter has also detailed how participants were recruited, decision were made on sampling and the process by which data was collected. It then turned its attention to issues of rigour and quality, ethical and risk considerations and methodological reflexivity. This chapter therefore provides a clear research framework that ensured this study has a coherent and comprehensive empirical basis.



4.1 Overview of the chapter

This chapter sets out the iterative and inductive process of data analysis and in doing so offers examples of how I made sense of the data collected and ultimately the participants lived experience of student managed learning and what it means to them in their situated world. It is important to be explicit about this process as understanding and sense making are framed within IPA by hermeneutic engagement with the phenomenological discourses of others in a co-constructed manner. As such my fore structures of understanding also play a part but also need to be made explicit if they are to be understood by others and the quality of the analysis assessed by the reader.

4.2 The analytical framework

Smith et al's (2009) heuristic framework provided the structure for the data analysis and enabled the phenomenological and heuristic ideas established in chapter three to be applied throughout the analytical process since the interpretative phenomenological philosophy of Heidegger (1927) and the heuristic theory from Gadamer (1976) are powerfully embedded throughout IPA data analysis. This helped ensure both philosophical congruence and the key phenomenological focus to be retained on understanding how participants themselves made sense of their experience. An overview of this process is outlined in appendix eight and each stage started with a reminder to myself about the research question, aim and objectives.

As suggested by Smith et al (2009) analysis therefore moved from the particular to the more outwardly shared, and from description to interpretation in an iterative and cyclical process. A process that at all times was informed by my ongoing reflexivity and a critical, creative and flexible thinking approach to the interpretative synthesis that arose from this. Analysis and synthesis that were constantly modified and revised through engagement back and forth within the hermeneutic cycle and supported by my mentoring and supervisory team who acted as critical and facilitative friends to challenge me to defend my

analytical thoughts, processes and interpretations at each stage. In order to also commit fully to idiography, each transcript was reflectively engaged in and analysed in its entirety before attending to other participant accounts and before cross case analysis was undertaken. The analytical process, as detailed in this chapter, therefore followed the six flexible analytical stages advocated by Smith et al (2009), namely:

- 1. Reading and re-reading
- 2. Initial noting
- 3. Developing emergent themes
- 4. Searching for connections across emergent themes
- 5. Moving to the next case
- 6. Looking for patterns across cases

4.2.1 Reading and re-reading

Although the informal process of analysis began during the data collection interviews, the more formal and structured analytical process commenced with an active engagement and immersion in each transcript in turn so I could start to become increasingly familiar with the idiographic and contextualised world of each participant. This initial multisensory process involved first relistening to the audio-tape while reading the transcript simultaneously. Attentive listening and synchronised reading produced a number of analytical benefits enabling me to reacquaint myself with each participant and to more easily recall the atmosphere of each unique interview. As Smith et al (2009) suggest this also helped me imagine the voice of the participant in subsequent readings and to enter into (as far as philosophically possible) the participants own world to ensure that the participant was and remained the focus of my phenomenological concern. At this stage reviewing my research field notes compiled before and as each interview ended, was a useful additional data source to refamiliarize myself with the context of the interview and my first impressions and expectations. However, to achieve this empathic connection with the participant, I found I needed to repeatedly read and re-read the primary data source transcript in order to develop an overall structure and sense of the interview.

Initially, this felt slightly overwhelming as I was surprised at how rich the data appeared to be. Feeling overwhelmed with voluminous emerging ideas and connections can act as an obstacle to achieving both analytical depth and clarity and so I followed Smith et al's (2009) advice and noted my first impressions in a section of my log to enable me to later return to these. This process also reinforced to me the benefits of reflexivity and fore structure positivity within interpretative phenomenological analysis. For example, when reflecting on this later I came to understand how the physical and embodied act of writing helped me anchor my attention on the words (rather than my feelings) enabling greater cognitive clarity and analytical creativity as I turned my thoughts into language and my focus turned back to the participant and the analysis of their text. This meeting of cognition and language in the hermeneutic circle and the resulting new reflexive insights resonated with Merleau-Ponty's (1962) ideas about the role of the body in making sense of the world alongside Gadamer's (1972) fused horizons and how self-knowledge that can develop from text immersion. More creative analytical avenues and possibilities developed for me as a result. For example, when another participant described the act of writing when feel emotionally overwhelmed, I was able to tentatively use this new fore structure to ask probing questions about the meaning of this for them in their own world (rather than mine), something I may have missed previously.

4.2.2 Initial noting

The second exploratory stage of analysis enabled a growing familiarity with the transcript in order to start understanding how each participants idiographically talked, thought about and understood the phenomena of SMIL through a compilation of a comprehensive and detailed set of notes for each participant. This stage was time consuming but essential. It required an open attentive mindset to make specific notes of anything that appeared of interest, captured through multiple readings of the transcript. The analysis at this stage reflected a meticulous form of free textual analysis and was focused on both the

semantic content and language used by each participant, noting both the words and expressions used - and not used - by them.

Notes made at this stage were initially descriptive but with repeated reading and reflection also included increasing interpretative questioning commentaries about what the data revealed phenomenologically about the participants' understanding and things that seemed to have significant import for them, whether explicit or implicit in the language and discourse used, and hence the meaning they appeared to give to this. Appendix nine offers an example of this in the right hand column of the transcript. These explanatory notes also ensured a clear audit trail that started with the research design and audio-taped data collection to be continued for all participant transcripts. This process was then continued at each stage of the analytical process so I could keep returning to these to reflect on and self-assess my phenomenological and idiographical commitment to each individual participants contextualised life world and their own unique sense making process as well as defend my decisions to others. This strategy therefore enabled me to check for confirmability at each subsequent analytical stage to ensure my developing analytical interpretations were based on participant responses and not by unconscious fore structures and biases.

Initial note taking and exploratory comments therefore enabled me to continue in a transparent and immersive iterative process of analysis within the hermeneutic cycle so I could start to make sense of both the parts and the whole as well as how they might be intersecting for each unique participant. Again, I followed Smith et al's (2009) advice to help structure this analysis and to focus on differing interpretative depths. For example, making descriptive comments (ie what the participant said and the subject of their talk to start to understand the things that matter to them); linguistic comments (ie specific use of language that may give clues to specific and at times hidden meanings); and finally conceptual comments focused at a more interrogative and conceptual level. This often involved reflective self-questioning about what the words and ideas meant to me and then reviewing the transcript again to understand what it meant for the participant looking for similar and divergent interpretations so I

could be clear about my fore structure of understanding while at the same time retaining phenomenological focus on the participant.

An extract from my reflective log is significant here as it helped me navigate my thinking from the descriptive, to the linguistic, to the conceptual meaning, through a type of Gadamerian (1976) dialogue. A process that also stimulated further critical thoughts, ideas of possible meanings and provisional conceptual questions. These are all aspects characteristic of this stage of analysis (Smith et al 2009) together with an element of personal reflection to assist with conceptual coding:

Extract from my reflective log

I am intrigued by Claudia's linguistic use of metaphors when describing her overwhelming feelings that SMIL seemed to engender in her. She repeatedly used the phrase "an emotional roller coaster" and her intonation amplified when she used these words. Earlier in the interview she had struggled to describe her emotions but a metaphor, though by nature not literally true, seemed to help her express something that is difficult for her to put into words but at the same time holds meaning to her. Metaphors appear to offer her clarity in her language that earlier she could not grasp.

What does this metaphor mean to me and what does it mean to Claudia? I dislike rollercoasters, they make me feel dizzy and nauseous. I feel exhausted just imaging being on one as they seem to go on forever and ever and I have to steal myself to tolerate it until the end for the sake of the children who love them. Re-reading and reflecting on Claudia's transcript I get a sense that for Claudia this metaphor reflects the unexpected shock she described earlier about the new ways of learning in HE that challenge her not just cognitively as she has expected, but also emotionally and the ongoing lability of this. She previously and very proudly described how she is respected among her family and friends for "being one of life's copers" (line 106), she is used to taking action, but SMIL is challenging this, and her identity and sense of self appears to be significantly challenged (possibly even fragmented at times). She does not necessarily like this new self-identity but equally cannot yet find a way to escape it either.

At first, I thought it was that SMIL was lived by her on an affective level as overwhelming negative (lines 58 – 79; 89 - 92) akin to my dislike of rollercoasters but I think what she is describing in her metaphor use is that it is the holistic exhaustion she feels by the dichotomous cycle of successful coping one minute and the resulting positive emotions, followed by intense negative affect as she is quickly challenged to learn increasingly complex ideas in ever new and independent ways. She

sees no rest, no time to celebrate recent successes' and there is a temporal sense of eternity in her language that feels emotionally traumatic to her at times. How much of this do we as faculty understand and even respond to this possibility? We would probably look at Claudia and think "star student" and never imagine the emotional exhaustion and vicissitudes she appears to be describing; nor have we ever considered this when devising the student assessment schedule.

In order to understand the participants life world at both this descriptive and heuristic level, I also continued to balance the hermeneutics of suspicion and empathy first adopted in the data collection stage (Willig 2013). This balance was important for philosophical alignment with the constructivist paradigm underpinning this project since empathy allows the subjective world of another to be phenomenologically understood, while suspicion (in a heuristic sense) enables the search for hidden and concealed meanings that might otherwise be missed. This analytical approach was beneficial since it enabled me to be constantly attentive to the influence of my own for-structure bias and horizonal understanding as I applied both empathy and suspicion to my own thoughts and interpretations.

Being hermeneutically suspicious, empathic and open minded in this stage also helped ensure I was open to the hidden meanings and the unexpected in the data. For example, during the interviews I was aware that many participants described how they engaged in inner monologues with themselves through various self-talk strategies. However, the potential significance and meaning of this to them was not explicit to me until it began to unexpectedly emerge in this second analytical stage and I became more immersed in their transcripts and lifeworld. I suspected at the time of interview this was a form of dispositional emotional coping, but this more in-depth immersion and empathic and suspicious, self-questioning interpretative approach appeared to suggest that self-talk had a far greater temporal significance that marked a potentially important liminal stage in participants journey to learner independence. Something that I had not fully appreciated previously. I noted in my reflective diary when reflecting on the parts and the whole, my surprise at what seemed to be a "significant rite of passage" that enabled participants to shed their unwanted identity of dependence and academic inadequacy and to feel

confident to reach out to peers for help and support. A process that increasingly appeared to enable them to start to take control of their emotions and ultimately from this, their transitional journey to increasing independence in their learning. However, at this stage in the analysis this remained tentative and more about opening up possibilities and provisional meanings as hallmarked by this extensive and intensive initial noting stage (Smith et al 2009).

4.2.3 Developing emergent themes

By this third analytical stage and as I grew increasingly familiar with the interview data, my comprehensive exploratory commentaries, provisional ideas and possible meanings had significantly grown the data set. The next stage was therefore to reduce the volume of this data while also maintaining the complexity of inter-relationships, connections, contexts and patterns inherent within the interview transcript, all of which my notes had started to map. This third analytical stage therefore involved developing emergent themes and theme clustering to reflect the sense making and importance that participants appeared to give to various aspects of their contextualised SMIL life world.

As Smith et al (2009) highlight this stage involves both an analytical shift and a manifestation of the hermeneutic circle by working primarily with the participant tied initial notes, rather than the transcript itself. Consequently, the whole interview had to become viewed as a collection of smaller parts to reflect a synergy of description and interpretation to enable a new synthesised co-constructed understanding. As such, the theme titles – achieved by transforming my notes into illuminating phrases - came to reflect not only the participants own words and possible meanings but also my own tentative interpretations as I started to make sense of the participant making sense of their independent learning journey. Appendix nine offers examples of this in the left hand column of one transcript extract.

4.2.4 Searching for connections across emergent themes

This fourth stage of analysis involved making connections across the emergent themes in a way that identified the most salient and interesting aspects of each participant's experience. This involved a degree of creativity and innovation as well as organisation with a constant checking against the transcript to ensure my interpretations remained phenomenologically close to the participants own words and ideas. Although I often used tables in the end to visually represent my emerging and modified connections and themes (appendix ten), when feeling cognitively blocked I would often resort to concept mapping on flip chart paper as this personally helped me chunk information and better visualise relationships while also retaining a focus on the "bigger picture" so I could link parts to whole effectively and work in this more abstract and holistic manner. The actual process of rewriting the emergent themes (rather than using sticky notes) anchored my attention and assisted the clarity of my analytical reasoning even though it was arguably a longer and more time intensive strategy.

Smith and Osborn (2003) similarly advocate that at this stage it is important hermeneutically to make sure any perceived connections have coherence with the primary source material. To ensure this they advocate a constant shifting of focus back and forth from the key claims of the participant to the researcher's own interpretation of the meaning of these claims in a form of open ended dialogue; dialogue that constantly switches between both the transcribed text and the theoretical cogitations of the researcher in light of these themes. As an adjunct, Smith and Osborn (2003) also suggest compiling directories of participant phrases that support each related theme to enable even more comprehensive and rigorous condensing and editing over time which again was useful but with a large sample size was challenging in my reflective log.

Although not intended to be prescriptive, I also adopted a number of patterning techniques suggested by Smith et al (2009) for this and the subsequent stages, albeit soon discovered these at not mutually exclusive and can overlap. However, this potential tension while challenging my thinking did help develop the depth of my analysis allowing for more creative and innovative interpretations to eventually develop. The techniques used included "abstraction" and "contextualisation. The former was used initially to cluster "like with like" in order to form a superordinate theme, while the latter reflected a constellation of themes around a particular life event or key moment for the individual. This is exemplified in appendix ten in the superordinate theme "A

world that cannot be understood or controlled" which reflected Ursula's transition to higher education and both the unfamiliar nature and unexpected challenges of SMIL at the start of her SMIL journey. In contrast the superordinate theme "trying to take back control" was informed by examination of emergent themes as serving a particular function but was also by a degree of polarisation, another technique advocated for identifying oppositional relationships.

Interestingly, the technique of subsumption whereby an emergent theme acquires the status of a superordinate theme (Smith et al 2009) was an iterative and dynamic process and was a hallmark of this and subsequent analytical stages as I modified, relabelled and repositioned new and existing themes. For example, the theme of "feeling overwhelmed" initially appeared as an emergent/subordinate theme when making sense of Ursula's lived experience (appendix ten) but later became a cross case superordinate theme. Similarly, I was initially cautious of numeration as a way of connecting themes that occur frequently as it felt more quantitative in nature and thus philosophically incongruent. However, the frequency and intensity by which temporal aspects were mentioned at both the individual and cross case analytical stages indicated significant relevance and patterning of meaning that it too eventually became a modified cross case superordinate theme.

None of this however would have been possible without the ongoing recourse to my reflective log as this was key to ensuring awareness of my fore structures and decision making processes so that I could maintain the phenomenological focus on the things themselves and that the salient aspects of participants own lived experience were captured in this theme clustering stage. This was particularly important at this stage was also characterised by much casting and recasting of themes in order to establish a clear and auditable relationship between the emergent and superordinate themes.

4.2.5 Moving to the next case

The fifth analytical stage involved repeating the previous analytical stages for each subsequent transcript. Using my new fore structure of understanding I

was also able to start looking for idiographic similarities and divergence within and between individual cases while retaining the dual hermeneutic focus on empathy and suspicion towards both my own meta-cognition and the participant transcript

4.2.6 Looking for patterns across cases

The final stage involved identifying recurring patterns, meaning and connections between participants (Smith et al 2009) and involved a constant process of modifying, reframing, and relabelling existing themes alongside verbatim participant texts from each case as exemplified in appendix twelve. This iterative and extended process of analysis and recoding enabled a coconstructed narrative to emerge that reflected a detailed interpretation of the phenomenon of student managed independent learning as lived contextually and idiographically by the participants themselves. With the relatively large sample size, the advice of Smith et al (2009) was followed in terms of conceptualising recurrence in at least a third or one half of the sample (appendix twelve). However, following confirmation of this and with my research question in mind, there was a need to relook at the themes to check I had not missed or overlooked patterns evident in the data. A useful, albeit time intensive, strategy was to go back to the first stage of data analysis and re-read the participants entire transcripts and then follow my audit trail through each of the preceding stages. The outcome of this was a cross-case analysis and is detailed in the subsequent chapter.

4.3 Summary of chapter

This chapter has examined the iterative and dynamic process of data analysis to make explicit the interpretative nature of this study. It has illustrated how the philosophical orientation outlined in the previous chapter extends to the analysis of the data collected through the use of Smith et al's (2019) six stage heuristic framework. Examples are provided to illustrate how various themes emerged, were clustered and then modified in order to clarify and make explicit how I made sense of the participants making sense of their contextualised lived

experience of student managed independent learning and the significant meanings this holds for them.



5 Giving meaning to the lived experience (findings from the cross case analysis)

5.1 Overview of the chapter

This chapter provides an interpretative phenomenological narrative of the research findings of the cross case analysis in response to the research question:

How do undergraduate student nurses on a Bachelor of Science adult nursing programme articulate, understand and make sense of their unique lived experience of self-managed independent learning?

As such, this chapter reflects the ongoing analytical process of giving meaning to the contextualised lived experience of student managed independent learning as it is lived and made meaningful by the thirteen student nurses who contributed to this study. Three superordinate themes emerged from the analysis, namely, "feeling overwhelmed," "the pressure of time" and "connecting socially." Each superordinate theme was supported by a number of constituent subordinate themes and exploration of these themes alongside verbatim extracts from the participants forms the basis of this chapter. A visual representation is also provided (Figure 1) to help orientate the reader and a final interpretative account draws the chapter to a close. Throughout the participant accounts it was apparent that these themes interconnected and were experienced dynamically and broadly sequentially, albeit largely separated for the analytical process. It is therefore important to consider each theme in relation to participant's holistic experience and their hermeneutic circle. Equally, while significant convergence between participant experiences emerged, I also sought to capture the divergence in order to highlight both the shared and distinct idiographic and situated nature of how SMIL is experienced by participants. I am also aware these findings do not capture all aspects of the experiences reported by participants, but instead reflect those relevant to the research question.

Similarly, I remain cognizant that these results provide one possible analytical

interpretation of the transcribed accounts of their lived experience of SMIL. Other researchers may have focused on different aspects of the accounts. As such, this chapter provides verbatim transcript extracts to support and make explicit the phenomenological core of my own research interpretations. However, in order that participant voices are heard and to illuminate individual participant experiences, I have sampled quotes proportionately across participants where possible in order to illustrate the collective voice of the participants. To improve readability, I have also removed minor hesitations and utterances that do not alter the nature and meaning of the narrative provided. Ellipsis [...] at the start and end of a quotation also indicate that the participant was talking before and after the extract, while an em dash [-] has been used when the participant appeared contemplative or emotional and their narrative subsequently trailed off. The em dash has also been used where participants appeared to revise their account as their thoughts evolved as they were speaking.

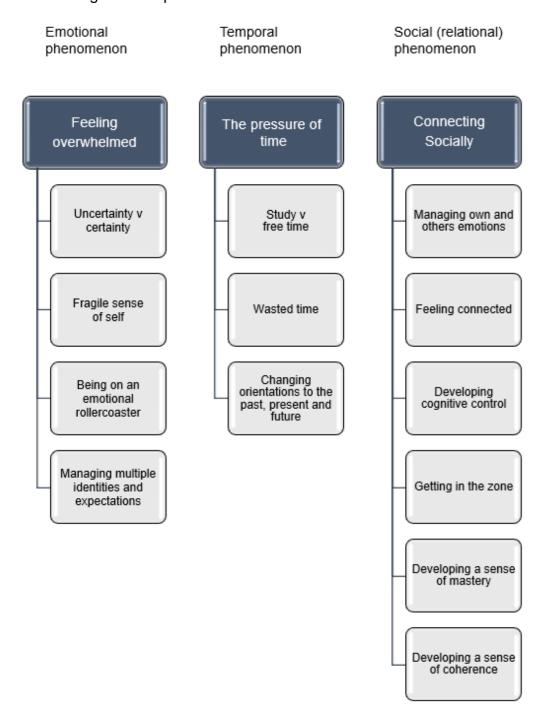
5.2 Superordinate Theme (1): Feeling Overwhelmed

This superordinate theme captures the intense emotional and existential experience of SMIL that has salience for student nurses lived experience and contains four subordinate themes:

- 1. Certainty v uncertainty
- 2. Self under threat
- 3. Being on an emotional roller coaster
- 4. Managing multiple identities and expectations

They encapsulate participants experience of SMIL as a largely uncertain and confusing process in which their sense of self and academic identity are fragile causing them to experience a myriad of, often labile and overwhelming, emotions. SMIL is also lived by student nurses in a social context where managing their own multiple identities and the expectations of others can also feel an overwhelming aspect of SMIL. This sense of feeling overwhelmed

Figure 1: Superordinate and subordinate themes



dominated their learning which they appeared to experience as a perplexing and unexpected disorientation to their core beliefs about education, learning, support and the self. Difficulty regulating these overwhelming emotions acted as a barrier to learning independently and caused difficulties in active engagement with SMIL opportunities. This superordinate theme was therefore hallmarked by frequent emotional regulatory difficulties and inconsistent engagement with SMIL as priority was given to dealing with overwhelming negative affect. In an attempt to regain certainty, regulate their emotions and make sense of SMIL, participants drew on past educational experiences and perceived summative assessments, and in particular academic essay writing, as a key focus for their self-managed independent learning.

5.2.1 Certainty v uncertainty

All participants agreed that they had engaged in SMIL since the commencement of their educational programme and that this was a significant part of their higher education learning experience. However, they also appeared to have trouble describing and defining what SMIL was and in doing so conveyed a sense of being unsatisfied with their response. For example, without exception participants hesitated before responding and seemed unsure of their replies as if they felt that their answer had in some way not been adequate. Beatrice and Lydia both used qualifiers such as "- I guess -" while Millie used "- it could be ..." and Charlotte "It's probably ..." which appeared to reinforce a sense of uncertainty about their conceptualisation of SMIL. Ruby's hesitant response was typical of many participants suggesting that SMIL was perceived as an extension and elaboration of class content akin to previous experiences of homework:

... I think it's – Well it's – umm. It's the extra study and homework you do. - Yes! You do it to understand what you're trying to learn. It's – well it's what you have to do at university as you have to take more responsibility for how well you do than at school or college."

All participants expected to undertake independent study and often expressed a desire to be more independent in their learning as exemplified in the common participant phrase "not wanting to be spoon fed." However, they also

experienced SMIL as a very uncertain and confusing learning process that did not appear to match their initial epistemological beliefs about the nature of knowledge and their expectations related to the support and guidance they would receive. Feeling disorientated, overwhelmed and abandoned, participants struggled to make sense of SMIL at the outset and at times disengaged from this as a mechanism to manage their overwhelming affect.

I was just plain confused to start with. Still am a bit I suppose (Laughs). Like at school, you had questions to answer and you answered them. It was right or wrong and you knew where you were. Here we were just told to "read around the subject." - ... What did that mean? - ... I didn't know what I was meant to learn ... so I didn't (Lydia)

You just don't know what to do to start with and what you do do, you don't know that it's right. It could be wrong. You just don't know – so you don't always bother (**Ursula**)

Part of the sense of feeling overwhelmed appears to resonate from a negative re-appraisal of the value of their prior education in preparing them for SMIL for which "the self" seemed vulnerable. This appears to follow an initial period of euphoria at being accepted into higher education and then feelings of cultural shock, loss and grief that their anticipated feelings of educational preparedness have not fully prepared them for the confusing and unfamiliar culture they now inhabit.

... Suddenly I was not the good student and that didn't motivate me I'm afraid. I guess I was scared and totally blown away. Overwhelmed I suppose and a little bit cheated. It was an access course after all. (Anna)

I did independent study for my A-levels but there were like set books and set answers if you wanted a good grade. You just read them and reproduced it in the way they wanted it. We were told it would prepare us for university, but it didn't really. It's nothing like the homework we were set. (Beatrice)

It was great to be at university but then I would get angry that no one was helping me. The next moment I would be depressed and wonder where all the support had gone, so I disengaged for a while. (Charlotte)

Their past experiences appear centred around an epistemological position of "basic duality" in which expert direction and instruction are key educational features that participants expect to continue as they move into university. Within this a "good student" is often equated to mean a student who is taught the right answers, has no personal voice and whose learning is rewarded through assessment surveillance of these standardised right answers. At the start of their academic career nearly all participants perceived SMIL as something that they have to do themselves without help, support and direction from peers or faculty.

It took me ages before I realised, I could ask for help. It was independent study, so I assumed I had to do it myself without any help as it wasn't like the help at college. I didn't even dare ask other students in case it was plagiarism, or I appeared too needy. (Natasha)

This initial feeling of being alone was re-enforced by academic comments such as "now over to you. I've done my bit" (Laura) and "you're adults now, not children"" (Beatrice) and "don't expect to be spoon fed" (Harriet) during class contact. As such, participants experienced painful and overwhelming feelings of abandonment, aperceived lack of academic empathy and a sense of being unprepared. For example, even the simple task of reading a paper from a reading list posed confusing problems of how to access academic databases, how to read the paper once obtained and the purpose/aims for reading it.

Nobody tells you what to do, they just expect you to know but you don't know. You feel so alone and well sort of abandoned to the winds. To thrash around like washing on a washing line on a really cold, dark and wintery day. It sounds silly now but it's incredibly hard to describe just how very small and inadequate you feel when you don't know how to even start. You just feel that you have been left to get on with it but to get on with what? (Laura)

This sense of abandonment and resulting loneliness led all but one participant to avoid help seeking behaviours during early SMIL experiences. In doing so, they hide a part of who they were in order to feel accepted and avoid feeling rejected within their new higher education culture.

... I used to think to myself, what if they see I am a complete idiot? Best not to expose that. In public, keep it private. So I would like just get on with it by myself even if I didn't know what I was doing and I was really stressed. (Lydia)

Nobody tells you how lonely and frustrated you will feel when you start... I think the frustration stems from feeling as if you have to do it yourself but you doubt yourself so you avoid talking about it. You avoid any discussions especially when it gets really bad (Millie)

Help seeking when sought was therefore restricted to technical questions and broad clarification of assignment expectations for fear of appearing immature, needy or dependent.

I know there is help out there but that's not what stops me. It's me that stops me. Like I didn't want to know I'm not up to scratch, and I certainly do not want others to know, especially the lecturers so I procrastinate and avoided seeking help to stay in my lovely little bubble where I am still a good student. If I ask it is purely about the assignment and things like word allowance, referencing and structure (Anna)

Participants appeared to find meaning in SMIL by focusing exclusively on doing well in summative assessment tasks suggesting an externally regulated motivation to meeting proximal, rather than distal, goals. This also appeared to afford them the certainty and structure to their SMIL they felt was missing within their lived experience of transitioning into higher education. For many, the journey to HE has been a long one with a key focus being on accumulating enough qualifications and tariff points for which passing summative assessments was a key component. This is something many participants were particularly proud of as they reported previous negative school experiences and few national qualifications prior to more recent Access qualifications. This had particular salience for them as it appeared to boost their self-esteem and appeared to help them move closer towards their ideal self and offered them the opportunity to develop new academic identities.

... I'm in my fifth year now [includes access course] and have worked so hard to get here, I'm not about to mess it up now however horrible it can be. I say to myself I've done so many assignments, I can do another one. At least I know what I'm doing with assignments ... (Laura)

It's like really stressful right at the beginning, and then you're getting like the plan because you can't write anything, so I find that really stressful, and then usually, I start writing, and it's all fine. I know what I'm doing and I can achieve something. (Harriet)

I know it shouldn't just be about the assignments and classifications and that uni should give you the opportunity to read and think for yourself, but for me currently I'm afraid it is. ... I want to prove other people wrong, people from my past. I want them to know that I'm not as stupid as they thought I was. It's taken a long time for me to get here, so assignments it is [laughs]. (Anna)

Interestingly, **Helen** was the one participant at the outset who appeared to feel less abandoned and lonely as a result of her uncertain feelings and sought tutorial support to clarify expectations and clarify her ideas. She appeared to reframe her experience of uncertainty to seek a more positive and existential meaning from the challenges that confronted her.

She often appeared more positive and passionate about the chance to

"... develop as a person and I suppose just realise who I am ...my being."

Indeed, she spoke with excitement about

"... the opportunity to explore new ideas, ones I'd never considered before and to find out who I am as a person, what my values are, my beliefs ..."

However, while she appeared to have adopted a more relativistic and committed (Perry 1970) epistemological position and life-long learning approach than other participants, she too appeared to conceptualise SMIL as related to proximal goals of successful assessment outcomes, at least in the short term. However, she also implies a curiosity for future learning and distal goals appear to be formulating as she takes responsibility for her immediate summative assignment focus.

I will suddenly see something or read something that will remind me of something else which sparks my curiosity, so I'll think, "Oh, I hadn't thought of that one!" Chuck that away in the brain, pop that one in and

think about it later once the course is finished. I know I have to do the assignment first. This is a box to be ticked.

For others this lessening of uncertainty was a transformation that occurred over time as they progressed through the programme. For example, **Natasha** and **Toby** both used the phrase "I get it now" referring to their more effective management of their emotions and a desire to understand rather than just recall new concepts.

5.2.2 Fragile sense of self

Participant experience of SMIL frequently engendered painful and unwanted feelings about the self, including self-conscious emotions such as shame and guilt which participants often found overwhelming and unable to control as they entered into university and commenced SMIL. For example, they reported intense feelings of shame related to lack of self-regulation and procrastination as well as occasions when they believe they had been easily distracted. These emotions appeared to encompass their entire sense of self.

Afterwards I can feel so ashamed and ridiculous when I don't do it [SMIL] as planned. It's like I'm weak to get so distracted or caught up in something else or so emotional about a concept I don't understand. It's silly I know but at the time it's really painful. I can really hate myself at times like that. (Claudia)

I get cross with myself for not understanding and then going off to do something else when I should be studying. I really don't like myself. (**Ursula**)

Like I know I'm only human, but it doesn't stop me feeling I've done something really wrong when I procrastinate cos today I just don't get it (Anna)

They also reported conflicted feelings of shame related to feeling exhausted, overwhelmed and unmotivated as well as their concern for academic grades that conveyed a sense of failure to attain an ideal sense of self.

... It's just exhausting. I get angry with myself for being so exhausted. I then get really demotivated and then get even more angry with myself for being like that. I then end up even more exhausted and more angry and achieve nothing [sigh] -. (Ruby)

When it all gets too much, and it does often I end up crying cos I feel like a failure. I know it's only an essay but it still kinda feels I've failed as a person. (Laura)

For **Harriet**, who expressed strong performance goal orientated motivation, these negative, uncontrollable, and fragile feelings about the self, appeared particularly intense that she felt she had at times to hide away at home and avoid the expectations of others.

... Like I know everyone [peers] expects me to do well. I can just tell by the way they assume I know everything. So if I don't know something or someone knows something I don't, I'm like, "Well, I should know that." I just want to become invisible so that no one notices so I get up and go home to work even if I'd planned to work here for the day.

This extract appears to capture a sense of wanting to submerge aspects of her inner self from others as both her ideal and ought-self become threatened. Her sense of self also appears conflicted and undermined by perfectionism, vulnerability, the source of her motivation and self-criticism, even though she has consistently gained previous high assessment grades. This suggest that the SMIL threats to self may not only be experienced by those students that struggle but also by those perceived by others as "academically able."

Participant's emotional accounts of guilt about the amount of time that SMIL takes up and how this impacts on their multiple identities and social roles was also evident. For example, they felt guilty about the perceived sacrifices their close family' and friends made in terms of reduced finances, opportunities for leisure, attention they offer to those close to them and their repeated refusal of invitations to meet for social events.

I'm lucky at the moment because my wife's paying the bills and things. I think if I had to do a part-time job role as well, I'd really struggle. But doesn't stop me feeling guilty when the guttering needs clearing, friends call round and want us to go out or my family calls and I can't see them cos I'm writing an essay. They understand but I still feel guilty. (Toby)

I know I feel guilty about time mainly with family and friends and what they give up. Just also not getting the work done, nothing on paper. So if I'd spent too much time with family and friends then I'd feel guilty that I hadn't done enough work to like towards my assignments and stuff, so it's that constant balance because they're important to me, who I am. (Natasha)

As a consequence, participants often appear to perceive themselves as undeserving of any leisure time for themselves alone. The phrase "should" and "should not" was frequently used in participant narratives suggesting that SMIL results in student nurses evaluating the self in negative ways.

So even though I feel guilty, and I know I have worked hard, or I just know it isn't coming together today, I feel I don't deserve time off. I should be studying (Claudia)

Like my husband hasn't got a degree and doesn't really understand. My mum thinks I should have done this before getting married and having children. They make sacrifices so I don't feel I should take time off for me. I shouldn't not study cos that's not fair on them. That's when it all gets a bit much. (Ursula)

Participants also reported incongruent feelings that they "should not" be as consumed with grades as they wished to value the learning experience far more. However, negative past educational experiences and other's expectations that they would never enter into higher education often fuelled their desire to prove themselves and others wrong.

Like I know I shouldn't worry about grades, but I do. I know it's an obsession that's really bad but I'm like "I'll show them." Nobody thought I would come to anything, they told me I was thick at school, stupid — they ignored me. They never thought I'd be the type of person to go to uni. (Laura)

As such, their academic identity and self-esteem often appear contingent on achieving what they believe to be "good grades." Their academic identity thus represented significant emotional and cognitive work in which they strived to deconstruct and reconstruct their identity in new and deeply personal ways that did not seem possible to them or others in the past. It therefore appears central to and an important aspect of their personal biographical narrative of

themselves and becomes expressed in a number of multiple ways simultaneously. For example, they also experienced frustration and (existential) suffering when they feel that assignment grades, the focus of their SMIL, do not reflect their "true self."

I can sometimes get so mad when I get my grades. I've worked so hard and don't find it easy, especially with my dyslexia but I know I'm a good nurse and that's not always obvious from the grades. That's what gets me down. I know it, in my head. (**Ruby**)

Like I know I can do it. I know my stuff and like I know I've learnt something useful, but you wouldn't always know it from the grades – aaghh. [laughs]. (Lydia)

As they created and negotiated their academic identity, there appears to be conflict between what they wish to express and how this is expressed in a formal academic writing context. There also appears a conflict between how much effort and work is expended and how this is recognised within the academic setting which they also negotiate internally. Consequently, a number of participants appear to feel that their true self is being rejected and is invisible to others. This aroused feelings of anger and resentment towards faculty for this lack of formal recognition and perceived empathy.

It's so unfair. I think lecturers forget they were students once. It probably comes easy for them that's why they choose the job they do. But it's not the same for all of us. I work really hard. I suspect at times I work harder than the people who get firsts but a 40 in an assignment tells me they think I'm stupid, I shouldn't really be here. I'm a fraud - I haven't worked. They don't see that I'm trying really really [emphasised] hard (Laura)

I think it's because where I get lower grades than most other people, I go, "Oh for God's sake, why can't they see what I'm trying to say. Don't they get it. Don't they know how hard I worked, what I've had to give up or how long it's taken to get here (**Ursula**)

Feelings of rejection and invisibility also led some participants to procrastinate as they struggled with overwhelming emotions and beliefs about the self. In an attempt to hold onto their desired view of their academic self, participants often appeared to prefer not to seek formal academic help in case this exposed to public knowledge an alternative and undesired true self.

It can be so confusing to start with when you don't understand, and you just don't bother seeking help cos it will just reinforce what you don't know. (Millie)

Sometimes I just won't go to a tutorial cos I don't want them to say it's all rubbish. I've worked so hard and they won't see that, they'll only see that my ideas are pants and I have to redo it. Sometimes I don't have the energy for that, so I just go off and do something else until I feel better. (Beatrice)

Lydia and Anna preferred instead to use social media to selectively contact peers who they were aware would likely also be procrastinating in what appeared to be a downward social comparison to restore their self- esteem and overcome a sense of remorse at their own avoidance strategies.

When I'm sat at home, and it's drove me round the bend or even when I feel I can't be bothered or can't do it. I'll think about the group and work out who to contact, like who else is not doing it tonight ... Like I know I can Facebook them and feel better cos we're both not doing it. I then don't feel so bad about myself (laughs) and don't feel guilty anymore. (Lydia)

I'm a procrastinator and so near to an assignment submission when I really can't be bothered to study but know I should, I know exactly who to contact and who to avoid. So yes, I just message them quickly and ask how it's going even though I know the answer before I've even started typing. (Anna)

5.2.3 Being on an emotional rollercoaster

Participant accounts also revealed that SMIL can be an emotional, stressful and anxiety provoking experience in which they experience a myriad of labile emotions that feel overwhelming and difficult to control. A number of participants used metaphors to describe their emotional struggles and sense of feeling both chronically exhausted and drained as a result.

You just always feel like you're on an emotional roller coaster. It's supposed to be fun but it's not. It's exhausting and there's no way to get off. It can be like constant. Sometimes I think I've forgotten what it's like not to be anxious (Claudia)

I feel like I'm constantly spinning plates and the road is a very bumpy one ... The uphill bumps are immense. You're just constantly exhausted and if you're not really in control even when you're on the flat (Natasha).

Ursula vividly recalled a feeling of being emotionally overextended and exhausted by the perceived constant demands of SMIL and her multiple social roles. The chronic emotional depletion and exhaustion implied a negative evaluation of the self as personal learning accomplishments diminished, particularly when assessments were in close succession.

Everyone wants a piece of you but there is no let up with independent study cos there's always one assignment after the other. You can't put your family on hold either. Sometimes I just want to crawl into bed and put the covers over me and scream and scream and scream. But then when I say that to myself, I just think I must be weak but I know my grades suffer and then I feel bad once again. It's just a constant cycle of feeling up and down, no one understands that you have no emotions left.

All participants described SMIL as stressful and anxiety-provoking suggesting that the perceived demands of SMIL were greater than their range of perceived coping strategies at the outset.

Sometimes you just don't think you can do it. I get anxious and not sure if I will cope ... sometimes you feel you never get off the ride (**Toby**)

I just couldn't cope – I was being asked to do more than I could do, and I was exhausted from all the up and down emotions you feel (Millie)

Participants also described uncomfortable feelings of embarrassment by what they perceive to be their own violation of academic expectations related to SMIL that also threatened their academic self. This left them feeling awkward and filled with regret in the presence of peers and family increasing their sense of labile rollercoaster emotions. For example, if they procrastinate or prioritise other social identities above SMIL.

It's worse when you set yourself a plan and think "Yes! I'm going to do this. I'm going to be a good student today" and then you don't because the children need you or a friend is upset. Then you feel embarrassed when you meet everyone and have to tell them you didn't do anything.

You wished you had and then the merry-go-round of emotions starts all over again." (Claudia)

I always regret it afterwards cos I know someone else could take her (daughter) to dancing she wouldn't mind. I know I'm procrastinating. I'm supposed to be studying, I'm a university student. I find it kind of embarrassing that I can't do what I said I would do. You feel kind of awkward, especially when I tell my son he must do his homework before going out. It just means I feel low after feeling okay and that's so hard. (Lydia)

However, the emotional talk of participants conveyed that they recognised a need to be emotionally resilient in order to overcome the uncertainty and challenges of SMIL. **Charlotte's** response was typical of many when she stated

I know I have to just get on with it, however hard it is. You just have to pull yourself together and stop getting so emotional.

At the outset, seeking alternative activities that offered more immediate and rewarding emotional experiences (eg distractions) appeared to help them regulate their emotions and exhaustion in the short term as well as connect their positive and negative self in less disconnected ways. However, strategies adopted appeared to have a high personal and cognitive cost and often involved personal sacrifice for own and others short-term benefit

I do put things off and don't always study but sometimes you just have to. Even if you pay for it later.... Like when I'm stressed, I know there's no point. Tomorrow I'll only have to redo it. So, I do something else so that I feel good about myself so that I can study tomorrow and not feel so rotten. (Beatrice)

... the more stressed you get the harder it is. The kids notice it too. So, to start with I used to just say "kids we're going out for the day" and then I'd come back feeling refreshed. Ready to tackle the stress but of course you can't do that forever and my own workload has increased, and I now have a new stressor. (Claudia)

This however appeared to be a time limited strategy. For example, as participants progressed through the programme and their SMIL, participants connected more with their peers either online or in person to help regulate these emotions in more constructive ways which helped them avoid excessive

procrastination as explored in subordinate theme three.

5.2.4 Managing multiple identities and expectations

The lived experience of SMIL takes place in a social context in which nursing students often have multiple identities and social roles. These are important to them and their wellbeing and the sense of who they are. They therefore wish to remain committed to these. Participants frequently described how they actively, and at times covertly, negotiated their identities and managed their SMIL and leisure time to keep these in balance as well as managing the expectations of others significant to them. However, these experiences, multiple identities and expectations often felt overwhelming and lacking in spontaneity leaving them emotionally and physically exhausted. Indeed, all participants described SMIL in these terms. For example, **Natasha** talked about how she no longer studied at home but went to university every weekday for class or SMIL. She only told her family, she was "going to uni" and was aware they assumed this was for class, rather than SMIL. Her rationale being that if she worked from home, they would assume she had "free time" and would be a mother and home maker. As such, she compartmentalised her time in order to manage these multiple identities and the emotional demands of this:

I want to be there for them, but I also want to study. If people [friends and family] know I'm here at uni then I'm working. I'm studying and it's much less stressful and I feel better ... less emotionally pulled I guess, and I can concentrate, really focus without upsetting them. ... So I go to uni to study and no one bats an eye lid cos if you're at uni then you're a student and it's like school. No one expects much else from you.

Ursula spoke about a similar lack of spontaneity

I really struggle not only with being a mum, a wife, a daughter and being a student all at the same time but also because my life is planned out all the time. I have to plan ALL the time otherwise I can't cope, it's exhausting. Nothing just happens. I have to plan so I can do everything and be there for everyone and not get stressed.

Lydia also talked about how she negotiated time with her family

So I tell them that this week and especially the weekend, I've got to work. I've got to do the assignment and need to be left alone. So, we talk about what we can do after the assignment is over, where we want to go.

While all students reported that they anticipated balancing their multiple roles might be challenging in advance of commencing SMIL, they all appeared surprised by the intensity and the constant need to actively manage this. Consequently, they had developed a number of strategies to assert control and manage these multiple identities while also attending to their SMIL. In the main this involved changing the learning environment in which SMIL was conducted and emotional disclosure with peers (see superordinate theme connecting socially). However, this required constant vigilance and flexibility.

What you don't realise is that you can never take your eye off the ball. I knew it would be hard but thought I could manage it now the kids are getting older. I did the access course and worked after all. But it's not like that. They have needs that change all the time. You don't realise how all-consuming the study will be and how difficult it is to understand some ideas, to write an essay at university level. You have to constantly manage it and think ahead. What's going on for them? What's going on for me? How will I deal with it? What will be the problems? (Claudia)

However, for some the feelings of incongruence led them to adopt avoidance strategies as a strategy for managing their multiple identities. For example, **Charlotte** stated that

Sometimes it's just so awful always saying "no" to friends, cos you want to be there for them too. "You're not available, you're studying "sounds so lame and not what I want. So sometimes I ask my husband to take my car to work so they don't know I'm at home. Other times I'll park my car round the corner so they think I'm out so I don't offend them but can get on with my work and study.

Ursula also directly avoided telling her husband she was studying and like Natasha, just told him she was off to university and combined this with her other identifies and roles. This worked for her, albeit came "at a price" in terms of fatigue, personal sacrifice and ignoring her own emotional needs, as she

empathically recognised the lack of academic capital available in her home environment due to her being the first in her family to go to university.

My husband just wouldn't understand about independent study ... So, what I do is just tell him I'm off to university and I combine it with the school run so he's none the wiser. He thinks uni is something you do every day like school, so it works for us. I go to work, I come home, that's the matter of fact of life, and that's fine, but that doesn't give me any emotional support but at least I'm studying, and we can function as a family, and I can cope with being a student too. I don't have the energy for anything else ... or even myself at times.

5.3 Superordinate Theme (2): The pressure of time

This theme describes the temporal experience of SMIL and how time is not lived as a Newtonian linear concept of an" indefinite series of now's" but as a dynamic interplay and temporally embodied process in which participants begin to resolve their confusing and disorientating early experiences, expectations and emotions related to SMIL. During this stage, SMIL continues to be experienced as a largely isolated and self- contained activity, but the concept of time assumes greater personal significance and is experienced "as a pressure." This stage is characterised by more emotion and meaning focused than problem focused coping strategies and the sense of feeling overwhelmed frequently returns before participants recognise a developmental need through engaging in self-talk for new and improved emotional regulation in order to more effectively engage in their SMIL. Three subordinate themes are identified:

- 1. Study v free time
- 2. Wasted time
- 3. Changing orientations to the past, present and future

5.3.1 Study v Free Time

As students talked about their ongoing early experiences of SMIL, they almost exclusively used the term "study time" to describe SMIL, - even when I used the programme vernacular of SMIL, - suggesting "time" and the "temporal nature" of SMIL is significant to them. When describing how family and significant others perceived SMIL, they interestingly switched to using the phrase "free time" to

describe the lack of shared understanding with family and friends as well as the tension that existed for many who are first generation undergraduates in balancing their multiple identities in their social and academic worlds. For example, for family and friends, learning was associated solely with "class time" and "being at university."

My family think that because I am a university student, I have lots of free time. They think if I'm at university I'm learning. If I'm not there, then my time is my own. (Ursula)

If I'm not at university, then he thinks I should be doing everything around the house. Like he'll come home and he's like "haven't you done the washing up yet?" He assumes I have loads of free time even though I've been studying non-stop since he left this morning. (Laura)

This lack of access to cultural/academic capital gradually led many to change their environment of learning and leave the family home in order to regulate their emotions, manage the expectations of others and enable them to concentrate of SMIL. As such, they travelled to campus, local libraries or to other student's homes to undertake their SMIL, rather than directly challenge the conceptualisations of their family and friends.

So it's easier to just go to uni or go to someone else's home than to explain I am actually really busy and working really hard (**Ursula**)

Well, I think the first six months was a constant battle like that and I became quite tired and emotional. I didn't know if I wanted to do it anymore because it was- it was like a warzone really, and I felt that every small achievement was this massive effort to explain I was actually working when I was at home. So, in the end, I decided that I would come to university to study, and I would, if we had no lectures, I would spend the entire day there ... but I don't tell anyone at home that it's a "free day" as they would put it. (Natasha)

This appears to reflect a form of compartmentalisation that helps participants assert control over their overwhelming emotions and at the same time giving direction to their SMIL while also negotiating and managing the differing perspectives of people that mean something to them. Such a strategy was also adopted by **Lydia** who commented that:

I tend to say on a weekday if I'm not at university, it's "week days, on" and "weekend days off." That's what's normal for me so that I don't do anything at a weekend, that's for family time. Otherwise, it would be a complete and utter nightmare. My family just couldn't cope, I couldn't cope.

Interestingly, students themselves also switched to using the term "free time" when recalling "unsuccessful" (retrospective) SMIL experiences in which they became distracted or procrastinated and consequently felt some degree of shame when feeling emotionally overwhelmed, perhaps as a way of defending the self.

So, the other day I was just couldn't get into it so I went shopping in my free time (**Beatrice**)

I read one paper but then Netflix beckoned (laughs) I didn't have any lectures that day so it was my free time, so to speak. (Anna)

Free time also described the restorative period that all participants took following assignment submission. During this time, they took time without feeling a sense of guilt in order to promote their wellbeing, reconnect with family and friends and distance themselves from their negative emotions following the intensity of an academic assignment submission. They were also willing to forego or delay any other formative learning tasks during this time.

If you're coming to the end and something's going to be submitted by the end of next week my levels of stress or guilt rise a bit. I don't know if it's the guilt coming in with the stress or -I don't know. I can't really- But then, they all kind of, they [her children] see me and they dart (Laughter) ... Like they're aware that the [stress] level has gone up a bit. But the following week, once it's in and I can breathe again and just, you know, they'll all come back out and my time is free (Laughs). You know, and I would feel that would be a really nice time to spend with them and I wouldn't mind if it's during the week or whatever else I'm expected to read, do. I need the rest. ... I never feel guilty, always refreshed. (Claudia)

5.3.2 Wasted Time

Wasted time describes the emotional experience of uncertainty, frustration and the self under threat within the cognitive challenge of SMIL. It usually emerged when a flow state of deep thinking and understanding had not been achieved following an intense period of effort.

I couldn't get into it and understand what they were trying to say however hard I tried. So, at the end of the day I just felt like I had wasted it **(Toby)**

It was often a key feature of the early stages of SMIL when students were trying to analyse and understand multiple complex, unfamiliar and abstract concepts. Almost exclusively it was used when participants felt they had nothing tangible and measurable to show for their efforts. This in turn appeared to heighten and reinforce feelings of self-doubt and vulnerability.

In an attempt to take control, cognitively reappraise, stay motivated and give direction to their SMIL, participants adopted a range of strategies to produce embodied products and gain tangible satisfaction after each period of SMIL as strategies for regulating their emotions and asserting control. This included creating some form of "embodied product" that could be perceived through the senses (eg touched and seen) in order to avoid a sense of "wasted time." This frequently included aiming for a set amount of "words on a page," a pile of printed academic papers on their desk, highlighting text on a piece of literature using bright coloured pens or producing own notes on a Word document in order to gain a sense of personal gratification and meaning.

I used to feel like I've wasted the day, you know, and that was time that I could actually be writing the essay and getting it done, not reading or thinking. And to begin with, I felt I couldn't get it back, I'd wasted all that time feeling guilty without anything to show for it ..., so I will now highlight the text. So I feel like I'm doing something, I suppose. Yeah, I'm doing something to show pretty colours all over my work. But at least I have achieved something and can look down and see my coloured work clearly (Laughs) (Natasha)

So I always set myself a task to write X amount of words on a page each day so I don't feel like I've wasted my time and feel stressed. (**Beatrice**)

I could read from the screen and work from home, but I think "Right, I'll go to uni tomorrow and print it out." I'll sit by the computer and put them next to me so I can actually see my progress and know it's not wasted. I'm actually making progress, doing something constructive with my time and that makes me feel sooo much better (Harriet)

Wasted time was also used to describe periods of procrastination and distraction when the needs of their multiple identities were prioritised over their independent learning and negative emotions felt overwhelming.

I'm always juggling and sometimes when I have to go for another appointment with [name of son] I feel I've really wasted my time. Time I could have been working on the assignment. (**Ursula**)

... I wasted my time cleaning the house. I knew I was doing it to avoid the assignment but I did it anyway cos I tell myself I can't concentrate while the house is messy, but it's always messy [laughs] and I can always look the other way or go to uni - ... I'm so stupid. (Lydia)

The term "wasted time" was also used when learning independently in the company of others. It acted as a form of indirect communication to challenge and redirect themselves and their peers that avoided inflicting unintentional emotional harm and threatening their own and other self- concept. As such, it appeared to function as a form of pro-social managing of emotions that had a shared meaning among the undergraduates involved.

We say "wasted time" when we want to challenge each other to get focused but don't want anyone to feel bad ... So we say something like "let's stop wasting time and get on with it, shall we?" Everyone seems to get it okay. (Natasha)

As students began to become more experienced with SMIL and progressed within the programme, they started to connect more with their peers and started to "value thinking time" (superordinate theme three). They subsequently used the term "wasted time" less within their narrative accounts and the concept of time no longer appeared to be experienced as a pressure. This appears to convey a change in epistemological beliefs in which the complexity of knowledge becomes realised and learning is recognised as taking place, not suddenly, but over time. However, for **Natasha** a conflict still remains if a tangible product and instant gratification is not produced which leads to a return to negative affect.

... And then after a couple of assignments, I realised that actually I need that time to think, to make sense of what I wanted to write what I wanted to say, to kind of build a plan of what I was going to do, read. But because you're reading and there's nothing on paper, you'd feel like you've not done anything or achieved. Even now sometimes ... so it's not a wasted day. You feel guilty and time is always precious.

The same was true for **Helen** who from the outset seemed to adopt a more relativist and committed epistemological position but still had to actively manage and control feelings of self-doubt about a lack of a product to reflect progress.

I would never describe thinking time as wasted time. You can't build a house without scaffolding and I love thinking, looking at ideas from different angles, pulling the threads of the ideas to see where they take me. But sometimes you think, "what have I got to show for this?" That's when you start to question whether you're wasting your time as it may not be relevant. It may need to be tucked away in the brain for another time. Probably not wasted but the doubt creeps in the back of your mind if you have nothing to show for all the effort.

5.3.3 Changing orientations to the past, present and future

Although participants experience SMIL as a cognitive and intellectual challenge, it is the emotional and existential lived experience that appeared hold the most significant import within their accounts. Students in earlier stages of SMIL when time appears to be pressurised therefore attempt to assert control and give direction to their SMIL using a range of largely emotion focused coping strategies. When these were not perceived to be as effective as they would like or had previously been in past educational encounters, they dynamically change their temporal orientations between the past, present, and future in order to adopt new and additional emotion focused coping strategies.

These self-talk strategies appear to help them regulate their negative emotions to enable them to cope and give them restorative time prior to adopting more practical, cognitive and problem focused strategies in the present. mlndeed, when feeling vulnerable, the past, present, and future appear to take on greater meaning and salience.

The outcomes of this changing orientations to time often led them to recognise a fundamental, important and ultimately transformative need to change in their approach to independent learning and in doing so connect more with their peers and the wider social world. For example, all students perceived SMIL as related to success in summative academic assessment and in particular written academic essays. When faced with particular difficulties/perceived lack of progress in achieving this and when other coping strategies became less effective, students often temporarily reoriented their future goals away from the assignment to their more distal professional and instrumental goal of being a nurse in order to assert a degree of emotional control. They simultaneously downplayed and distanced the role academic essays played in this and their previous emphasis on proximal goals. This psychological distancing suggests the self may also have been under threat.

So, when I'm really stressed about my assignment and I feel I'm just wasting my time, or I get a grade I don't like, I tell myself "it's only an assignment". I'm still gonna be a good nurse. Patients aren't interested in your grades. They don't care whether you've written an assignment. (Millie)

At the end of the day I came here to be a nurse, so like if the assignment isn't great, my study is going badly, nothing is working anymore, it's not the end of the world. As long as I get through it will be okay (**Ruby**)

Toby and Laura also used "hope" as a way of re-imaging a different future than the one they feared they currently faced in the present (eg an assignment referral), retaining focus on their proximal goals.

I suppose when I get anxious, I always hope that my study time is enough and I have put in enough effort, not to fail. (**Toby**)

Basically, like I say to my daughter, "you can only hope". Honestly, I've spent so much of my study time crying and wailing that in the end all you can do is hope and do your best that you will pass. (Laura)

By orientating to the present with insights from the past, some participants also adopted mindfulness tactics as a buffer against unexpected and intense negative emotional moments.

... And in reality, of course I feel stress often quite unexpectedly, but I do cope. I try hard not to get myself to that level. It's not - because I know when I get there, - I've been there before, - I don't work, so if I can do something to stop that from happening, I kind of try and do steps. Like going for a walk or having a break, savour the moment or see what's around me and appreciate it. (Natasha)

Sometimes when it's really bad and I can feel my heart pounding and I can't think, I just say to myself "deep breaths! deep breaths!" then I think "look out the window, enjoy the view. Feel the stress falling away, enjoy the moment." ... Then I can refocus and have another go at thinking it through. (Charlotte)

Equally, when the self was threatened and a sense of mastery felt lost in the present, students also re-orientated to the past in either positive or negative ways. For example, some students had conversations with empathic peers or intrapersonal ones with themselves reminding themselves that they had overcome such difficulties in the past and would therefore likely achieve their goals in the present also. This temporal reorientation to the past also appears to help normalise their intense emotions and enable a degree of emotional control to be asserted that allows participants to persist with the cognitive challenge they currently face.

So, when I feel like that I always talk to my boyfriend. Like when I don't think I can do it anymore or it's all too much, it's not making sense, like I want to give up. Yes, cos I know he will tell me "you've said that before, but you got through it, you'll get through it now" or something silly like that. Sometimes I forget that or I just can't see it so he reminds me. It works cos I think back and think "Yep I can do this" or at least I think I can. I'll give it another go anyway (Millie)

When everything gets too much I find, - I find, - I need to take myself in hand. I need to give myself a good talking to. I say "[own name] stop being stupid, you felt like this last year, and the year before, and the year before that and probably the year before that again probably." (Laughs) So I say to myself "but you're still here, nobody's kicked you out, yet. So why should they now?" Then I just get on with it. (Laura)

Others found the present caused them to ruminate over past perceived difficulties and academic vulnerabilities, further threatening their identity and self and leading to a return of the intense and sudden overwhelming emotions they

experienced at the outset of SMIL.

I really hate it when it all gets too much cos, I just immediately think I'm a failure. I'm still that teenage single mum who could never achieve anything. I can't get passed it and it rattles around in my brain over and over again. (Anna)

Like the past is always a constant reminder of how stupid I am. So, when I get anxious about an assignment, I feel stupid, and I can't study. (Ruby)

In response participants actively started to engage socially with others and the wider social world as a way of coping and re-orientating to the present in more positive ways. For example, **Natasha** like many of the participants identified that a focus on the past helped her understand that the past was different from the present and thus a different range of collective coping strategies were needed to meet the differing SMIL challenge she and others now faced. In describing the need to study together as a group, rather than alone as with her previous educational independent learning, she, like many others, commented:

I think it's about feeling less alone, less isolated. So I don't know if it was just me initially that thought let's get together... or just together we kind of...it was a general thing that we all needed to do and together we kind of thought actually, we need to do this to be able to move on. In the past it wasn't an issue as you just write up what you had been taught.

5.4 Superordinate Theme (3): Connecting Socially

This theme captures a further developmental stage in the participants lived experience of SMIL. It reflects the socially situated experience of more effectively developing emotional and cognitive control through interaction with others and the wider social and spiritual world that enables student nurses to then more effectively direct and engage in their SMIL using deeper learning approaches. As such, SMIL is no longer perceived as a self-contained and isolating activity as students start to reach out and forge meaningful social and emotional connections with their peers and their wider social world.

This process helps students learn to develop more effective emotion regulation and consequently independent learning skills. Experiencing more positive emotions they begin to grasp both the inter- and in- dependent nature of learning and what it intends to achieve. SMIL at this stage becomes a more socially constructed, transactional, relational, and ultimately transformational learning process as they regulate their emotions and from this rebuild a revised set of epistemological and ontological assumptions and beliefs that enables them to begin to more effectively flourish in the higher education learning environment. Six subordinate themes were identified:

- 1. Managing own and others' emotions
- 2. Feeling connected
- 3. Developing cognitive control
- 4. Getting in the zone
- 5. Developing a sense of mastery
- 6. Developing a new sense of coherence

5.4.1 Managing own and others' emotions

SMIL was frequently experienced as an overwhelming emotional and existential process that participants found initially isolating and lonely. As participants progressed through their programme and gained more experience of SMIL and early attempt to manage their emotions proved ineffective or short-term, they began to self-question themselves and consequently to reach out and connect more with other peers whom they trusted, whether in person or virtually online. They appeared to do so primarily to help manage their own and others' emotions and thus as a strategy for asserting more effective emotional control, boosting their self-esteem and helping to develop a sense of mastery. They therefore actively sought to promote and maintain a psychologically safe environment with various close peers.

I like studying with the group now as they get me, they don't judge me. My mum's view is, "You should've done all this before you had the children" and the group that I'm with, half of them have children already and they understand.

They've got the similar things going on in their personal life to make them understand. It's that empathy kind of element of it, rather than sympathy that you kind of find helps and makes you feel better about yourself. Don't get me wrong I love my family, but I just don't get that from family. (Ursula)

For most of the participants, whether meeting in groups or online, there was often an initial, ritualistic and time managed period at the start of each period of SMIL in which they gossiped about family members not present and the perceived injustices of their lives. This period of gossip appeared to have prosocial and emotional benefits in which students felt a deeper level of connection, empathy and trust with their peers which enabled them to verbally disclose their thoughts and feelings about personally meaningful experiences related to their multiple identities and their current SMIL challenges.

So, it's kind of funny I don't think we ever agreed it formally but when we all get together and the first thing we do is talk about our families. We tell each other how we feel, what are frustrations are, how we hate the assignment and how our family don't understand us ... We do this all the time, like clockwork... (Ursula)

...we know each other quite well, and they know you, and you don't really have to put on a front or you don't feel- there's none of that, "Oh, I don't want to feel stupid by asking or saying that I can't cope right now" .. and it's okay to say "I hate my husband" you know, because we know each other well. ... someone else probably feels the same. But, and it's a big but, we have to limit this. That's [name of peer] role, she's the timekeeper. She just says "right then, let's get started" and we all start ... focusing. (Claudia)

Natasha is also a member of a study group and commented in similar ways

Like we recognised we needed time together at the start to help us focus and it helped us relax, be less anxious and start thinking. It's an important routine for us and it works. We do it all the time now.... We just talk about our family and how horrible they can be sometimes.

This social and empathetic connection with peers appeared to also enable participants to make sense of their emotions by the therapeutic process of identifying and labelling their emotions (eg "I am anxious") in a way they do not always perceive their family and friends would understand. This pro-social and

emotionally cathartic chat also appeared to enable them to reframe, reinterpret and normalise their emotional experiences and events and subsequently to lessen the emotional impact so that they could "free their minds" ready to start the cognitive and intellectual process of SMIL.

It's like — It's just like just being able to say to the girls [peers in study group], "I'm stressed or I'm anxious" and suddenly you realise "Yes I am" and then you realise "that's why you've been feeling so horrible and can't concentrate" Like the other day, I tried to explain this to my partner but I couldn't, but as soon as I met the girls and we chatted away, it all came blurting out and made sense. Then all these ideas for the assignment came flooding into my mind (Lydia)

When I talk in the library with the others you sort of understand how you feel and why you've been feeling so confused for so long. You can just say it to them, then you realise it's not so bad because you just said it. (Beatrice)

5.4.2 Feeling connected

Within the participant narratives, SMIL therefore appeared to be increasingly experienced within meaningful social relationships between themselves and their peers as they collectively learnt together. Feeling connected describes the social bonds cultivated between students as they embark on and become more experienced with their own SMIL. It describes the way in which these relationships helped participants cope when feeling stressed or anxious by SMIL tasks by fostering effective emotion and problem focused coping mechanisms and increasing feelings of belonging, companionship, self-esteem, and self-affirmation. It also helped sustain motivation and a positive mood as well as offering network and practical support in times of need.

I've only just started to work with the others this year as I don't necessarily make friends easily, but it has been great. I wish I'd come to it sooner. They make you feel like you can deal with anything, that you are a real human being that while you may stumble, they are always there to pick you up. (Laura)

You can never be sad with the girls around. They just pick you up, reenergise you and make you feel like you really belong here, even if you don't get the top grades (Lydia) It's just the company, it makes all the difference. Like we don't live in each other's pockets, and we don't do the work for each other but you not sure how to describe it, - yep you just feel less alone and confused. (**Ursula**)

Feelings of connectedness also helped students develop a range of prosocial behaviours and temporarily prioritise other's needs ahead of their own. In part because of an expectation of reciprocity and acknowledgement that SMIL was emotionally challenging and that no one was assumed to be immune from this. For example, if a peer was experiencing a crisis or intense negative emotions, **Claudia** commented that:

So then we just all stop what we are doing even if we made plans for that day because you've just got to be there for each other. Sort of like you have to be there for each other, otherwise what's the point? Plus, you never know whether tomorrow that will be you.

Without exception all participants expressed gratitude for the social relationships and bonds formed during SMIL and how this was meaningful in sustaining their SMIL motivation and retention on the programme. Indeed, these positive feelings of social connectedness appeared to significantly help reduce their stress responses to the cognitive and self-challenges within their SMIL experiences. Lydia's and Ruby's comments reflected the experiences of many when they commented that:

I wouldn't be here if it wasn't for the group. They kept me going through all the horrible highs and lows of studying, week in, weekout. - I can't thank them enough (Lydia)

I will always be grateful for the group. I'm here in the third year because of them and I will always remember that even when we are all qualified nurses (**Ruby**)

This gratitude also extended to existing social relationships with family and friends even when it was acknowledged by participants that family and friends did not always empathically understand their SMIL experiences and the emotional challenges of higher education learning. However, participants recognised both the pride their families had in them and the many sacrifices they made on their behalf in terms of reduced attention, finances, and shared

leisure time as well as changed and changing family routines.

They're so good really. They put up with me distracted, locked away for hours on end, in a bad mood, frustrated, telling them we can't afford this, "no they can't do this until I've finished an assignment" and still they're so proud of me. It's amazing. (Claudia)

I'm just so grateful for my wife and family and all they do so I can be here and don't have to work or worry about money as that would be really difficult. They really keep me going (**Toby**)

For many this gratitude was reinforced by the recognition that despite not understanding what their experiences were like for them, their families still believed in them and their future success unquestionably and were willing to offer support in areas where they had little expertise such as reading through draft assignment work. For example, this gratitude and appreciation appeared to help enhance **Natasha's** self-efficacy and resilience to persist with her SMIL.

... My husband will read through my drafts and things so he's more than happy to discuss anything even though he really doesn't understand what I'm talking about. And if there are issues or like say I really need to get my head down and do... you know, he understands, even though he doesn't. But he does it anyway and I really appreciate that cos it helps me keep going, to keep studying. I'm so thankful for that and the fact that he just believes I can do it. It kinda wears off on me...

For participants who preferred to conduct their SMIL alone, usually in their home environment, feeling connected was also perceived as meaningful and important. For example, they actively invested time during breaks in the university day to form and maintain relationships and usually continued these online outside of timetabled sessions. However, during solitary SMIL they found comfort and connection in hearing the familiar social noises of others throughout the house (Beatrice) and/or outside in the wider social world as people passed by (Millie) as well as connected with the world of nature (Charlotte). For example, having a window open to feel fresh air (Charlotte) and hearing the ongoing routine of the world outside (Millie), sitting in natural light (Charlotte) and/or spending thinking time in the garden to feel a connection with nature and their spiritual self (Charlotte and Helen), appeared to help them feel less alone and isolated.

This in turn appeared to help them control their emotions, to think creatively and to achieve a flow state of intense concentration knowing that others were nearby and the world they knew continued and would be there again on their return despite their temporary absence as they engrossed themselves in the abstract world of assignment ideas. For example, **Beatrice** described, albeit a little embarrassedly, a dislike of feeling alone and complete silence that SMIL engendered but that the background sounds of her sibling and parents moving around the house and talking to each other, felt like "a cradle rocking and comforting me." When asked to expand on this she identified that

... so I know everything will be okay. It's hard to work out what you need to do ... but the noises connect me to them [her family] and as long as they continue, I can cope because it means they're there for me. Does that sound silly?- But when they're there for me I can work it out. I can think and when it's over I can go back to them, cos they've never gone.

Indeed, **Helen** appeared to find inspiration with her connection to nature and an existential feeling of being connected to a bigger, sensual. and spiritual world that had meaning far greater than herself. This in turn allowed her to manage her emotions and think creatively.

I will quite often deliberately step back. I go and pick the garden or walk around it ... there is something about just allowing those thoughts a little bit of space to organise themselves ... I've recognised that that's part of the way I do that imaginative construct, that imagination. It's a really important part ... What I mean is how do you invite somebody else or somebody else's ideas into your imagination? So I stand in the garden and I just connect with nature. I revel in the wonders of each plant, how nature just interconnects and makes room for everything and how immense and complex it really is. You can't worry about your own stresses when faced with that, so I just let myself think, be imaginative and make room like nature for new ideas and connections.

5.4.3 Developing cognitive control

This theme describes the socially connected ways in which participants asserted cognitive control and developed their thinking and understanding of, often complex, academic concepts within the SMIL process. This process formed the latter part of the social chat students initially engaged in with their

peers and represented a period where conversations moved from a focus on managing emotions to a focus on sharing progress, academic goals, and various cognitive challenges within their current SMIL.

These conversations were commonly used to synthesise, and test potential ideas and arguments participants wished to develop within their own academic assignments, often re-affirming students' own thoughts and ideas. It reflects a process of peer feedback and interaction in which students read and/or verbally discussed each other's draft ideas and immediate SMIL plans. This social constructivist process and approach to knowledge appeared to enable greater cognitive clarity and the development of critical as well as deeper analytical thinking and synthesis skills as students begin to re-evaluate, re-frame, re-interpret and re-affirm their learning with increasing confidence.

... when we meet in the library at [name of hospital location] it's really good. I already have some ideas about what I want to write about, but I can sort of check them out with the others and get feedback. They may suggest other things to think about, which I may or may not use, but it's good to know I'm on the right lines and that my ideas make sense to them. In fact, they often make more sense to me as well. (**Toby**)

It's really funny but like I know what I want to write, but I can't always find the words. But the girls help me find the right ones and then they say something, and I think "Yep! That's right, that's what I meant" and then I think "But it could also be this or it could also relate to this that we did last year." I could be at home and never in a million years think of that.

(Lydia)

So, to start with we all chat about "this and that", our gripes, our worries. Then someone will say "time for a coffee" and that's usually our cue. So, once we've got our coffee, or tea, we start taking it in turns to explain where we are with the assignment and our assignment plans. We don't really ask for help but we do help each other like suggesting ideas or we share articles we've read. We ask questions of each other to help us think about what we are really trying to say and slowing the "fog starts to clear." (Claudia)

As participants progressed through the programme and gained greater social connected experiences in which they learnt to think deeply, their epistemological beliefs appear to change, and they gradually appear to come to value this influential and meaningful "thinking time."

However, a tension appears to remain for number of participants between this valuing of "thinking time" and their temporal experience of "wasted time" through a contingent lack of embodied products and "having nothing to tangibly or physically show" for their efforts. As such, thinking time appears valued as a retrospective "past event" and dependent on whether this thinking has produced an embodied product useful to an assignment task.

... now I realise that that's a valuable day, a thinking day. In fact, I put a day aside to get that bit covered, you know, I don't feel sooo [emphasised and elongated] bad but at the beginning, I didn't understand why I was wasting time as I thought it was, all this time. However, I've done okay, well good really, I suppose, in assignments and so I started to learn what works and to know you have to plan and think, think and rethink. (Natasha)

So, you learn you have to think and that this is okay. This is legitimate and actually, what you're here for. So it's like to start with, you don't know what you're supposed to be thinking about, you just want people "in the know" to tell you. But as you understand more ideas you start to see the connections and then more connections and more and the puzzle is then how to put them together in a way that makes sense to you, and that you are happy to present to others. You can't do that without thinking. But of course, you can't submit yourself, your head for an assignment, you have to produce something and until you do, you're never quite sure whether this thinking time was valuable or justa complete waste of time. (Anna)

5.4.4 Getting in the zone

This theme describes the way in which feeling connected with others in order to manage negative emotions and develop deeper thinking enabled participants to achieve a cognitive and emotional state in which they became completely immersed in and focused on a particular SMIL task. In doing so they lost awareness of their surroundings and internal emotional states. The latter of which appeared to offer a much-valued emotional respite for participants. It also reflected a period of deeper learning and a wider range of learning skills and techniques. Claudia, for example, recognised that achieving a flow state was a linear type of process she had learned over time with the help of her study group and that without it she was unable to completely immerse herself and persist in her independent studies. In doing so she was able to identify a number of important antecedents in this process.

It is funny, but we have this sort of ritual that we do every time [laughs]. So first of all, we arrive after we've dropped the kids off at school and run a few errands. We all arrive at different times so there's no pressure. Oh, and if you're "not getting it that day", you just don't turn up. So, then we just chat and bitch about how unfair life is and how no one understands us [laughs]. Then, once we feel better, we have a cup of coffee and talk about the assignment and swap ideas etc. Then when that's all out of the way, that's when we study. That's when we get in the zone.

For **Anna and Lydia**, the university environment was also an important influence as it was deemed to be less distracting and more conducive to creating a flow state.

At home, I can think of a hundred and one things to do rather than study but when I'm here [on campus], well they've gone. I have to study, everyone else is and you feel like "you're all in it together." And you know what, I find I can do it. And before you know it I've worked for three hours, have four pages of writing without even noticing it. That would never happen at home [laughs] (Anna)

For Lydia this appeared to be an almost conditioned response.

But that's the difference with the uni environment and home environment. Home is meant to be warm and cosy and welcoming whereas, I'm not saying it isn't here, but yeah, the lighting is brighter, it's more appropriate for learning. It was built for learning and that's what you do here.... But here, I'm happy for it to be quiet because it's a place where it can be quiet and I just get in the zone quite quickly, but I don't at home (Lydia)

This flow state equated for all participants as "productive time" and was perceived as the antithesis of "wasted time." It was also the time in which a draft assignment essay or learning task was most likely to be created and start to take meaningful and recognisable shape. This tangible product in turn appeared to help students feel less emotionally overwhelmed and was a highly valued outcome of achieving a flow state and appeared to enhance a positive sense of self.

It's great when you get so absorbed cos the essay sort of writes itself. It makes you feel good about yourself; you've achieved something at last (Millie)

Similarly, this "productive time" was a period in which abstract and complex ideas also started to make sense and become less confusing for participants, which additionally helped them better manage and regulate their emotions once the period of flow state had ended. This process also appeared to help create a useful store of new and more positive "past experiences" and fore structures which could later be used at times of future stress when participants used self-talk strategies to re-orientate their temporal experience of time to the past, as a way of coping with emotional and cognitive challenges in the present that had not responded well to other existing strategies adopted.

I like it when you "get in the zone" because you no longer feel anxious and things begin to make sense, I understand them. It also helps me think well "I need to remember this, next time I'm stressed and want to give it all up." (Ruby)

While participants often felt alone and abandoned at the start of their SMIL experiences, achieving a flow state and "getting in the zone" through social connection with others and the social world, appeared to transform these negative feelings into a joy of being alone with their SMIL task. This sense of solitude also allowed their inner, and often more confident, voice to become audible to them and they were able to make sense of and reason through emerging academic ideas and arguments while in a flow state.

It's sort of like when you're in the zone or just before it, you realise that you don't mind being alone and doing it yourself. In fact, you don't feel alone, and you quite sort of enjoy it. You suddenly know what you want to say but you don't realise it, you just do it (Natasha).

For some, like **Ursula**, this solitude was achieved in the direct company of peers away from the home environment where the possibility of having a flow state interrupted was deemed to be lower and the resources needed to achieve this more readily available. This also appeared to help her proactively manage her emotions and delay gratification.

... Home is far too distracting. I don't even bother now unless I really have to. It's just impossible to concentrate ... But here - even though I'm slower at getting things than the rest and I can sometimes feel I'm a pain, an outsider, I do like it. ... You can be alone but not alone. I guess what I'm trying to say is that you can feel less, - I don't know - less emotional I suppose, and people can help you understand things which I need help with. Then when the time is right, you can do your own thing.

Others preferred to distance themselves and continue their SMIL in solitude in an alternative, often more private home environment. However, all returned to learning with others when a flow state was not easily maintained or became repeatedly interrupted. For **Laura and Charlotte** this was often a temporary arrangement but one in which they were provided with the antecedents necessary for achieving a flow state that had become lost

Like I prefer to work at home and do my own thing but if it's not working for me, then I change and say to myself like "just go in, feel better, then come home." It's because sometimes I need other people to spark new ideas, help me feel calm or to check I'm doing okay before I can really concentrate again. (Laura)

So if at home I keep getting interrupted and can't concentrate, then rather than give up I'll drive to uni and start again in the library ... There I can be on my own but not interrupted. Other people working there helps me focus but the next day I'll try again at home. (Charlotte)

Helen was the exception as she appeared to find comfort in her solitude which appeared influenced by her differing epistemological beliefs, her positive view of SMIL from the outset, her curiosity and the inspiration she gained from her philosophical connection with nature. In combination, these appeared to enable Helen to achieve a flow state in a range of environments and to consequently achieve her independent learning, authorial voice and critical thinking aspirations.

I enjoy being on my own and thinking. I don't like taking what somebody has said as gospel. I kind of want to look around the hedges and peep over the wall and open the door, and, "Well, are they right?" And, if they're not right, why are they not right? So, the whole idea of independent study that something that, to me, is actually a welcome concept, not just something that's a necessity. It's not a hardship

Helen expanded on this point later in her account and identified the availability of cultural capital in the home environment, unlike many other participants, in the form of her husband. This meant that she never felt alone and had the resources she needed easily available as well as time and space for solitude. For example, she stated

[Name of partner] is very immediately available because he works from home, handy. Now, he can understand from a different perspective, and I value that hugely, and I don't mean to sound as though I'm kind of dismissing anybody else's contribution because I'd hope I'm not. It's just he gets what I say and adds something more to it so I have even more to think about, even more threads to pull. We discuss them and then he leaves me alone for however long I need.

When undertaking SMIL in the company of others, student nurses rarely asked others directly not to interrupt their flow state but instead utilised a variety of non-verbal cues to signal and alert others to this fact. For example, avoiding eye contact, leaving the room temporarily and the use of headphones inserted into the ears. These strategies appeared to have shared meanings and were aimed at meeting their own learning needs while also maintaining the emotional wellbeing and connection of the group by avoiding direct conflict among the SMIL group.

... you just know that you're going to lose that train of thought if you just don't block off for half an hour and get it done really, because no one's ever rude in there, because obviously it's an open space isn't it, it's just knowing where to draw that line. So, I put my headphones in sometimes without music so everyone else knows not to interrupt me and they don't. (Claudia)

I know that the girls use their headphones and things. So if they've got their headphones in, I don't generally interrupt them so much even if I need them ... I'm quite good at blocking people out now without offending them. They understand that if I'm walking around the car park or making coffee to leave me alone (Laughs) (Natasha)

I just avoid eye contact or say "uh huh" without looking up so people know I don't wish to be disturbed without offending them (Harriet)

5.4.5 Developing a sense of mastery

This theme describes how participants through a process of personal reflection and social connection gradually developed a sense of personal mastery and confidence in their own independent learning. It reflects a transmutation of personal hopes, SMIL goals and intentions into feelings of mastery and an increasing belief that they had some control over their independent learning and belief that they can succeed if they learn from the past – both their own personal and others' experiences, - work hard and persist despite perceived obstacles and setbacks.

This process appears to be facilitated by the sharing of good and bad SMIL experiences with meaningful others. The sharing of these vicarious SMIL experiences helps student nurses increase their level of self-acceptance and commitment to their learning goals they personally wish to pursue. Experience sharing also afforded them a greater and more positive psychological focus on how to perform well through an exchange of practical strategies and skill development reflections, rather than a focus on personal limitations and feared or anticipated failures.

... we share experiences with each other all the time. We kinda always try to be positive and constructive and not blame anyone, including ourselves so we feel better, not worse at the end of it... We just try to learn from each other and what might work that we haven't thought of. What people suggest doesn't always work for me but at least I've stopped stressing and have started to think about other ways to cope (Natasha)

Nonetheless, this sense of mastery appears a fragile concept not always built on and sustained by past (assignment) success as traditional theoretical ideas of self-efficacy might suggest. Indeed, in the final year as the end of the programme nears but the assessment load is perceived to be high, the cost of perceived failure so close to the end appeared to weigh heavy on many participants, reducing their belief in their personal success. This was particularly true for students who had adopted strong performance goals as a source of SMIL motivation.

Like I know I've done well, and everyone thinks I will get a first but that doesn't help. What if I fail now? I'd feel so stupid walking across the stage [reference to graduation] and everyone knowing I didn't get it. That's why I think I put all this pressure of myself. I think nearer the end its worse, people have even higher expectations of you and the stakes are higher and it doesn't matter what you've done in the past (Harriet)

To help manage this, participants increasingly compared themselves to others in order to constructively reframe and reinterpret their SMIL mastery beliefs as well as assert a sense of emotional control. This also enabled them to set and achieve a more realistic series of personal learning goals, create successful mastery, develop further independent learning skills and persistence alongside a sense of control as well as manageability.

... I was panicking the other day and thought I had to do this, and this and this. I thought to myself "I'm never going to be able to do this" Then I spoke to the others and realised I was just being stupid; we have all year to do these things so I stopped panicking and just got back on with it. I know I'll get it all done in the end. I'll manage it, I always do (Laura)

Moreover, setting a series of goals permits the opportunity to create a tangible product in the form of a "to do" list that can gradually be ticked off further adding to a sense of mastery. This appears important as SMIL is a process that delays gratification and this sense of mastery through embodied products appears to help student nurses cope in light of this.

I make lists all the time so I can see what I'm doing and how well I'm progressing. You can kinda get a handle on it better that way, there's something to actually see. I love ticking things off, it feels good. Sometimes I even rewrite it so I can tick things off again [laughs]. ...Otherwise, it's really hard to know how you're doing, you don't have a clue until the grade is back (Beatrice)

Comparing self to others also appears to be experienced as a strategy for coping when the self is threatened. In these situations, a more downward social comparison mechanism appeared to be used as identified in subordinate theme entitled "fragile sense of self."

5.4.6 Developing a new sense of coherence

This theme describes how social interactions with peers and faculty helped student nurses to develop a range of practical, metacognitive, and psychological strategies that they then appropriate as their own in order to help

give structure and direction to their SMIL to achieve a sense of coherence. It also reflects a transformation in their personal epistemological and ontological beliefs about learning independence alongside their changed assumptions about the self, support, and the higher education context. As such, it reflects a journey in which SMIL became manageable, meaningful, and comprehensible.

For example, SMIL, and in particular assignment tasks, were often perceived as confusing at the onset of each academic unit of study. Participants therefore try to actively make this comprehensible by asserting a sense of order and structure to reduce feelings of chaos and uncertainty during these times. The creation of tangible products such as SMIL written plans helped to create order as well as assert emotional and motivational control as a way of making sense of the initial incomprehensible.

... Assignment briefs and study tasks are so confusing at times so you really don't know what you need to do independently ... and then all of a sudden, we just realised that it was because we needed to get our heads together, make a plan and actually talk things through, and give ourselves time ... so we could make it understandable. Then we went for it ... (Charlotte)

The synthesising and testing of ideas in class with faculty and outside of class with peers was also adopted. As students become more experienced at SMIL they also appeared to interact with others to affirm and draw on a sense of predictability in order to make sense of their assignment/SMIL. For example, they learnt that they could control and influence their learning through persistence, determination, and sustained effort.

I just kind of learnt I suppose that if you work hard and keep going, you'll get there. So I always go to tutorials now to check out my ideas but even then I can still be confused You've just got to kinda "push past it." Like I'll talk it through with friends at lunch time where I suppose we realise that we've been here before so you just keep going (Millie)

The fragility of this is however demonstrated at times when students report personally disappointing assignment grades which challenges their sense of predictability, control and comprehensibility.

I just don't understand it. Sometimes I think I've really nailed this assignment. I've worked really hard on it, given up so much and then the grade comes back and nothing makes sense anymore (Laura)

Well, I think it's because where I get lower grades than most other people, I go, "For God's sake, I'm just still starting and I'm working really hard." it's that kind of thing that you feel that you're kind of ousted again, because you got a lower grade. That's just how emotionally you feel, and you do, and it takes you a week to go back into it cos you feel you did the same as them and yet it worked before, why isn't it now.? That's when I think, I'll never understand this. It will never make sense, then it does. (Ursula)

Making SMIL manageable also helped student nurses develop a sense of coherence and equally includes learning to persist, being resilient and the adoption of more practical strategies such as setting short term goals and developing to-do lists, both of which also assisted cognitive attention and clarity. It also included developing effective time management skills so multiple identities can be managed and balanced and distraction and procrastination can be minimised.

Oh my God I couldn't live without my diary and my to do list now otherwise I just couldn't manage my time. So yes, first – First I have to break the task down into smaller bits and then I can understand it and know what to do, otherwise it's just a blur (Ruby)

However, making SMIL manageable also involves a psychological shift in thinking and beliefs, facilitated by social interactions with peers, from one of self-doubt to a more growth mind-set where struggles were increasingly interpreted more as learning opportunities, rather than devastating challenges to the self. This often involved valuing their more extensive range of emotional and cognitive regulatory control strategies they had developed in their SMIL journey, including learning to recognise difficult situations, learning when to seek help, learning when to walk away and learning self-compassion. This appeared to reflect an active shifting of attention to help develop a sense of manageability and a new sense of coherence. It also reflected the development of a new and maturational growth mind-set as participants journeyed toward a new and more confident perspective of learning independence, support and the

higher education environment influenced by the experience of working through past insecurities and disorientations with peers.

... You know, if I can't move on with something, I've learnt I just maybe need to stop and then come back to it later and see it in a different light and... You know, it comes together for us all anyway, but...yeah you need to know when to walk away. Because then... at least I'm using my time well... being productive. If I'm not productive then the stress can really set in (Natasha)

What I've learnt most I guess is to be kind to myself. I get anxious easily and it doesn't help. I used to get really strung up about things if I didn't understand them but now I know I just need to seek help, speak to someone and just be kind to myself (**Toby**)

Developing a sense of coherence also involved participants interacting with each other to help them make their SMIL meaningful for them as individuals. It related to students needing to have a good reason to learn independently and justify to themselves the many perceived sacrifices they and their significant others make during this process. It also reflected a wide range of changing motivations and epistemological beliefs. For example, to start with student nurses described how the uncertainty, confusion, and newness of SMIL caused them to desire very limited autonomy and control, preferring to be instructed by faculty and to recall expert information. However, students now reflected on how SMIL had been a journey and that they recognised for themselves how this had changed, and thus previously valued extrinsic motivation and lack of autonomy were now unable to adequately sustain their current motivation and sense of self. They therefore sought a range of other, albeit diverse, motivations. For example, for some, externally regulated and extrinsic rewards remained but rather than pass assignments, they now wanted to improve their grades to sustain an emerging academic identity, and this motivated their SMIL.

To start with you just want to pass and not have to do anything again in the summer, or in my case, not to have to repeat the first year as well. [Laughs]. But then gradually you think to yourself "Wow! I can actually do this" and then you think "Wow! I'm actually someone who is at university, and I haven't been kicked off." So, then you want to do even better, and you think to yourself, I'll never be a first student but I can do better than this. I can show them, so you work harder." (Laura)

For some, these extrinsic rewards became more introjected rewards related to meeting self and academic identity needs and led to greater autonomy and meaningfulness.

Originally, I just wanted to prove to everyone in my life I could do this because I couldn't do it when I was younger. But later it wasn't about everyone else, it was about me. I just wanted to – want to, prove to myself that I can be academic, a good academic and a good nurse that others looked up to. That's my motivation now. (Anna)

I want to do well and prove something to myself. It's what inspires me, especially when it's tough. That I can prove that I'm - I am not stupid, that I have opinions worth listening to. That I [personal pronoun emphasised] can graduate from university and have a good job. (**Natasha**)

For others meaningfulness was achieved in recognising their changing epistemological beliefs to wanting to hear their own academic voice and owning their lines of reasoning and academic arguments. These students appeared to find meaning from moving from an epistemological basic duality to a more relativist, constructed and committed attitude to and beliefs about the nature of knowledge itself.

To start with I was just like I was at college. I wanted to know what it was I needed to write and then I'd happily write it. You know I used to get quite angry because everything and everyone was so vague and wishy washy. But now, you know that isn't enough, it's sort of different ... Like now I only write what I believe, and I read loads cos I want to know what people think and why they think it. I don't accept it at face value even if they're a so-called expert. I'm not so good at working out whether it's a good paper or not but I keep trying but maybe, just maybe, I have something worth saying (Claudia)

I have my own ideas now about what I want to say in each essay. I'll happily check them out first and I think them through and organise my thoughts...but I no longer just copy other people's ideas. I have the confidence to write my own. (Charlotte)

For others it was an ontological and existential change that was most meaningful suggesting that SMIL is more than a purely epistemological change but also a transformation of their very being.

I don't blame anyone else now. I'm responsible for what I learn and how well I learn it. I'm so proud of the person I've become, and this is so much more important than the grades I get (Millie)

It's [SMIL] taught me to be much less anxious and not to ignore my emotions but face them. Then I can achieve anything and can surprise myself - I'm a different person (**Toby**)

5.5 Understanding the lived experience of SMIL

Reflecting on these co-constructed findings and remaining faithful to the voices of the participants, I have come to understand that the lived experience of student managed independent learning is lived primarily as an emotional journey and not solely as a cognitive process of linear pedagogical and epistemological development. It is also lived by students within the context of their multiple social roles and the expectations of significant others leading to fragmented learning and personal sacrifice. Independent learning therefore coexists, often uneasily, in participants domestic and academic spheres with both considered valuable but also demanding and needing to be actively and constantly managed by them. Reappraisal and effective emotional regulation precede effective learning engagement, the effective balancing of these two worlds as well as transformed pedagogical and epistemological beliefs.

It is this emotional journey starting from feeling overwhelmed to asserting emotional control that holds the most salience and meaning. The student nurses who participated in this study had to therefore first recognise and then learn to temporally and socially regulate their overwhelming and roller coaster negative emotions that the unexpected demands of independent learning in the higher education context invoked. Only once this had been achieved did it become possible for participants to effectively engage in the cognitive, epistemological, and ontological transformations necessary for learner independence.

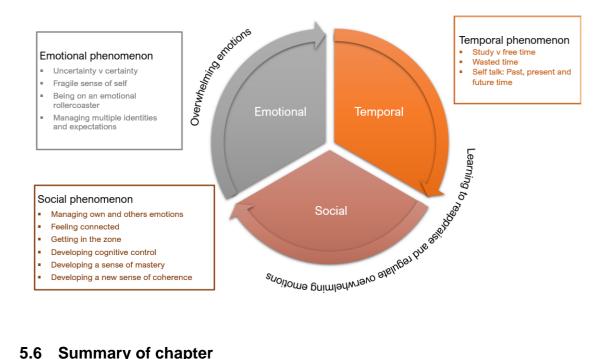
Student managed independent learning as an emotional phenomenon is therefore significant to them and learning to regulate and reappraise their emotions is not necessarily instantaneous but a part of a journey in their personal and academic growth in response to ongoing challenges both within and outside of the higher education context they inhabited. The regulation of these emotions also requires constant vigilance and awareness throughout their undergraduate journey in order to sustain cognitive engagement and for participants to continue to feel they are in control of their own learning. Thus, while their initial journey is hallmarked by overwhelming emotions, unexpected challenges throughout their academic journey and a perceived lack of empathy from faculty can temporarily return them to feeling overwhelmed and unable to fully engage in subsequent and sustained independent learning opportunities. So too can the ever present and dynamic nature of their multiple roles and the concomitant expectations of those significant to them.

Learning to be independent is also lived as a dynamic interplay of temporally embodied and negotiated experiences in which participants begin to resolve their confusing and disorientating early experiences, expectations, identity challenges and emotions related to SMIL. When feeling overwhelmed SMIL as a temporal phenomenon is experienced as a significant and unwanted pressure. During this time, often isolated from the support of others, SMIL becomes temporally reconceptualised as "study time," "wasted time" or "free time." These are all ways that student nurses attemptto assert some form of control over the negative emotions that overwhelm them.

The sense of feeling overwhelmed frequently returns during their ongoing learning journey and is lived as a significant and dominant aspect of the vicissitudes of their self-managed independent learning journey. However, overtime participants recognise a developmental need for new and improved emotional regulation and reappraisal in order to effectively engage in their process of becoming a more autonomous and independent learner. Changing temporal orientations and reflecting on their own historicity and fore structures of understanding is meaningful to them. In particular engagement in self-talk and learning to both listen to and trust their inner voice appear to act as an important liminal stage in their independent learning journey since it is through this that participants learn to develop more positive discursive and authentic relationships with the self and others.

Student managed independent learning is therefore also lived as an increasing significant social phenomenon as students learn to interdependently develop more effective emotion regulation and consequently independent learning skills in their relationships with peers. Experiencing more positive emotions through authentic peer support and relationships, they learn to grasp both the inter- and in-dependent nature of learning and what it intends to achieve in the higher education context. The significance of SMIL as a socially constructed, transactional, relational, and ultimately transformational learning process of regulated and reappraised emotions helps to rebuild a revised set of epistemological and ontological assumptions, beliefs and identities that enable them to begin to more effectively and meaningfully flourish in the higher education learning environment.

Figure 2: Understanding and summarising the lived experience of student managed independent learning



Summary of chapter

This chapter has provided a detailed narrative of participants lived experience of SMIL. Drawing on an interpretative phenomenological analysis of individual and then cross case analysis three superordinate themes were identified "feeling overwhelmed," "the pressure of time" and "connecting socially" to give meaning to this lived experience and the aspects that have salience for participants

themselves. Together they offer a unique and rich insight into the complex ontological, epistemological and pedagogical independent learning challenges, transformations and achievements of adult student nurses in one UK University from their own perspective alongside the transformative nature of their SMIL lived experience and sense making processes.

The many "highs and lows" of this journey were captured during the critical IPA hermeneutic process which helped identify what mattered most to participants and the meaning they attributed to this. Finlay (2009) nonetheless argues that IPA by its very philosophical nature is "incomplete, partial tentative, emergent, open and uncertain." These findings therefore represent one version of participants SMIL experience and it is possible that other IPA researchers and their own unique fore structures of understanding might interpret the findings differently. It does not, as Smith and Eatough, (2012) caution, provide the 'final word' on the adult student nurse experience of SMIL. Instead, it offers a rich understanding of the experience of SMIL by the participants involved and from one researcher's perspective in order to contribute and open up a scholarly conversation rather than close one. These findings are therefore further interpreted and discussed in the next chapter.



6.1 Overview of the chapter

Based on personal observations of multiple and unintended attribution errors and misunderstandings between students and faculty, this phenomenological and interpretative research was inspired by a desire to better understand the nature of student nurses lived experiences of SMIL and their developmental journey to learner independence. The aim being to uncover previously hidden emic understandings and nuanced insights that would have the potential to assist nurse educationalists, like myself, to more effectively respond to and support students as they engage in this complex and challenging learning process.

This chapter therefore offers an ongoing interpretive discussion of the findings of this study and the three superordinate themes of *feeling overwhelmed, the pressure of time* and *connecting socially* to argue that learning to be independent by the thirteen adult student nurses who participated in this study was lived as an emotional, temporal and social phenomenon. For participants SMIL was experienced not just as a cognitive and rational journey of development, as much quantitative and extant research findings might suggest, but rather as a predominately emotional one in which participants first had to learn to temporally and socially regulate their overwhelming negative emotions. Only once this had been achieved did it become possible for participants to effectively engage in the cognitive, epistemological and ontological transformations necessary for learner independence. This chapter locates these findings with the existing literature and knowledge base.

6.2 SMIL as an emotional phenomenon

For participants, SMIL begins as an uncertain and disorientating pedagogical experience in which expectations are not matched by the lived reality of their higher education learning. During this initial period all participants experienced intense feelings of uncertainty as they struggled to make sense of themselves

as independent learners in an unfamiliar learning context. This uncertainty appeared fuelled by their transition from a highly structured and externally imposed time environment of their past education to the relatively unstructured and internally regulated HE environment. To help make sense of these unexpected discursive and dialectical tensions, participants constantly compared their current lived experience with that of their recent educational past, with the resulting dissonance and ruminations leaving them feeling uncertain, unprepared and overwhelmed. Such findings are similar to those reported by the UK adult student nurses in Pryce-Miller (2010) study who reported feeling similarly unprepared and uncertain at the outset of their independent studies,

This uncertainty and resulting negative affect also reflected a disorientating loss of epistemological meaning in participants pre-existing expectations regarding the nature of SMIL, akin to Janoff-Bulman's (1992) assumptive world concepts about the educational world suddenly becoming less meaningful and benevolent. Findings that are also reflected in Taylor's (1986: 59) interpretative research in which she describes learning to be independent as a series of phases beginning with "disorientation" and characterised by uncertainty, confusion, tension and a crisis of confidence. Participants in this study also appear to have commenced independent learning with a similarly confident epistemological assumption that knowledge, although more in-depth, would continue to be a fixed, binary and acquired commodity that would be transmitted by experts and subject to frequent externally validated formative confirmation in order that they might be passively "taught the truth."

This initial epistemologically framing of SMIL in terms of more in-depth knowledge replication and teaching, - rather than increased autonomy and personal responsibility for learning, - have been widely reported elsewhere in the pedagogical and SMIL literature (eg Brookfield 2005; Raidal and Volet 2009; Žydžiūmaitė et al 2013; Thomas et al 2015a). The findings of this study therefore reflect a well-recognised dissonance between undergraduates' initial dualist, absolute and pre-reflective epistemological beliefs (Perry 1970; Baxter-Magdola 2004: King and Kitchener's 2004) and the more relativist and social

constructivist epistemology of SMIL. Indeed, Perry (1970) himself highlights this as one of the most developmentally difficult cognitive transitions for undergraduates to make sense of along their journey towards increasing independence.

These findings therefore raise some important pedagogical implications for how well student nurses are prepared for SMIL in advance of their university transition, particularly at a time when A-level teachers themselves acknowledge the difficulties they have in promoting more autonomous learning within the current highly structured national examination system (Higton et al 2012). It is thus recommended that nurse educationalists and HEIs recognise the potential role they themselves can have in supporting pre-entry students and A-level/ Access teachers to develop more realistic student expectations, epistemologies, and relevant independent learning opportunities prior to their transition to higher education. For example, by valuing the level 3 Extended Project Qualification (UCAS 2019) in nursing admission criteria and by offering a range of dedicated and pre-entry resources and academic mentorship support for such independent study opportunities.

Equally important is the provision of on-course learning opportunities that do not reinforce prior expectations of passivity in order to help student's early transition to a new identity as an independent learner. The type of pedagogy used in modules designed to assist the transition to increased independent learning therefore appears salient. For example, it is widely acknowledged that information alone does not overcome belief persistence, cognitive biases nor alter epistemological positions created by prior expectations (Baxter-Magolda 2004; Sharot et al 2011). Therefore, a more student-centred pedagogy whereby nurse educators make every effort to validate students as knowers and encourage the co- construction of knowledge situated within students' own experiences is recommended over a narrow focus on technicalities and study skills. The opportunity for unstructured, facilitated and guided reflective opportunities to actively explore the dissonance and uncertainty created by student's prior expectations and assumptions – but also essential for transformation (Taylor 2009) - is also recommended within a supportive non-

judgemental class environment. For example, the unstructured space created by Cadorinn et al (2015) in response to the uncertainty experienced by Italian nursing students appeared effective in assisting undergraduate's self- directed learning epistemologies and uncertainties within practice. However, given the lack of evaluative research within such student- centred pedagogies, this also represents an important direction for future research in terms of exploring the interplay between the nature of such learning environments and the facilitation of a more autonomous learner in the contemporary HE climate.

Nevertheless, a noteworthy finding of this study is that nurse educationalists should not necessarily rush to remove entirely student uncertainty as this is also an important precursor for epistemological and ontological development in their journey to independence. For those participants less intensely overwhelmed, and in line with transformative learning theory (Taylor 2009), the experience of uncertainty was a necessary starting point for cognitive change and deep learning. Students with more realistic and positive epistemological and ontological expectations of the independent learning demands, have the potential to respond positively to uncertainty enabling them to reduce their need for premature cognitive closure (ie the desire to quickly eliminate ambiguity and arrive at definite conclusions and certainty in order to restore emotional wellbeing). Likewise, others may need to experience this uncertain phase to later self-question themselves before finding future positivity in the company of peers. Such findings arguably support the social constructivist epistemology and transformative nature of SMIL in which it is argued that learning begins with a period of mental unease and disorientation as well as dialectical tension (Taylor 2009; Morrison 2011; Çelik et al 2012).

Rather than remove uncertainty, uncertainty itself therefore needs to be acknowledged by nurse educationalists as a constructive state of mind and strategies that promote this, such as Socratic questioning, class debates and the search for alternative viewpoints (Sollitto et al 2018), encouraged within SMIL facilitation. The role of the educator within this recommended pedagogy is therefore to create a safe psychological space to facilitate ease, familiarity and engagement with uncertainty and thus both allow and normalise emotional

academic discomfort. Indeed, a number of writers argue against the pedagogical problematising of student uncertainty and the search for ways to reduce or efface it for students within life-long learning paradigms (Barnett 2008; Su 2011). Joosten (2013) for example suggests this is particularly salient for those on professional programmes who will graduate into a professionally uncertain world where the need to continually learn independently is of prime importance. Barnett (2008) also contends from a social constructivist perspective that in order to develop a transformed ontological and epistemological self, students first need to be supportively "held in a zone of uncertainty."

This positive reconceptualising of uncertainty and this study's findings thus recognise SMIL as a journey of dialectical tensions and epistemological struggles that can be psychologically uncomfortable and at times overwhelming. However, pedagogically speaking this can also have a longer term positive and transformative learning effect as students move along their learner trajectory, even if not immediately apparent to the students themselves. It is therefore argued that the facilitation of SMIL has less to do with the production of knowledge and skills and more to do with the challenge of dealing with students pre-existing self-identity, existential concerns and their desire for cognitive closure and ontological security that results in overwhelming emotions. Indeed, Joosten (2013) warns against higher education overprotecting undergraduates out of fear they will not be able to handle rapid transformations and instead suggest students should be perceived as "risk takers" within a humanistic pedagogy whereby independent learning is reformulated into what Barnett (2011) phenomenologically describes as "coming-into-active-doubt" since transformative learning is by nature a disorientating, uncertain and "selfdoubting" process of enquiry.

6.2.1 Empathy and recognition

Nonetheless, this study also highlights that nurse educationalists themselves might benefit from similar opportunities to reflect on their own epistemological positions and effective pedagogies that support undergraduate's independent learning transitions. Indeed, participant accounts suggest that uncertainty and

negative affect were significantly increased by a lack of perceived empathic recognition by academic staff of students lived emotional world. For example, faulty end of class comments such as "over to you now, I've done my bit" served to threaten and fragment students sense of self and added to their sense of feeling emotionally overwhelmed. It also appears to imply a flawed discovery learning pedagogy and assumption of automatic, - rather than an interdependent developmental process towards, - student autonomy. However, as identified in Mayer's (2004) extensive literature review, such a pedagogical position is not supported by the research evidence on adult learning as adults require both facilitative and scaffolded support in order to be cognitively active.

Theories of recognition also have their roots in Hegelian philosophy which offers a potentially useful framework in responding to student's fragile sense of self that overwhelming emotions and loss of epistemological meaning evoked. For example, one of Hegel's (2018) key propositions is that the self is a fundamental struggle for recognition and is formed and developed within a relationship that is explicitly acknowledged by the other. Otherwise, individuals are argued to ruminate on and primarily define themselves in terms of their "dependent otherness" (Honneth 2004) as reflected in many of the early interview narratives. In doing so participants failed to always recognise themselves as having autonomous abilities. Nurse educationalists thus need to ensure they themselves positively and explicitly recognise and respond to student's emic vulnerabilities when facilitating SMIL since recognition supports the development of self-esteem, self-efficacy and self-respect essential for effective engagement and flourishing within the independent learning process (Rogers 1961; Baumeister et al 2003; Brookfield 2005).

That is not to argue that educationalists are necessarily insensitive to the emotional needs of students, but rather without being aware of the importance of emotional recognition within independent learning and how the self is a key motivating mechanism, the need for empathetic understanding can easily become overlooked, despite the sentient nature of SMIL garnered in this and other qualitative studies (eg Taylor 1986; Hewitt-Taylor 2001; Lunyk-Child et al 2001; Thomas et al 2015b). Such findings however can easily become

neutralised and obscured in the larger body of quantitative research findings and andragogical assumptions that dominate the extant literature whereby independent learning is conceptualised as a purely cognitive, rational and instrumental endeavour.

The findings of this study also suggest that for this to be achieved the dominant discourse of dependence may equally need to be challenged. For example, participant's fear of appearing childlike and needy seem illustrative of the ways in which dependence maybe misconstrued within traditional andragogical discourses and conceptualisations of SMIL (Knowles, 1998). These misunderstandings appear to act as a barrier for empathic understanding, leading to inadvertent student infantilisation and oppression if rooted in a neoliberal perception of student immaturity and childlike neediness.

This study therefore reinforces the different etic and emic understandings of learning to be independent highlighted by such writers as Quinlan (2016), whereby the former is viewed as a purely cognitive and rational phenomenon and the latter as a significantly affective one. The findings of this study therefore suggest that just as nursing can "fail" when it is reduced to technical tasks (eg Francis 2013) so too can the facilitation of SMIL. From the perspective of nurse educationalists SMIL perhaps needs to be viewed not so much as discovery and instructional learning methods, but more about recognising, respecting and helping students to develop the emotional capacity to learn autonomously and to challenge their epistemological assumptions.

Equally, empathy, - as the understanding of and identification with another person's emotional state (Hirsch 2007), - has to be conveyed to the subject to be perceived by them. Although there is no consensus on how best to facilitate empathy in others, nurse educationalists may need to be encouraged, and provided with the resources, to engage in their own self- reflective consciousness raising and mindfulness techniques (Taigman 1996; Hirsch 2007; Crawford et al 2018) to help them become more aware of their own emotions and to improve both their empathic understanding of and responsiveness to, others. They may also need formal time and encouragement

to critically debate with their peers' alternative pedagogical approaches in which conveying empathy is a key aspect in the facilitation of SMIL.

This is arguably important as HE teaching is widely acknowledged to involve significant but often hidden emotional labour costs (Hochschild, 1983) that can easily go unrecognised by HEIs themselves, particularly if heavily influenced by contemporary neo-liberal agendas and the demands of massification (Darby 2017). The risk therefore if nurse educationalists are not recognised and supported by their institutions and peers is that defensive "surface acting" strategies (Trigwell 2012) become adopted in response to the pedagogical emotions that arise when students engage in SMIL. "Surface acting" refers to the high emotional costs and cognitive resources that lead to emotional exhaustion, burnout and compassion fatigue when outwardly modifying emotions but simultaneously suppressing "true" internal feelings (Trigwell 2012; Crawford et al 2018). This study therefore also raises implications for HEIs and senior programme academics in terms of emotional support and recognition for nurse educationalists too. For example, Crawford et al's (2018) qualitative research suggests that universities who provide curriculum space to proactively build positive student-teacher relationships, help to enhance educationalists emotional resiliency and empathic ability. Correspondingly, Constanti and Gibbs (2004) advocate high academic autonomy and flexibility as having similar protective and positive pedagogical influences.

This is arguably important as a lack of empathy and emotional recognition as well as a resulting sense of abandonment contributed to participants decision, albeit reluctantly, to avoid help seeking behaviours and to learn in isolation from others as a strategy for protecting the self and hiding their emotional vulnerability from others. However, this decision further intensified their sense of loneliness and negative affect making effective emotional regulation and active learning engagement problematic. Such findings also resonate with the post-graduate students in Hewitt-Taylor's (2001) UK study who all associated learner independence with learning alone and being unsupported. Both Hewitt-Taylor's (2001) and the findings of this study further indicate that nurse educationalists may not therefore always recognise, and thus effectively

respond to, this influential affective dimension of independent learning.

Overwhelming negative emotions, as narrated by participants when initially learning in isolation, have been widely associated with similar impaired motivation, cognition, productivity, performance and engagement through the impact of deactivating emotions such as disappointment, sadness and confusion (Rowe and Fitness 2018). Tugade and Fredrickson's (2004) influential broaden and build theory of positive emotions likewise contends that unchecked negative emotions narrow an individual's "thought-action repertoire." The result is a tendency towards cognitive narrowing (inability to perceive a wide range of learning possibilities) and defocused attention (inability to attend to available information) all of which have the potentially to negatively impact on learning to be independent. For the participants these cognitive processes appeared to activate immediate survival-oriented stress responses (eg anger and avoidance) that compromised their decision making and problem solving SMIL abilities as well as their ability to think clearly and critically during this independent learning transition. It is therefore recommended that student nurse be provided with formalised curricula help and support to develop a range of emotion, problem and meaning focused coping strategies within modules aimed as SMIL facilitations and not just technical and instrumental help with traditional study skills in order to manage these multiple emotions.

Avoidance and withdrawal as a result of emotional dysregulation nonetheless featured heavily within participant's accounts when describing feeling overwhelmed and threatened. According to social relational theory (Bond 2009), shame is a social emotion in response to perceived disconnection from others and when the universal human need for affiliation, identification and nurturing are not met. When viewed through the lens of Nathanson's (1992) model of shame, both avoidance and withdrawal appeared to function as a strategy for emotional distancing in order to cope with undesirable and self-conscious emotions that participants experienced as part of their SMIL experiences. While the source of shame and guilt differed between participants (eg feeling exhausted, overwhelmed, unmotivated, being concerned for academic grades), the majority of participants used avoidance and withdrawal in a number of

explicit and implicit ways in order to limit shame and guilt exposure and the ongoing internalisation of this, particularly when SMIL was new. For example, learning in isolation to emotionally protect oneself from exposing perceived independent learning weakness to others can imply a fear response about being rejected through others negative evaluations (Elison et al 2006). Humour is a more implicit emotional distancing strategy, akin to Nathanson's (1992) notion of "masochistic shame" and can be used to justify procrastination and minimise her sense of shame.

Thus, avoidance and withdrawal appeared to help regulate negative affect in the short term but also dominant within participant accounts of shame and guilt, were the ways in which these self-conscious emotions and resultant behavioural responses also led to self-criticism and intrapersonal anger, further adding to their sense of feeling overwhelmed. Such internally directed anger and condemnation appeared to surface once participants reflected on and became more aware of their avoidance and withdrawal strategies and resulted in a further lowering of their self- esteem. Findings which are congruent with the strong relationship between shame and poor self-esteem reported elsewhere (eg Nathanson 1992; Tangney and Dearing 2002; Elison et al 2006). However, they also demonstrate the vicious cycle participants entered into once their self was threatened in so far as a number of ego depleting and high cognitive cost strategies used to boost self-esteem provided only transitory benefits before further lowering their self-evaluations. This lowering of self-esteem consequently prevented the necessary emotional repair and self- forgiveness, whereby individuals are motivated to transition from self- condemnation to selfbenevolence (Hall and Fincham 2005), - necessary for timely cognitive reengagement in SMIL.

These findings therefore illustrate the many diverse ways in which shame and guilt can manifest themselves within SMIL. Bond (2009) argues that recognising shame in others is not easily achieved as it can have a silencing impact on people (ie those who feel shame do not easily speak of it). Consequently, it can be easily overlooked by faculty who may mistakenly misinterpret it as lack of student interest and disengagement as perceived by participants in this study.

Nurse educationalists therefore need to ensure that they create a warm, encouraging and open atmosphere when interacting with students and avoid inadvertently humiliation through lack of emotional understanding and responsiveness. For example, Scheff (2000) argues that identifying shame and guilt by name and sharing personal experiences of these are an important aspect of helping students learn to manage their own self-conscious emotions. The grouping of students into mixed ability reflective groups at the outset of the programme in order to develop confidence in each other and offer much needed emotional support is therefore recommended. Equally, the benefits of emotion labelling are further explored in 5. 3 "SMIL as a social phenomenon."

6.2.2 Academic identity

A further influence on feeling emotionally overwhelmed appeared to be the contingent nature of participant's academic identity on achieving "good grades" in summative assessments. As such summative assessments determined all of the participants' independent learning priorities in an almost indubitable manner and appeared to reflect an important personal biographical narrative of themselves. Findings that Thomas (2015b) also highlighted. For example, a significant number of participants had experienced negative prior educational experiences during their formative schooling which had impacted on their identity as a learner. Consequently, their journey to higher education had been a long and often interrupted one in which they gradually accumulated sufficient entry qualifications through what they perceived as personally high stake and hard-earned assessments. Recent past assessment success thus offered them the opportunity to re-evaluate their learner identity in more positive, less stigmatised and often unexpected ways with good assignment grades acting as a significant influence on their positive reconstruction of their self as worthy, consistent with achievement goal theory ideas (Bardach et al 2019).

Achievement goal theory focuses on the purpose and reasons why an individual pursue a task as well as the standards or criteria they use to evaluate their competence or success (Pintrich 2000). Students who adopt ego or performance goals therefore strive to *prove* their worth to others and are concerned with demonstrating their relative superior achievement to themselves

and others, while students who adopt mastery goals strive to *improve* and define success through the acquisition of worthwhile skills and understandings. In this study, all but one participant appeared to be initially motivated to learn independently more by ego-related performance goals than mastery goals. Failure to achieve these performance goals further threatened participants self-concept as their esteem and identity were closely tied to their perceived success in the assignment task. Consequently, they became anxious, discouraged, demotivated, threatened and overwhelmed in the face of anticipated failure or grade disappointment because such outcomes challenged their self-concept and desired learner identity.

This fixation of assessments also produced a negative feedback loop, similar to the one described by Thomas et al (2016b), as the high emotional and cognitive cost of their ego involvement and the resulting exhaustion and emotional vicissitudes became a new source of stress and anxiety. It also led to students adopting more strategic learning approaches as they calculated in advance what they wanted to achieve and what they considered necessary. In doing so nearly all participants provided examples during their narratives of meaningful and deep independent learning being forfeited as part of their overall grade strategy. It therefore seems important for nurse educationalists to help students identify and recognise their own SMIL motivations in meaningful ways as a strategy for helping students consider the advantages and disadvantages of these. Building self-efficacy (Bandura 1997) and in particular mastery experiences through a series of small but increasing challenging assessment tasks is therefore recommended alongside curriculum space to engage in small group reflections regarding these motivational goals.

6.2.3 Exhaustion

Feeling overwhelmed was also experienced through a lens of physical and psychological exhaustion which stymied participants SMIL engagement.

These emotional vicissitudes were vividly captured in participant's metaphorical framing of SMIL as an "emotional rollercoaster journey" reflecting the perplexing emotional volatility and intensity they experienced as they engaged in greater learner independence. However, this emotional oscillation was often perceived

by participants as a greater source of SMIL stress and exhaustion, than the cognitive learning challenge itself. For example, it was evident that all participants experienced SMIL as a predominantly emotional phenomenon and that this was a powerful, overwhelming and recurring feature of their accounts. While this was most deeply and intensely felt at the outset of their higher education studies when the challenge of increased learner independence was new, a sense of ongoing emotional vigilance was also a pervasive aspect of their later narratives. Brookfield's (1986: vii) evocative description of adult learning as a "highly complex psychosocial drama" resonates in this respect.

Crawford et al (2018) similarly describe emotional exhaustion as "feelings of being overextended and depleted of one's emotional and physical resources." The frequent use of metaphors by participants is interesting as it appears to be an unconscious meaning focused coping strategy that all participants used at some stage during the interviews in order to regain a sense of certainty and meaning for a learning strategy that was difficult for them to define, emotionally difficult to control and appeared to overextend their internal resources.

Landau et al (2014) propose that metaphors impose order and meaning on a suddenly unordered world and are often used to express nuances of thought and feeling that continue to be experienced as difficult, overwhelming and/or impossible to express in literal language. This metaphorical framing therefore appears to reflect the emerging resilience by which participants approached their SMIL despite the personal challenges they repeatedly encountered.

Faculty can also enhance this through support and facilitation. For example, Southwick and Charney (2013) identified six effective strategies for improving resilience which appear regularly in the scholarly literature, including cognitive reappraisal and mindfulness techniques, stress inoculation strategies, encouragement to seek help and support, bolstering positive emotions, encouraging physical activity and role modelling. Of these cognitive reappraisal questioning was deemed to be the most effective and can be used by nurse educationalists in a variety of different learning situations from lectures, seminars and tutorials to help students understand and regulate their emotions in order to enhance their SMIL resilience.

6.2.4 Fragmented learning and sacrifice

Participant stories of feeling overwhelmed also revealed the fragmented and disrupted nature of their independent learning and the impossibility of having dedicated, uninterrupted and privileged thinking time for SMIL due to their multiple identities and social roles as well as the expectations of significant others. For participants developing an identity as an independent learner while important, was also difficult and characterised by personal sacrifice, lack of spontaneity, complex strategising and at times unexpected familial resistance, all of which left participants feeling further overwhelmed.

The concept of dual or bifurcated consciousness (O'Shea 2014) resonates with these findings in that it conceptualises how independent learning co- exists uneasily in participants domestic and academic spheres with both considered demanding and needing to be actively and constantly managed by them. As such, existing social identities remain important and are not merely jettisoned even though participants desired a new academic identity as an independent learner separate from their existing social relationships. Indeed, the decision to come to university was a major life decision for many participants and allowed them to dream in an ontological way of becoming somebody. However, this dream, although shared by their family and friends, was also circumscribed through a lens of continuing domestic, friendship and the multiple expectations of others. This meant that participants often commenced their journey to learner independence in a state of emotional conflict as independent learning had to be combined with, rather than replaced, their pre-existing domestic and caring activities.

These challenging expectations and the multiple identity context of SMIL are not always explicit in the extant SMIL literature where the ideal independent learner continues to be portrayed as a self-reliant, self- managing autonomous individual unencumbered by domestic responsibilities and multiple role expectations (Leathwood 2006). Marandet and Wainwright (2010) also highlight the popular notion of "choice biographies" to conceptualise the neoliberal decision-making processes expected of undergraduates in relation to all

forms of higher education learning. However, in terms of the findings of this study, it appears to offer limited interpretative value when compared to participants lived experience of multiple domestic responsibilities, expectations and their caring roles.

Instead, difficulties in managing conflicting identities and expectations have been explored more fully within existing research on mature students often through a feminist lens related primarily to student-mothers. Based on her American research Lynch (2008: 595) argues that mature (female) students are often required to engage in a range of complex and emotionally stressful "identity practices" to conform with dominant cultural expectations about what it means to be both a "good" parent, partner, friend and student. Consequently, in the home environment the diligent independent student identity has to become concealed and/or downplayed by the domestic identity of attentiveness and devotion to others, irrelevant of the learning demands of the programme. Archer and Leathwood (2003) similarly identified familial pride, but also unconscious resistance based on implied "irresponsibility" of engaging in study while also having pre-existing social roles. Suggesting that like the participants of this study, independent study was something extra to be fitted in after domestic duties had been completed and with little disruption to the home environment as possible.

Personal sacrifice was therefore a recurring theme throughout participant stories whether it be sleep leisure time, time with friends and choice and timing of study environment. This required complex strategising to fit more into their waking hours and significant amounts of energy to juggle multiples identities and expectations so that domestic life for others was not unduly disrupted. However, participants also felt guilty as their own time was perceived by them as a shared commodity that had also to be given up to the demands and needs of significant others. These findings are similar to those of Brooks (2012) exploring how independent study time in various UK and Danish universities is negotiated by students and those close to them, often at the wellbeing expense of the student themselves.

By making this independent learning challenges more evident, this study highlights that for student nurses the expectation that they will have uninterrupted time to learn independently and will be able to arrange their independent learning around the institutional timetable is problematic and convoluted by their multiple social responsibilities. It also perhaps challenges the many quantitative findings that suggest that student nurses often commence SMIL as reluctant independent learners who are poor managers of their time and tasks (eg Richardson et al 2019). In contrast, this study highlights some of the structural processes and cultural assumptions that shape their SMIL experiences and makes visible the previous invisible nature of domestic commitments in the somewhat traditional context and culture of independent learning conceptualisations within the extant literature. In doing so it paints a very different picture of fortitude, resilience, flexible strategising and personal sacrifice in which learning time was managed not linearly but as a complex web of intricate tasks interrupted by existing domestic demands.

The need for nursing programmes to remain cognisant of this challenging and marginalised social and emotional context in which student nurses feel obligated to respond to the needs of two "greedy organisations" (Kevern and Webb 2004), both of which seek exclusive devotion, loyalty and commitment, is significant. For example, it may be that flexible pedagogies, more asynchronous online learning opportunities and course design to accommodate the life load of nursing students' need to be more fully considered. This might include the possibility of school calendar curricula (Kevern and Webb 2004) and peer support opportunities though the emerging pedagogical field of "flexible social learning" (Ryan and Tilbury 2013) in order to utilise the power of co-curricular learning spaces, social interaction and peer support opportunities as a way of challenging and overcoming existing structural and cultural barriers.

An important component of such flexible pedagogies concerns the role of IT developments in extending HE learning spaces and providing for more dynamic engagement of learners within the university setting, in both physical and virtual spaces. However, as early research findings from the experience of nursing students' unprecedented move to online learning during the recent COVID-19

pandemic and resulting social confinement begin to emerge, further research may be needed to fully understand the identity experiences of UK nursing students' independent learning experiences within more flexible e-learning environments that may continue post-pandemic. For example, Ramos-Morcillo's (2020) Spanish study identified that those nursing students with multiple identities carried a heavier than normal domestic burden, lacked easy access to peer support and experienced increased difficulties prioritising their learner identity as precedence was frequently given to significant others in terms of digital devices, online access and their wellbeing needs.

It may therefore be important for nurse academics to arrange face to face as well as online synchronous and asynchronous discussions with both current and past students. For example, recording short video clips in discussion with existing students who have successfully negotiated their potentially conflicting identities and interpersonal relationships in order to facilitate emancipatory peer support that student nurses have been found in this study to want and need in terms of their independent learning identity. Such findings also serve to reinforce the emotional nature of learning to be independent as this learning for student nurses continues to be circumscribed by existing social and institutional frameworks.

6.3 SMIL as a temporal phenomenon

A significant and unique finding of this study was the SMIL was also experienced by participants as a temporal phenomenon imbued with multiple meanings and fragilities. These multiple meanings reflect participant's increasing attempts to assert control over the often overwhelming emotional ebb and flow of their lived world. For example, time structured nearly every aspect of their SMIL and was referred to – both discursively and linguistically – as either "study time" (independent learning time) or "free time" (emotionally restorative and domestic time). This simple dichotomy of time was not however related solely to time use and objective time measures as much extant literature might suggest. Instead, it was constructed as interweaving and shifting temporal horizons that helped participants regulate and manage their negative emotions and protect their sense of self.

Surprisingly, the extant research is sparse in relation to the concept of independent study time (Timmins 2008; Barker et al 2016). Where it has been empirically investigated, time itself is quantified and conceptualised as both a resource (the need to act on time) and environment (being acted upon and oppressed by time) (Torres 2007). This finite environmental resource perspective is also reflected in the theoretical and policy literature (QAA 2011; Wiersma 2012). The hidden dispositional premise being that if study time proves unmanageable, then the fault lies with the student for not developing effective resource time-management related skills. In other words, time can be managed more efficiently if one is helped to think and act on it differently and more effectively. For example, Salamonson et al's (2011) Australian and Snelling et al's (2010) UK research regarding study time both recommended further research on how and for how long nursing students go about their self-directed studies to assist the facilitation of more effective time management and motivational student practices so that regulatory requirements for study time could be more effectively assured.

However, the findings of this study suggest SMIL as a temporal phenomenon is more to do with learning to regulate overwhelming emotions, than it is learning to manage time as an environmental resource. As such, this implied managerial "time and motion" style recommendation from the extant literature – and the underpinning Cartesian rationalist thinking approach to conceptualising study time as something that is an ontologically stable resource, - while pragmatic and helpful on one level, may also be too narrow and restrictive to fully capture and respond to student's lived experience of SMIL. Based on the data analysed within this study, such recommendations can be considered idealistic and based on a flawed assumption that learning to be independent is a purely cognitive, rational and instrumental developmental process. It may therefore be inadequate for addressing how student nurses actually experience SMIL as a temporal phenomenon and the emotional journey captured in this study. Instead, it is recommended that nurse educators focus more on engaging student nurses in pedagogies of emotion that help them confront integrate and accept (rather than suppress) the negative feelings that the lived experience of SMIL engenders.

6.3.1 Avoidance and distancing

This is likely to be particularly relevant for students who habitually use regulatory strategies that come with a high cognitive and ego depleting cost as exemplified by the participants in this study who frequently used time as a strategy to emotionally distance themselves from their negative emotions. For example, nearly all participants used attentional deployment techniques such as compartmentalisation and procrastination when feeling emotionally overwhelmed. Compartmentalisation, although not explicit in the independent learning literature, is recognised elsewhere as an unconscious psychological defence and avoidance coping mechanism that allows attention to be shifted away from situations that elicit overwhelming negative affect (Gross 2015). However, it also requires intense mental effort to deliberately suppress, rather than confront, negative emotions and accompanying cognitions, while also being subject to powerful "rebound effects." Such, rebounds make negative selfthoughts and emotions increasingly more intrusive, despite efforts to the contrary (Pekrun and Linnenbrink-Garcia 2014). Research by Showers and Zeigler-Hill and (2007) also found that when the self is threatened compartmentalisation was more likely and that rebound and suppression, also led to greater sensitivity to feelings of social rejection and less conscious awareness of avoidance behaviours. Such findings resonate with this study's findings.

Procrastination in academia is a well-studied phenomenon with suggestions that over 70% of students regularly report delay in learning tasks with a corresponding negative and varying impact on academic performance, attrition and wellbeing (Eckert et al 2016; Shaw et al 2016; Steel and Klingsieck, 2016). From a psychological perspective, undergraduate procrastination research frequently points to the pervasive and cyclical influence of intrapersonal processes when seeking to explain why undergraduates repeatedly adopt this self-handicapping learning behaviour (Ferrari 2001; Steel 2007; Cerino 2014). However, while Ferrari (2001) and Steel (2007) identify procrastination as a quintessential failure in emotional regulation, findings from later studies (Flett et al 2012; Sirois 2014) suggest negative self-cognitions may actually be at the

root cause rather than merely a consequence. The argument drawn from their large-scale empirical studies being that the direction of procrastination causality may be reversed with emotional dysregulation being a consequence of self-critical judgements and a threatened sense of self, rather than merely a cause.

While this study did not seek to investigate cause and effect, the findings do lend support to these explanations given the fragmented sense of self and emotional regulation challenges experienced by participants. Strong parallels also exist with the global HE research directly investigating student nurse procrastination which echoes similar emotional dysregulation antecedents and consequences (Abbasi et al 2015; Kim and Seo 2015; Custer 2018). For example, Guo et al's (2019) Chinese study highlighted that student nurses who report low self-efficacy and emotional intelligence (EI) skills, procrastinate more and that difficulty in managing negative emotions, decreased their motivation to refocus.

Since aversive and dysregulated affective and cognitive states appear to cue procrastination in both this study and extant research evidence, it seems pertinent that nurse educators consider how they might promote student nurses' positive emotions and self-affirmations in order to enhance their self-regulation capacity and thus help overcome the temptation to procrastinate. This may be particularly important for the generation of student nurses now entering HE who are argued to be more likely to struggle with pre-existing negative affect and may be unfamiliar with learning from disappointment, rather than just success (Keerthika and Naachimuthu 2018). Recommendation from the wider literature suggest that building self-efficacy as a strategy to strengthen El skills (Guo et al 2019); enhancing emotion-focused coping through therapeutic discourses with peers and faculty (Eckert et al 2016); and interventions to promote selfcompassion (Senyuva et al 2014) may all have merit. Equally for contemporary and future UK nurse researchers this may also be a salient area for more timely empirical investigation since procrastination research with student nurses appears to have been undertaken largely outside of the UK and thus may not fully capture socio-cultural nuances.

A significantly smaller corpus of evidence related to independent learning and EI in undergraduates in general has identified similar benefits (Loyens et al 2008; Macaskill and Denovan 2013). For example, Zhoc et al's (2018) longitudinal Chinese study of 560 first year undergraduates across ten universities used multiple regression to better delineate the empirical relationship between EI and independent self-directed learning. Their results indicate that appraisal and regulation of emotions in the self were associated with greater engagement in independent learning time as these emotional competencies prevented shifts in attention and suppressed distractions enabling a sustained and heightened absorption in the learning process.

In this respect, the formal and scaffolded incorporation of emotional intelligence within pre-registration nursing curricula appears to have some merit. However, while the benefits of EI for both student nurses and independent learning are becoming increasingly well recognised (eg Benson et al 2010; Por et al 2011; Rankin 2013; Sharon and Grinberg 2018), a paucity of robust empirical evaluation of EI curricula within nursing exists with evidence to date being primarily discursive and opinion based. Caution and ongoing rigorous investigation may therefore be needed. Notwithstanding, this does perhaps offer a potential and timely avenue for future independent learning research within UK pre- registration nursing programmes. The timing of which may have significance given that the need for current and future registered nurses to be emotionally intelligent and resilient has for the first time been overtly acknowledged by the Nursing and Midwifery Council (NMC 2018b) in their updated standards of proficiency for registered nurses.

An additional and interesting finding of this study was the way in which students themselves actively attempted to prevent procrastination by embedding time in the creation of embodied products, including aiming for a daily set amount of words on a page; printed academic papers on the desk; and brightly coloured highlighting of text. On one level this can be interpreted as reflecting a rather surface approach to learning fuelled by dominant neoliberal rationalisation where product and outcome related ideals of efficiency, calculability, predictability and control become more highly valued than deep learning

approaches. However, in the context of this study such embodiment of time also appears to be a common way in which instrumental motivation was used to help develop self-efficacy beliefs as these embedded proximal goals helped to develop a sense of ongoing mastery and a belief that more distal goals were in fact achievable. This cognitive shift in temporal orientations away from the present to a more confident future enabled participants to delay their immediate gratification needs, stay focused and thus avoid the cyclical negative emotions associated with procrastination and avoidance coping. Strategies that align themselves with the potent self-efficacy research related to academic engagement and success (Bandura 1997).

Support for this can also be found in the body of research related to delay of academic gratification among the wider undergraduate population that suggests that learner's ability and motivation to delay gratification depends on their time perspective tendencies, ability to regulate negative emotions and most importantly whether they feel positive about future success (Bembenutty 2009; Cheng et al 2012; Lerory et al 2012). Malesza's (2019) Polish study also specifically identified how difficulties in emotional regulation can have a significant mediating role within delayed gratification behaviours suggesting that emotional dysregulation and high levels of negative emotion lead to greater behaviour impulsivity tendencies. While this research did not focus primarily on undergraduates and student nurses, it does echo participant narratives of their own impulsive learning behaviours when feeling emotionally overwhelmed.

It is therefore suggested that nurse educationalists can help build on students' own capability for delayed gratification by facilitating discussions about how they and others confront tempting distractions to help build efficacy beliefs (Bandura 1997). For example, through vicarious experience sharing and discussion of how students might use these same or similar strategies. Ensuring learning activities include exercises that allow students to practice delay of gratification is also recommended alongside formal curricula time to help students both develop an awareness of and regularly clarify their future goals. Explicitly identifying and discussing how specific SMIL activities can help achieve and have relevance to these future goals is further suggested as a

mechanism for enhancing a more future temporal orientation and thus success in gratification delay to help avoid students' sense of "wasted time" and temptations to procrastinate. Facilitative strategies that also include cognitive reappraisal opportunities are also recommended elsewhere in the literature (Lerory et al 2012) where it has been shown that cognitive reappraisal can significantly reduce temptation for immediate gratification among learners through the emotional, behavioural and cognitive benefits of maintaining academic enthusiasm, reducing impulsivity and improved focus respectively.

6.3.2 Replenishing resources

Of equal importance within the findings of this study were participant's temporal and biographical conceptualisations of "free time" as compartmentalised recovery and emotionally restorative time spent away from the cognitive and affective demands of SMIL, particularly once assignments had been submitted. A phenomenon also noted by Bash and Kriener (2014) in their study on student's perception of study time in the wider undergraduate population. While Bash and Kriener (2014) identify, but do not offer an interpretation of this, for participants in this study compartmentalisation of "free time" appeared to have positive regulatory benefits on student emotions and overall wellbeing.

Such findings suggest that compartmentalisation and psychological detachment are not inherently negative within independent learning and these nuances may need to be acknowledged. Nonetheless, research on recovery experiences of students within academic settings is relatively sparse with scant attention given to those of nursing students. However, Taylor et al's (2020) American research into working undergraduate students supports wider findings on work recovery studies (eg Siltaloppi et al 2009; Cheng and McCarthy 2013) indicating that psychological detachment (ie distancing oneself mentally from physical and cognitive demands) has an overall positive meta-analytical relationship with wellbeing and emotional regulation, particular when academic demands were perceived as stressful and emotionally demanding. Findings that not only lend support to this study but also raise implications for nurse educators who may need to build recovery interventions such as the timings of assessment load into nursing curricula to enable essential emotional repair and replenishing of

emotional resources in light of the overwhelming nature of SMIL reported in this study. This is likely to be particularly relevant when independent learning is a new skill to develop and the risk of disengagement due to intense negative affect, is high.

6.3.3 Shifting temporal horizons and self-talk

Time as shifting temporal horizons (Torres 2007) were also captured in other important aspects of participants lived experience of SMIL. For example, when learning in isolation or feeing emotionally overwhelmed, participants also all used self-talk as a key coping strategy when dealing with periods of intense emotional turmoil, fatigue, family discord and/or feelings of fragility that learning to be independent evoked. The many examples of self-talk noted in this study frequently held a strong and dynamic temporal dimension whereby participants cognitively changed their mental orientation from the present to temporarily focus on their future goals or past learning in order to enhance their resilience and avoid procrastination temptations. A finding not explicit in the extant literature to date. Self-talk appeared to be a particularly important strategy as it helped facilitate the process by which participants started to take control of their learning process and to assert a degree of learner autonomy. For example, internal dialogues enabled participants to temporarily distance themselves emotionally and to become more cognitively aware of their inner emotional states. This in turn helped them acquire a more reflective, less self-critical, stance enabling participants to act on, rather than react to, their negative emotions.

These internal voices were also used to offer self-encouragement and led to greater self-understanding of the limits of their current learning approach as well as increasing their self-efficacy and motivation through goal clarification. This emotional and cognitive transformation allowed participants to think more critically, and problem solve with greater clarity without feeling overwhelmed. Consequently, these internal dialogues appeared to have key transformative qualities in that they helped participants start to consider a wider range of emotion, problem solving and meaning focused strategies enabling them to recognise a need for personal change in their learning approach. Ultimately this

led participants to reach out to their intimate peers for help and support and overcome their earlier reluctance. Self-talk strategies therefore appeared to act as an important liminal stage in participant's personal journey to learner independence, particularly as they transitioned from learning in isolation to learning with others.

This reflects a particularly unique finding of this study as currently little is known about the role of self-talk within independent learning trajectories. In the wider psychological research literature, inner speech or self-talk has been shown to have a number of similarly positive academic benefits for undergraduates in terms of perceived control, reduced procrastination and enhanced self-efficacy, resilience and motivation (Sànchez et al 2016; Gregersen et al 2017; Salas et al 2018; Hase et al 2019). A position this study supports. Moreover, a recent Finish study exploring twelve student nurses' phenomenological experiences of blended learning also identified goal directed self-talk as a positive motivational strategy when preparing for summative assignments that further lends support to the findings of this study (Mäenpää et al 2020).

However, this is the first study to identify the influential and liminal role of self-talk within student nurse independent learning trajectories. It is therefore recommended that student nurses be provided with curricula opportunities for and encouraged to develop compassionate and reflective self-dialogues and self-validating thoughts to help them assert control over their learning, particularly at times of emotional arousal since this self-talk appears to signal a significant and particularly salient period of change recognition. Indeed, encouraging self-talk is advocated over compartmentalisation since it appears both in this study and the wider literature (eg Salas et al 2018; Hase et al 2019) to be a less ego depleting and more effective emotional regulatory strategy with greater transformative potential.

However, the findings from this study also suggest that some caution may be needed for students whose self-concept is intensely threatened as this can lead to self-doubt ruminations and fragmented sense of self. It is therefore recommended that student nurses also be helped to learn strategies to reframe

such negative monologues through self-questioning techniques to help them reappraise the validity of their thinking. For example, an American study of psychology undergraduates suggests that providing students with reframing activities in an active discussion-based learning environment, rather than the provision of information within a lecture or virtually, can be effective in helping students learn to self-challenge flawed, catastrophic and overgeneralised self-beliefs and can be particularly helpful for those whose self-talk tends to have a negative or flawed dimension (Hughes et al 2011).

SMIL as a temporal phenomenon, encapsulated within the superordinate theme "the pressure of time," leads me to conclude that future research into time as a significant dimension of learning to be independent will not therefore be advanced simply through quantitative studies measuring time as an objective pedagogical resource, nor through the comparison of student's environmental use of time viz a viz institutional time allocation. Instead, any examination of time needs to look beyond important, but narrow, strategies to improve students' time management skills and focus more on the lived experience of temporality as an emotional and cognitive coping strategy for internal change and transformation.

This study has offered a differing and unique perspective on time within SMIL that has salience for nurse educationalists concerned with how student nurses develop as independent learners. Curricula integration of the embodied and perceived nature of study time as a temporal resource for emotional regulation has the potential to lead to greater and prolonged cognitive engagement and transformation and is also recommended. This includes the facilitation of emotional intelligence; compassionate self-talk and cognitive reappraisal; increased emotion and problem focused coping through therapeutic discourses and vicarious experience sharing with peers and faculty; and the need to build recovery interventions such as the timings of assessment load to enable essential emotional repair. However, while this appears a productive pedagogical direction, further evaluative research may also be needed.

6.4 SMIL as a social phenomenon

The journey to learner independence was also lived by participants as a social phenomenon reflecting participants transition to greater inter- dependence in their lived SMIL experience. Rather than learning in isolation, participants gradually reached out to connect more deeply with their peers. These socially connected experiences were meaningful to participants as it enabled them to more effectively manage and reframe their intense emotions and thus prevent negative affect escalation. Connecting and affiliating socially with peers also enabled the generation of more positive feelings in themselves and others, enabling a greater sense of cognitive control, self-affirmation, and confidence in their independent learning ability. Consequently, participants were able to adopt more deep learning approaches as well as more sustained and volitional engagement in their learning. Ultimately this led to developmental and transformative changes in their epistemological beliefs as well as their ontological self.

While this social context and the inter-dependent nature of SMIL is conceptually acknowledged in definitions of SMIL (eg Thomas et al 2015b), the importance of peers is not always evident in the extant literature related to student nurses independent learning. Consequently, SMIL continues to be quantitatively portrayed as a primarily dispositional rather than social phenomenon with emphasis placed on how instructors might assess, motivate and facilitate student's instrumental skill development, rather than equip them with the skills for effective peer learning. However, in making the social nature explicit the findings of this study offer unique and granulated insights from the perspective of student nurses themselves into the pedagogical mechanisms by which greater independence in learning is achieved and in which affective learning and transformations precede cognitive development and control.

6.4.1 Emotional transformations

Part of the pedagogical benefits of connecting socially with peers was the ability for participants to learn to regulate and transform their overwhelming emotions. Emotional regulation is widely recognised as a goal directed behaviour conceptualised as the ability to influence how one experiences and expresses

emotions in order to achieve desired aims (Gross 2015; Balzarotti et al 2017). Extensive former research on the cognitive consequences of effective emotion regulation, - and in particular the ability to produce positive emotions, - has demonstrated an affirmative and well established link with academic performance and success within all forms of higher education learning (Eysenck et al 2007; Andreotti et al 2013; Balzarotti et al 2017). It is also a key aspect of the self-regulation theory of learning (Zimmerman 1986), albeit this has been investigated mainly within the school rather than the HE environment (Zimmerman and Lebeau 2000).

Within nurse education specifically similar findings have been reported. For example, Casey et al (2011) in their Irish study of second year student nurses undertaking a collaborative and independent peer assessment activity identified that peers enabled learners to better regulate the emotional reactions to the challenges associated with peer assessment and higher order learning. Bingen et al (2020) also reported similar regulatory benefits for the Norwegian student nurses who independently studied in small peer groups when learning to use a flipped classroom approach. Findings of this study therefore appeared supported by both the extant theoretical and research literature.

However, the in-depth nature of this study also offers a relatively unique insight into some of the mechanisms that may be influencing how student nurses actually transform their SMIL emotions in the company of peers that up until now have been largely unrecognised. Gossip, for example, appeared to be regularly engaged in (especially at the start of an informal group study session) and appeared to offer a deeper level of connection, empathy and trust between peers that enabled them to safely disclose, vent and regulate their negative affect with trusted others. Time spent gossiping whether face to face or online was also not conceptualised as "wasted" unless it was deemed to be no longer affectively beneficial.

Prosocial gossip is an emerging area of research that appears to have attracted little attention within nurse education beyond the recognition of gossip's oppressive features within horizontal violence and bullying (Mladineo 2010).

Adkins (2017) argument that gossip has been subject to lexical decline since the Enlightenment period from its positive etymology of a trusted family friend <god-sibbe or god parent>, to trivialised, oppressive and idle rumour mongering may help explain the overall lack of research in this area. However, more recent psychological research has identified a number of positive socioemotional benefits of gossip reflected in this study including the ability to safely vent and de-escalate negative emotions (Dores-Cruz et al 2019); establishing trust and intimacy (Fernandes et al 2017); providing opportunities for social comparison and as a strategy for figuring out complex ideas and concepts (Adkins 2017). Given that much participant gossip centred on perceived injustices of their multiple identities and these in themselves are subject to potent social and cultural forces that are not easy for learners to address, gossip appears to offer a safe and alternative medium for managing and normalising these emotions as well as sharing vicarious solutions.

Thus, while nurse educators themselves may not wish to engage in gossip directly with students, they may wish to provide environments that offer similar regulatory benefits by empathically listening to concerns and encouraging peer problem solving through the creation of empathic, non- judgmental learning environments and peer study groups. Encouragement of ground rules for collaborative learning to ensure the oppressive side of gossip does not interfere with the positive social and emotional benefits may also need to be considered. The findings of this study also suggest that in-class seminar activities that end in students being off-task and engaging in prosocial gossip may also not be as detrimental to learning as might intuitively first appear. Indeed, providing students with additional off-task time may have its merits in helping students self-manage their future independent learning through improved regulation but more research is needed to fully substantiate this.

Emotional regulation in the company of peers was also achieved by enabling several participants to put their overwhelming, but often nebulous, feelings into words. According to Torre and Lieberman (2018) affect labelling is a similarly new line of research inquiry with much contemporary research being experimental, clinical based and neuroimaging in nature.

As such, empirical based explanations remain largely speculative and often conceptual. Notwithstanding, and while some caution may be needed, findings to date do appear to echo the lived experience of participants in this study. For example, naming emotions in an authentic way appeared to help a number of participants to start to escape their negative feelings by shifting their perspective and promoting greater distress tolerance once they named their feelings and realised others felt the same as they did. Findings that are also reported within Marks et al's (2019) clinical research study.

Such emotional granularity – ie the ability to make nuanced distinctions between emotions – has also been associated with affect labelling and greater emotional regulation (Aaron et al 2018). Rationales offered within this emerging body of psychological research suggest that the act of naming emotions helps regulation through the initiation of introspection. The benefit being that this enables cognitive processing of the emotional experience rather than engaging directly with the emotional stimuli (Torre and Lieberman 2018). Lindquist et al (2015) also argue that uncertainty reduction (but not elimination) is likely to be the key process by which affect labelling also operates when feeling anxious and fearful. As such, encouragement to name emotions would appear particularly salient for students given the lived experience of SMIL as an emotional phenomenon.

The facilitation of student's emotional intelligence skills as advocated previously would thus seem helpful given that emotionally intelligent behaviours are associated with accurate recognition and management of emotions (Goleman 1986). There is also potential merit in nurse educators naming and sharing their own academic emotions as well as encouraging facilitative and empathic disclosure of emotions in both tutorial and class alongside curricula opportunities for affective introspection and reflection by students themselves. Given the nature of contemporary practice and the high emotional and cognitive demands on student nurses when learning to become a professional nurse, this would appear to have wider benefits beyond the scope of SMIL.

Equally, when educators share something about themselves, students, including student nurses, not only feel they are dealing with a genuine human being they also feel more positive at being trusted with this information and perceive more equalitarian relationships (Applebaum 1995; Varagona and Hold 2019). Cognitive reappraisal, as an effective (intrinsic) regulatory strategy for positively reframing and reinterpreting emotions is better established in the extant literature related to undergraduates (Balzarotti et al 2017) and was certainly the case for many participants in this study. Research based benefits of this are reported to be the acceptance of difficulties and improved problem solving through an increase in positive emotions enabling greater cognitive flexibility and a reduction in flawed cognitions that often accompany negative affect (Garland et al 2011); increased academic resilience (Tugade and Fredrickson 2004) increased learner engagement (Lerory et al 2012); and low cognitive cost. All of which are recognised as aiding wellbeing, memory, attention and higher order thinking alongside increased self-efficacy beliefs (Gross 2015). A position echoed in Lazarus and Folkman's (1984) influential transactional model of stress in which the importance of cognitive reappraisal in strengthening the perceptions in one's ability to cope is emphasised.

However, a UK systematic review by Galbraith and Browne (2011) found that while cognitive reappraisal interventions alongside mindfulness and reflective strategies consistently helped reduce academic and practice related stress and anxiety among student nurses, this had limited impact on overall academic performance. This suggests that nursing faculty when considering how to incorporate cognitive reappraisal techniques within SMIL curricula may also need to consider how problem focused and self-efficacy techniques may also need to be factored in given their well-established empirical link with improved academic performance (Bandura 1997).

A key theme for participants throughout this study was the importance of feeling a sense of connection and being supported by others. Peer connections helped effective emotional regulation as well as providing a backdrop from which sustained academic engagement, greater cognitive clarity, confidence and reciprocal learning arose. The wider extant literature supports the idea that a

supportive network of peers and a sense of belongingness are important protective factors that help academic resilience, engagement and success in SMIL as they provide a basis for enhanced affiliation and socio-academic capital (Kim and Park 2011; Thomas 2012).

Definitions of SMIL also imply a diffused, but not absolved, authoritative role for nurse educators and thus it is not surprising that participants turned to each other to form social connections as a way of influencing their idiographic learning trajectories. Co-operative peer learning is based on the idea that learning is shaped by human interaction and social cognitions (Boud et al 2001) and reflects a clear social constructivist epistemology of independent learning echoed in this study. Conceptualised as a form of reciprocal and co-operative learning (Boud et al 2001), peer learning also reflects Habermas's (1981) notion of an "ideal speech act" whereby unequal power and domination are reduced enabling trust and mutually supportive connections to flourish. This is arguably important as the transformative learning literature emphasises how discourse and dialogue are in essence social, and relationship constructs which precede cognitive engagement and perspective change (Mezirow 2003; Taylor 2009). Boud et al (2001) also highlight how peer learning focuses on learning, rather than teaching which can, if too prescriptive and didactic, detract from learning transformations.

Given the potential transformative qualities of peer learning through feelings of connection identified in this study and echoed in the wider literature, it is recommended that nurse educationalist formally consider embedding peer learning opportunities within their curricula as strategy for SMIL facilitation. With the massification of contemporary HE and ever greater demands on faculty, peer learning offers the opportunity for student nurses to learn from each other. However, as highlighted in Sohn's (2016) doctoral research investigating student experiences of learning with their peers in a US higher education context, peer learning success is also dependent on the pedagogical atmosphere created by faculty in the class setting as students continue to place onus on faculty to create a safe and stimulating class climate which they then transfer to their own peer learning.

Based on his findings Shon (2016) argues that for peer learning to be truly transformative this atmosphere ultimately needs to be nurturing so that it engenders feelings of emotional safety and trust. It also needs to promote feelings of connection between students and emphasise mutual exploration to enable students to be honest and value challenging dialogues and questioning when transferring this to their reciprocal peer learning. Nurse educationalists thus need to remain cognisant of their ability to role model the type of cooperative and reciprocal learning they wish to engender in students and emphasise to students the interdependent and social dimension of learner independence as identified in this study.

Collaborative peer learning and a sense of connected intimacy were also forged for participants through expressed feelings of gratitude to their peers that went deeper than merely offering a personal "thank you." Wilson (2016) defines gratitude as the ability to recognise and appreciate the benefits received from others and a desire to reciprocate with positive actions without feeling unduly indebted. Contemporary gratitude studies are a key area of positive psychology research in which gratitude has been linked to academic resilience (Seligman et al 2009; Kong et al 2015; Wilson 2016;), wellbeing (Lin 2019) and helping relationships (Lee et al 2019; Lin 2019) through a number of intra and interpersonal processes that facilitate positive social connections and affiliation. Algoe's (2012) find-remind-bind theory of gratitude, for example, draws attention to the way in which gratitude reframes negative emotions (which focus attention on threats and barriers), to refocus more positively on appreciating and acknowledging the benefits and help others can provide. Witnessing gratitude has also been shown to have benefits in terms of greater affiliation and building of social networks (Algoe et al 2019).

Gratitude and its relationship with nurses independent learning appears in the qualitative, rather than quantitative literature. However, this may be because the latter can inadvertently corral student responses in pre- determined ways and gratitude itself is not yet well explored in the nurse education literature.

Expressions of gratitude do however appear to have helped Taylor's (1986)

Canadian students repair their disrupted assumptive world views through

greater benevolence and promotion of the self as worthy. Both Hewitt-Taylor (2001) and Lunyk-Childs (2001) research highlighted similar peer gratitude benefits that helped them develop more positive feelings towards independent study in much the same way Froiland (2018) found in his American study with psychology undergraduates. All of which lend further support to this study.

Given the multiple pedagogical benefits of gratitude illustrated by participants and the wider research evidence, developing gratitude practices and appreciations would appear to be a useful, inexpensive and creative focus for reflective activities to assist in the facilitation of SMIL whether part of faculty role modelling, awareness building exercises and/or as a focus for reflective assignments. For millennial students who often prefer multitasking and instant gratification to introspection and focus, this may hold particular salience in developing their independent learning approach as they may be entering higher education without a strong sense of investment and responsibility in their higher order learning (Miller and Mills 2019).

6.4.2 Cognitive change and control

Ongoing collaborative dialogue and a social connection with peers consequently enabled a conceptual change in participants learning approach as with increasing trust, they began to synthesise and test out ideas and arguments with each other. This conceptual and more confident exchange of peer review led participants to develop greater cognitive control once they had gained the necessary emotional control over their exigent emotions. This ability to think deeply and critically - ie to take nothing for granted and continuously engage in the process of analysing, synthesising and revising ideas in order to appreciate and internalise their complexity, value and limits – is itself a key aim of independent learning (Çelik et al 2012; Thomas et al 2015a). For student nurses entering the complex and uncertain world of professional practice, critical and deep thinking are similarly argued to be essential skills to cope with an unknown future.

Notably within the findings of this study, peer review and feedback, - as mechanisms for a more critical and deeper learning approach, - appeared

significant. Both were framed as iterative dialogical processes in which greater cognitive engagement in the learning process started to be played out and formatively rehearsed. The premise that dialogue is fundamental to both higher order and independent learning is of course well established in the higher education literature. As noted previously, it forms a key basis for both transformative learning theory – whereby transformed frames of reference first require participation in critical- dialectical discourse (Mezirow 2003) – and epistemologically reinforces the social constructivist nature of SMIL (Vygotsky 1978; Morrison 2011).

Similarly, Laurillard's (2002) influential "conversational framework" in which four key characteristics underpinning effective dialogue are identified, also offer an interpretation of participants lived experience of this feedback process. For example, in comments related to knowing what one wants to write but not always being able to find the right words to express these as well as how peer dialogue both clarifies thinking and stimulates further critical thought arguably reflects these dialogical characteristics of adaptive (ie contingent on student need); discursive (ie rich in two way communication exchanges); interactive (ie linked to actions related to a task goal) and reflective (ie encourages reflection on and in action in order to stimulate an inner dialogue).

Based on these findings it is therefore recommended that nurse educators consider opportunities for peer feedback and review within curricula in order to enhance student discursivity and enable iterative and extended dialogues within the independent learning process, both in and outside of the formal class setting. As a group activity this also allows students to engage in feedback from a wide range of perspectives to enable transformation in their thinking and learning approach. However, when considering this a number of important factors may also need to be considered. For example, the extant literature also suggests that peer feedback and review are not always welcomed by student nurses. Duers and Brown's (2009: 656) qualitative research study evaluated Scottish student nurse's experiences while engaging in, primarily written, peer review processes concluded that these experiences can be experienced negatively with some participants going as far as to describe the experiences as

"being torn to shreds." Ecclestone and Pryor (2003) also noted in their own wider tertiary and undergraduate research that negative experiences of peer feedback can lead to disengagement and even withdrawal from the learning process as the experience can potently threaten the fragility of the adult learner's self-concept. This therefore suggests that student nurses may need to be prepared and assisted to consider how their peer feedback can be constructive and sensitive to human qualities that tactfully promote, rather than challenge, the self.

Of equal significance may be that much existing research has tended to investigate peer feedback embedded within high stakes summative assessment practices with a focus on written feedback and as a unidirectional monologued message or delivered product (Nicol 2010; Ibrarra-Sáiz et al 2020). This is likely to be more threatening and can easily undermine the iterative benefits of dialogical peer review identified in this study. For example, participants in this study conveyed their peer feedback in an oral rather than written discourse, often in a study group setting and emphasised relational and trustful dialogues, not just analytical and point-counterpoint-point dialogue. This medium and context enabled rich dialogical exchanges, clarifications and iteration from multiple perspectives that helped participants ask their peer reviewers immediate questions as well as discuss their interpretation of this feedback in a trusting, psychologically safe and reciprocal manner, all within an equalitarian power structure.

It also appeared to help challenge their previously held dualist epistemologies (Perry 1970) in that they were able to learn that quality assignments were not restricted to a pre-defined format but instead open to multiple interpretations and possibilities. All benefits highlighted by both Rowntree (1987) and Nicol (2010) who argue that peer feedback only begins to be useful when there are adequate reflective and psychologically safe opportunities for this to be analysed and discussed in order to reduce the gap between feedback given and feedback used.

With the increasing massification and diversity of higher education the ability of nurse educators to provide individualised oral feedback in a tailored language that individual students ideographically understand is increasingly limited. Capitalising on the oral peer iteration of feedback exchanged in a group setting would therefore appear to have merit, particularly in helping students actively construct their own learning and challenge pre-existing epistemological beliefs.

Moreover, research by Nicol et al (2015) as part of the University of Strathclyde PEER (Peer Evaluation in Education Review) project and undertaken across two Scottish universities demonstrated that constructing peer feedback can paradoxically be more powerful for the construction of learning than being peer-reviewed, although a combination of both multiplies the benefits. The rationale being that formulating evaluative judgements, taking on the role and responsibilities of the reviewer and making these discursively transparent is a proactive cognitive process that requires an important inner and critically reflective dialogue that can be a potent way of helping students become more detached and critical of their own work. Similarly, learning to trust one's own evaluative judgements within peer feedback helped the participants in Ibrarra-Sáiz et al's (2020) Spanish study to become more motivated to be a protagonist in their own independent learning.

The importance of these inner or self-dialogues also helps explain participants changing and more positive attitudes to thinking time within their developmental journey to independence. As explored previously, study time that failed to produce a tangible product was frequently reconceptualised as "wasted time" when learning in isolation. However, through affiliated social connections and peer dialogue, participants came to value individual thinking time for its reflective and academic benefits. This finding is in harmony with Berger's (2004) research in which she found that collaborative peer dialogues can help empower learners to not only internalise and own their transformed ideas and perspectives but to also identify their "edge of meaning." For Berger (2004: 338) "edge of meaning" was conceptualised as the space where individuals can "come to terms with the limitations of their knowledge and thus begin to stretch

those limits." For the participants in this study, it also hallmarked a change in their ways of knowing and appeared to reflect personal epistemological growth from an earlier dualist to an increasingly more contextual relativism and precommitted position (Perry 1970).

To assist in this epistemological movement and to capture students changing beliefs about knowledge as they begin to develop greater cognitive control (and thus begin to value thinking time), nurse educationalist may need to ensure the increasing use of Socratic questioning, critical reflection and peer dialogue within their facilitations. For example, spending a few minutes at the end of class to pose such questions as "what one question still remains for you?" may also have value in stimulating self-dialogues that respond to this increasing learner maturity and cognitive control.

For participants, peer feedback and dialogue also appeared to be an important pre-cursor to enable participants to absorb themselves in their independent learning with confidence and to trust their own emerging self- dialogues. The repeated use of, - and pride in, - the phrase "getting in the zone" reflected greater attentional control and alongside this an intense state of sustained concentration or "flow" that had previously eluded them when overwhelming emotions and regulatory difficulties dominated their lived experience. It also reflected an emerging transformation from extrinsic to more intrinsic motivation in which volitional learning and an increased sense of control and ownership over their learning began to emerge alongside greater periods of academic engagement once a social connection with others had been achieved. As such, time spent "in the zone" was the antithesis of earlier conceptualisations of "wasted time."

Csikszentmihalyi 's (2002) flow theory provides an appropriate and pioneering conceptual framework from which to interpret these findings and to better understand how student nurses proactively engage in their SMIL alongside the factors that may influence this as they journey along their independent learning trajectory. Together they also have the potential to offer an alternative, and arguably more student-centred pedagogical understanding of the extant

quantitative literature related to student readiness to engage in their SMIL. For example, in this extant research both UK and international student nurses were found to be less prepared initially due to role ambiguity (Pryce-Miller 2010), lack of structured support (Senyuva and Kaya 2014) and a reduced sense of belongingness and esteem (Kim and Park 2011).

Flow – or its synonym "optimal experience" (Løvoll and Vittersø 2012) – is a subjective psychological state people report when they become completely immersed in a task to the extent that they lose all sense of time and awareness of both their actions and the cognitive effort involved (Csikszentmihalyi 2002). For the participants of this study not only did this enable deep learning to occur it also provided a much-needed respite from previous overwhelming emotions which in turn enabled them to replenish their cognitive and motivational reserves as well as help sustain a positive self-concept.

Although nurse education has to date been ambivalent towards the explanatory value of flow theory, similar findings to those described by participants are also reflected in international research related to academic engagement and flow states among the wider undergraduate population. For example, Kim and Seo's (2013) large scale survey of Korean undergraduates found a significant positive relationship between flow state, deep learning and academic achievement which enabled students to reframe their self-conscious academic emotions more positively. This in turn enhanced and self-reinforced their intrinsic motivation and resilience, all of which were valued in much the same way as participants came to value flow states in this study. Similar findings are echoed by Moore (2013) who found that flow state in his sample of US undergraduates was also an expression of emerging Eudaimonic wellbeing and academic flourishing, itself a key aspect of the ontological basis of SMIL (Rogers 1961; Elliot 2006).

Based on the interpreted findings of this study, the facilitation of students' flow state clearly has multiple benefits for both faculty and student nurses and may therefore be a focus for future research endeavour. While not previously studied within an independent learning nursing context nor mentioned explicitly in the

related theoretical literature, it does arguably reflect the ultimate "sine qua non" of learning to be independent. Indeed, Steele and Fulagar (2009) propose that a strong theoretical and empirical link between autonomy and flow exists as flow, by definition, is a self- determined motivational state (Deci and Ryan, 2000). As such, a number of core conditions exist for flow state to be achieved including clear goals, immediate feedback and a balance between the academic challenge and academic skills to achieve the goal (Csikszentmihalyi 2002; Steel and Fulagar 2009). Thus, while the recommendations of this study to date have argued for a change from a traditional focus on SMIL preparation of technical "study skill" instruction to an emphasis of developing student's emotional regulatory skills, the findings also highlight that the former still has relevance in helping students to become independent learners, albeit in combination with emotional capacity building facilitation. For example, Rogatko (2009) and Steel and Fulagar (2009) all empirically noted that flow requires a balance between academic challenge and the technical skills necessary to accomplish the challenge. Thus, a task that is too challenging evokes negative affect and procrastination, while a task too easily achieved evokes boredom and apathy, both of which work against the achievement of a flow state and sustained engagement in SMIL.

Consequently, it is important when facilitating independent learning for nurse educators to create learning opportunities that are academically challenging but commensurate with students' skill level and zone of proximal development (Vygotsky 1978). This may therefore need to involve collaboration with institutional learning support services to ensure a balance between academic skill and challenge is achieved. Since the regulation of emotions precedes cognitive flow state in this study it is also recommended that faculty scaffold independent learning tasks so that tasks that require less intense periods of concentration or flow are initially introduced with more complex tasks delayed until emotional competency is enhanced. Equally, course work tasks need to also support optimal autonomy while at the same time offering clear and unambiguous goals as well as the opportunity for regular peer and faculty feedback in and outside of the class setting as previously recommended.

The valuing of solitude during increasing experiences of high flow states were also a key finding of this study occurring towards the end of their programme and reflecting a reframing of the learning context by participants whereby learning alone no longer felt lonely. Achieving flow state and solitude therefore illustrate a transformative journey through the perception of "wasted time" at the outset to a need to feel a sense of space and thinking time to problem solve during SMIL. Solitude and flow therefore became meaningful for deeper thought and contemplation to enable student's inner more confident voice to become audible to them in line with their changing epistemological beliefs. In other words, learning alone became a positive state of peaceful and restorative reflection and dialogical engagement with themselves. Conditions that are in themselves prerequisites for both flow (Csikszentmihalyi 2002) and transformative learning in general (Mezirow 2003). However, the ability to be alone for solitary dialogue and learning was a precious commodity for the student nurses within this study and difficult for many to achieve in their home environment given their lack of established academic capital and habitus (Bourdieu 1977) and their multiple social roles.

A further recommendation is therefore aimed at HEI's themselves in terms of both the design and provision of physical learning spaces for both collaborative group and solitary independent study based on students lived experiences. Indeed, the evidenced based understanding of the intersectional relationship between space, technology and pedagogy in effective learning design is an emerging field of inquiry in order to meet the needs of the 21st century learner (Ellis and Goodyear 2016). However, while much empirical focus is on the needs of the digitally native cohort now assumed to be entering higher education (Ramsden 2011; Riddle and Souter 2012; Ellis and Goodyear 2016), the findings of this study suggest that physical spaces for collaborative human contact and solitary learning (that enables natural light and contact with the wider social world) remain salient irrelevant of student nurse's digital skills.

Moreover, Kennedy et al's (2008) Australian research tested the hypothesis that students can be regarded as digital natives and found a lack of homogeneity in student's learning technology skills beyond the basics despite the ubiquity of

technology across much of their life span. A position anecdotally supported by my own observations. Riddle and Souter (2012) have also challenged the premise that students themselves have fundamentally changed as a result of a more technologically rich environment, echoing the findings of this study in highlighting the emotional as well as cognitive nature of higher order learning on adult's academic identity and sense of self. They also go on to argue that current practice too often ignores student perspectives and at times an overly dominant focus on technology, reproduces a physical environment that is familiar but less suitable for active, peer and solitary independent learning in and out of the traditional class setting.

The findings of this study also indicate that as student nurses progress in socially connected ways through their independent learning journey they increasingly develop a sense of mastery and belief in their own ability to learn independently. This change in cognitive beliefs is not instantaneous but increasingly develops with greater emotional regulation, flow and transformative peer dialogue and review in a range of idiographic timescales. Nonetheless, what is shared is the way in which a greater sense of mastery reflects a transmutation of personal hopes, SMIL goals and intentions into an increasing belief that they have some control over their independent learning and could succeed if they regulated their emotions, achieved flow and persisted despite perceived obstacles and setbacks. In doing so it transformed their independent learning aspirations into repeated and intrinsically motivated actions. This allowed the necessary emotional repair to be achieved and if necessary, a temporary return to an earlier socially connected stage focused on emotional regulation and reframing, rather than cognitive engagement, without a personal sense of failure or helplessness that was a hallmark of their earlier lived experiences.

In the higher education literature, the concept of self-efficacy or mastery has been conceptualised as an individual's subjective beliefs about their personal ability to assert control over task demands and to mobilise the affective, cognitive and motivational resources needed to achieve this (Bandura 1997). Bandura (1997) whose seminal and influential ideas of self-efficacy developed

from his larger canon of work related to social learning theory empirically argues that self-efficacy is not a fixed dispositional ability but rather a generative cognitive capability that can be learnt and self-reinforced in a social learning context in much the same way as participants in this study demonstrate. Moreover, a central tenet of self-efficacy is that beliefs about personal efficacy are key factors in determining success in a given situation, more so than technical skills per se (Scholz et al 2002).

As a pedagogical concept, self-efficacy has also been intensively investigated and in doing so argued to have significant protective factors correlating with a wide range of positive academic and holistic health outcomes for both student nurses and higher education students in general. For example, within the extant literature self-efficacy has been found to enhance the promotion of cognitive strength and resilience in student nurses (Taylor and Reyes 2012) and undergraduates (Schwarzer and Warner 2013); reduce learner procrastination (Klassen et al 2008); improve academic achievement (Pitt et al 2012); and subjectively increase a sense of Eudaimonic wellbeing (Roddenbury and Renk 2010; Priesack and Alcock 2015).

A key strategy participants used in developing their self-efficacy beliefs was the sharing of their successful SMIL experiences and strategies with each other. This closely echoes research recommendations by Bandura (1997) who posits that the vicarious experiences of people perceived as similar to oneself act as an important source of interpreted social information and role modelling that increases individuals' belief that they too possess the capability to succeed at a comparable task. Essential to this was the way that participants positioned themselves with peers who they felt were accepting, supportive and who gained similar assessment grades. This appeared to help them focus less on extrinsically motivated performance goals and tap into and develop their intrinsic mastery motivation. Such decisions also helped participants maintain a positive sense of self since it arguably reduces the gap between their actual, ideal and ought dimension of the self (Higgins 1987). These findings are likely to be of interest to nurse educators concerned with the provision of a responsive student centred SMIL pedagogy related to self-efficacy and

independent learning. For example, in ensuring an increasing, but flexible, opportunity for students to self-select their peer learning group in an informed and contemplative manner.

The increased self-efficacy achieved through the sharing of vicarious experiences also enabled participants to confidently start setting their own learning goals by breaking tasks down into smaller more manageable tasks based on their own trust in their inner voice. Bandura (1997) identifies mastery (ie successful) experiences as the single biggest influence on self-efficacy beliefs as they provide the most authentic evidence that one is capable of both succeeding and effectively mobilising the necessary resources for this. As such, success is argued to build increasingly robust beliefs in one's personal efficacy. For participants, the breaking down of tasks into smaller learning goals thus provided them with multiple opportunities for success alongside reflective peer opportunities to interpret this as each smaller goal was achieved. This approach also reflects Bandura's (1997) premise that repeated practice is also a compelling influence on mastery experience since it forces individuals to engage in the chosen task, to evaluate their own performance and to develop a positive mind set. The replication of these strategies by nurse educators therefore appears to have salience and likely to be both flexible and inexpensive across a range of contexts.

For example, in encouraging Socratic questioning and class and peer dialogue related to possible ways in which independent learning and assignment tasks can be broken down into more manageable chunks. In the earlier stages of students SMIL journey this may involve the indirect sharing of past student's successful strategies and non-directive questions seeking student's opinions of why they think it might have worked and how they might adapt these to their own life world situation. As student's progress they are likely to require less prompting as they will have gained a wider portfolio of lived experiences on which to draw.

Equally, the diagnosis of learning needs and the setting of individual learning goals are key constructs of Knowles (1975) much quoted definition of self-directed learning. For the student nurse participants in this study this was only able to be authentically achieved once they had journeyed some significant way in their independent learning experiences and gained a range of skills and beliefs that could make this possible. For many participants this equated to their final undergraduate year. However, for the participants to set their own learning goals with confidence they had to first learn to effectively regulate their emotions and to connect socially with others to enable them to begin to cognitively and actively engage in the process of learning independently, assisted by peer dialogue, review and an emerging trust in their inner voice.

Thus, while Knowles (1998) ideas about independent learning have been much challenged in both this thesis and the wider literature (eg Brookfield 1986), the findings of this study would suggest is that what Knowles (1998) definition captures is a description of student nurses towards the end of their undergraduate independent learning journey (ie when they are a more skilled and/or experienced independent learner) but not one that fully captures the students own lived experience and process of learning to gain the necessary affective, cognitive and relational resources to achieve this. Given the multiple misunderstandings captured in this study between nursing faculty who are likely to be influenced by Knowles (1998) influential ideas and the lived world of student nurses who participated in this study, it is suggested that nurse educators may wish to avoid unthinkingly adopting Knowles (1998) popular ideas within their curricula design and pedagogy. Instead, nurse educators may wish to consider alternative definitions akin to the one used in this report (Thomas et al 2015a) which appears to offer a more student-centred pedagogical perspective more closely aligned to students actual lived experience of learning to become an independent learner.

6.4.3 Developing new pedagogical meanings and beliefs

Developing a sense of coherence captures the ultimate stage in the journey towards independence in learning narrated by participants in this study, all of

whom reached this at different stages in their undergraduate programme. Developing a sense of coherence therefore reflects a developmental stage when participants idiographically moved from an increasingly confident belief in themselves as an independent learner to becoming a central character in the construction of their own learning as SMIL began to make sense, become manageable and personally meaningful. This theme captures a period of epistemological and ontological transformations in which participants begin to repair their disrupted assumptive world views alongside a desire by some to hear their own authorial and evidence-based voice within their learning tasks. As such, it reflects the transformative nature of SMIL in so far as there is a change in how participants sense of self, others, authority and knowledge are understood. For example, during this phase participants narratives qualitatively and conceptually altered from describing experiences on seeking validation as themselves as worthy undergraduates to seeking verification of the robustness of their developing arguments and ideas alongside the identification of any fallacies inadvertently made.

This has obvious implications for nurse educators who while still needing to ensure a psychologically safe learning environment of independent learning, may also need to engage students more in argumentation and critical discourses related to the content of their learning as they become more experienced and competent in their SMIL. Assessment tasks may also need to reflect this higher order thinking ability and developing sense of coherence in order to challenge students to maintain a flow state given their greater academic skill.

A greater sense of coherence also resonates with the qualitative findings of Taylor (1986: 64) and in her analytical interpretation of Canadian graduate nurses lived experience of SDL in a class setting as they progressed towards a period of what she termed "reorientation." Reorientation reflected a phase developed over time in which her participants lived experiences and ideas of independent learning were synthesised into a perspective. This perspective in turn produced a profound conscious acknowledgement in her participants that learning was a process in which they now recognised they were the actors.

Interestingly, Taylor (1986) goes on to argue that this re-orientation phase is followed by a period of equilibrium in which this newly recognised learner agency is applied, refined and consolidated by learners. While both Taylor's (1986) and this study identify a series of sequential, and broadly similar, psychosocial phases to the process of learning to be independent that are common to our unique sample populations, no such equilibrium phrase was explicitly identified in this study. The differences may be cultural but may also be accounted for by the nature of the learner since Taylor's (1986) participants were all graduates and the fact that her study was longitudinal in nature. Her findings and methodological design do however raise the potential utility of future longitudinal research in further exploring the lived experienced of UK student nurses beyond graduation.

Antonosky's (1987) sense of coherence framework also lends theoretical support to this study's findings. A sense of coherence is portrayed as a psychological strength in which a range of internal and external resources — what Antonovsky (1987) terms General Resistance Resources or GRR's and including resources such as social support and affiliation, emotional regulation and coping skills, ego identity and motivated commitment, - assist people to flourish in the face of adversity and uncertainty. According to Antonovsky (1987) a sense of coherence is determined by three major constructs namely comprehensibility (ability to make sense of one's internal and external world and to understand it as structured and predictable); manageability (the development of sufficient resources to meet demands); and meaningfulness (demands hold personal meaning and are worthy of engagement and investment).

Developing a sense of coherence has also been the subject of research with regard to both student nurses and undergraduates in general (eg Ando et al 2011; Majerníková and Obročníková 2017; Shankland et al 2019). For example, Salamonson et al (2016) quantitatively examined the relationship between Australian nursing students' sense of coherence, self-regulated learning and academic performance in their first year of their three-year degree programme. They found that a high sense of coherence was predictive of higher academic grades since these students were motivated to learn, willing to engage in class

and peer dialogue and frequently used a wide range of problem, emotion and meaning focused coping strategies. All of which provide support to the many qualitative findings of this study and the resulting recommendations offered. Indeed, it is further recommended that nurse educators consider how positive psychological constructs such as sense of coherence can be incorporated into curricula design to facilitate and respond to the needs of student nurses during their journey to greater learning independence, particularly in response to learners emerging autonomy and skill.

6.5 The contributions of this study to what is already known

The findings of this study resonate and lend support to what is already known in the extant, mainly qualitative, research literature regarding the student experience of independent learning. For example:

- Participants experienced difficulty articulating a precise SMIL definition beyond preparation and elaboration of class contact and summative assessment study time (eg Hewitt-Taylor 2001; Thomas et al 2015a; Thomas et al 2015b
- Participants were surprised by the extent of personal responsibility they bore for their own learning as they commenced their SMIL journey placing high value on the certainty and binary nature of knowledge alongside the expectation that this would be transmitted to them by experts (eg Lunyk-Child et al 2001; Hewitt-Taylor 2001; Thomas et al 2015b)
- The journey to becoming an independent learner begins with negative feelings of confusion, frustration, reduced self-esteem, challenged identity and dissatisfaction but ends with increased self-efficacy through a developmental and transformative process of learning (eg Taylor 1986; Lunyk-Child et al 2001; Hewitt-Taylor 2001; Thomas et al 2015b).

6.6 The new insights that this study offers

This study offers important new findings and phenomenological insights in a number of ways:

- It extends what is already known to highlight that negative emotions can overwhelming permeate the lived experience of students journey to learner independence beyond the transitional period of starting higher education and the newness of independent learning.
- It uniquely found that nurse academic's framing of learner dependence was influential in participant's emotional experience of SMIL and that academic staff may themselves need support to respond to student's emotional needs as learners in order to effectively facilitate student nurses' SMIL.
- This study also offers new insights into how participant's increased emotional literacy and regulation skills, facilitated by supportive peer connections, acted as important antecedents to learner engagement and a new understanding of what it means to be an independent learner
- Self-talk strategies act as important and yet up until now unrecognised liminal stage in the journey from dependence to independence in learning as they help student nurses to recognise a need for change in their learning approach and in doing so help them take control of their learning.
- Previous studies related to study time use by students have attempted to quantitatively measure time spent on independent learning, but these findings suggest the phenomenological framing of time and temporality by students also acts as an early attempt to regulate and manage overwhelming negative emotions. Therefore, students may only identify study time as a retrospective activity and whether it has been effective in regulating their negative affect.

6.7 Summary of chapter

This chapter has offered a discussion of the interpretative phenomenological analysis of the lived experience of SMIL from the perspective of thirteen adult nursing students in one UK University. The aim being to identify what mattered to them and the meaning they attached to these experiences so a more responsive SMIL pedagogy can be developed. Ongoing analysis, synthesis and discussion of these idiographic and shared findings with the extant literature and theory clarified these findings and both confirmed and added to what is already known about SMIL and learning to be independent by undergraduate students and student nurses in particular. These findings therefore both support but also offer new phenomenological insights and interpretative understandings to build on this existing canon of literature and knowledge base related to how adult student nurses develop from dependence to independence in their learning.



7.1 Overview of the project

This study contributes to the academic understanding of SMIL from the perspective of UK adult student nurses and how this is both lived and is made sense of by them. This chapter draws the research project to a close by first offering a concluding commentary on the research findings before turning attention to the implications of this for the future. In doing so recommendations are made for policy makers in both the HE and post 16 sectors, universities and student support services, programme teams and nurse educationalists as well as students themselves. The premise being that to enhance the facilitation and learning of SMIL within a future more responsive and student-centred pedagogy, will require contributions from everyone involved and change needs to occur at the personal, cultural and structural levels.

However, like all research studies, this research is subject to limitations as well as strengths. Smith et al (2009) argue that decision making transparency and reflexivity are the best defence against accusations of IPA methodological bias and therefore I have aimed to be transparent and explain my rationales throughout this thesis. However, this chapter highlights a number of specific limitations and strengths to help the reader more accurately evaluate the coherence and helpfulness of this study. The chapter then concludes with recommendations for future researchers

7.2 Conclusions

Against a background of unprecedented change in nurse higher education and a desire to empathically understand the student perspective, this study adopted an interpretative phenomenological analytical approach to examining the lived experience of student managed independent learning from the perspective of thirteen UK student nurses in one UK university. The study's chosen methodology therefore focused on the phenomenological and idiographic lived experience of their journey and involved a close and evolving examination of the phenomenon as it is lived by the participants in their specific and

contextualised world. This lived experience was understood and given meaning using co-constructed hermeneutic interpretation and engagement for which my reflexive historicity and fore structure of understanding were influential. It therefore contributes to the existing body of knowledge related to undergraduate independent learning experiences through an interpretative constructivist paradigm.

In doing so, this study illustrated that SMIL, for the participants involved in this study, is a complex emotional, temporal and social phenomenon. It is lived as an emotional and fragmented journey in which student nurses must first learn to regulate and reappraise overwhelming emotions in discursive and authentic relationships with the self and others as only then can student nurses effectively learn how to be autonomous and independent in their learning. It also illustrates that student nurses use temporal self-talk and their own historicity to draw on peer resources to help them effectively regulate their emotions on their journey to independence in their learning. This study therefore finds itself located at the intersection of one established area of inquiry, namely undergraduate independent learning, and one growing area of inquiry, namely the role of emotions within higher education learning. It also demonstrates that the experience of SMIL not only leads to pedagogical and epistemological transformations for student nurses but also ontological development.

These findings therefore challenge traditional ideological discourses of adult independent learning as a purely technical and cognitive learning experience for student nurses since these deny the complex affective, temporal, socially situated and relational elements at the centre of students own lived experience. In particular these findings challenge the discursive framing of dependence embedded within traditional, often-reified, theoretical stance of SMIL as being dispositional and characterised by personal deficit. This study also raises questions about how well- prepared nurse educationists might be to respond to this more student centred and affective interpretation of SMIL within the theory dense, instrumental and externally regulated nursing curriculum.

This new understanding therefore requires a paradigm shift within the facilitation of SMIL from one which is no longer solely focused on the development of technical study skills and supportive resources, to one in which the development of student's emotional intelligence, social relationships with academic others and their life world are prioritised as these act as influential precursors for and important influences on their active independent learner engagement as well as their pedagogical skill development. This is essential for all those with an interest in assisting student nurses to develop as both independent learners and people, and who care about the type of nurse that will face the unprecedented life-long learning challenges of twenty-first century health care.

The findings and conclusions of this study are grounded in the participant own stories and reflects granulated lives as they are lived and the context in which this takes place. They also reflect my own co-constructed hermeneutic engagement and unique reflexive fore structures of understanding and historicity that made sense of and gave meaning to the participant narratives. While it is recognised that as an interpretative phenomenological study it is not generalizable in a quantitative sense, it may have wider relevance and transferability to inform and enlighten the future practice of students, nurses, nurse educationalists, university leadership teams, university support staff, policy makers and researchers involved in the development of student nurse independent learning. This study has the benefit of illuminating student nurses' own voices and experiences in the context in which their lives are lived, but it also means that these voices and experiences must be heard and actively listened to by others. As such, a number of implications are identified from this study.

7.3 Implications for HE and post 16 policy makers

Student nurses start HE with clear expectations of SMIL influenced by preexisting schemas of teaching, learning and education. However, the discrepancy between these and the reality of their lived experience is a significant source of overwhelming negative affect that dominates early SMIL experiences and prevents deep engagement in their learning. Part of the solution arguably lies at both the pre-entry and post- entry stages as expectations are formed in prior educational experiences and thus cannot be tackled by higher education alone. As such, this research recommends more effective communication and dialogue between secondary, further education and HE institutions so that a more effective bridging structure can be facilitated to enable scaffolding of student nurses understanding of HE academic expectations in advance of their programme start. It also recommends that preentry students are provided with increasing opportunities to learn independently as part of their existing curriculum. For example, A-level students being encouraged to undertake an Extended Project Qualification and Access to HE students undertaking a similar independent project in their final year with the opportunity to reflect on the learning process. To support this, it is recommended that HEIs be encouraged to provide access to resources to support this including a library access scheme and access to relevant researchers and experts in the field.

It is also recommended that the post-16 policy makers consider a wider range of pedagogies within curricula that rely less on recall and repetition and more on deeper understanding and meaning as well as supporting increasing autonomy and independence through opportunities for facilitated reflection, peer learning and dialogue alongside greater self- understanding by the learner prior to HE entry. Of significance within this would be an emphasis on building students' emotional competency.

Given that an essential purpose of independent learning is that students should become protagonists in their own learning and the multiple benefits of peer dialogue identified in this study, it is also proposed that HE student ambassadors might be encouraged to participate in awareness raising sessions in local pre-entry institutions to help explore how independent learning in HE contexts differs and the sharing of their own and others vicarious experiences of successful strategies and challenges.

In terms of higher education policy itself, the voices heard in this study have potentially much to contribute to the Teaching Excellence Framework (TEF) (Department of Education 2017) in terms of offering a more nuanced view of student nurse's actual lived experience of independent learning as an emotional as well as cognitive journey in which they also learn to regulate and manage emotions. This might include assorted case studies of the holistic academic and intellectual development achieved by student nurses as they progress through their undergraduate programme together with institutional examples of effective student-centred facilitation. This use of more diverse evidencing may also help challenge the increasing criticism of TEF as little more than an unwanted neoliberal encroachment of metrics driven management into higher education which ignores the reality of both staff and student voices and lived experiences (eg Cui et al 2019). It is also proposed that the QAA provide a platform for the range of experiences narrated by participants in their own standard setting and monitoring mechanisms related to independent learning and the quality of HEI provision. This proposition would require a discursive change in perspective from an emphasis on counting and measuring contact hours (QAA 2013) to viewing independent learning from a lens of positive and humanistic psychology rather than a deficit and dependency discourse in curricula approval and review.

Similarly, the Office for Students (Kandiko Howson 2019) in identifying the need to make undergraduate learning gains explicit for both students and employers, conceptualise "learning gain" as the difference between the skills, content knowledge, competencies, and personal development demonstrated by students at two points in time. The findings of this study highlighted the multiple and holistic ways in which this is achieved by student nurses in terms of not only their cognitive and affective skill development but also their ontological being. Facets that can be argued to have been hidden within much of the contrasting quantitative research evidence that dominates this topic area and for which the Office for Students may wish to consider in future initiatives.

7.4 Implications for the university and student support services

Independent learning is a key aspiration of all higher education learning, but this study suggests it is a complex, emotional and transformative journey for student

nurses in which temporal and peer relationships have salience. It is therefore important that the HEI itself develop policies related to independent learning that encourage the co-creation of contexts in which emotional learning and peer and faculty interaction, dialogue and active engagement can be developed, both from a pedagogical and estates perspective. Within this the concept of independent learning itself may need to be clarified from a more student-centred perspective. The active involvement of student nurses will be central as they historically accompany a marginalised position in such structural discussions due to the demands of their multiple identities and the non-traditional nature of their programmes when half of their time is spent away from campus settings in professional practice (NMC 2018c).

From an estates perspective this might include the co-design of physical and virtual learning spaces that facilitate both easy access to solitary and group learning environments as well as one that encourages peer and faculty learning discourses in and out of the formal classroom given the social constructivist nature of SMIL and the achievement of flow. Designs that enable easy access and views of the natural and social world are also likely to have merit since they help student nurses attain a wider sense of affiliation and belonging, especially in the early stages of their independent learning career where learning independently is undertaken in isolation and when their sense of self is most threatened.

From a pedagogical perspective it is important that universities also explore ways of supporting and developing nurse academics and programme teams to empathically understand independent learning from the lived experience of student nurses themselves and in doing so to recognise independent learning as more than a cognitive journey of intellectual change to recognising it as a complex and co-created phenomenon that has important and inter-related emotional, temporal and social dimensions that can lead to both epistemological and ontological transformations.

Continuing professional development team-based opportunities centred on a positive psychological strengths- based approach may help structure these

developmental opportunities and help challenge the dominant discourse of dependence that can work against a more student centred SMIL pedagogy. Equally important is the need to support nurse academics to respond to the emotional needs of student nurses with authenticity and empathy without recourse to such defence strategies as surface acting (Mann 2004) to ensure the wellbeing and active engagement of faculty in SMIL facilitation.

Universities also have a key role in supporting research, evidence-based innovation and overall cultural change related to student nurses experience of SMIL to help ensure quality learning experiences and an ontologically and epistemologically transformed independent nurse graduate. Consequently, suggestions for future research are identified later in this chapter. This study however highlighted that an important part of this cultural and structural change is also related to the role of student support services. These are often centralised and not always easy to access for student nurses with multiple identities and demands. They may also offer too generic a level of support based primarily on the development of technical study skills. However, the findings of this study indicate that learning affective regulation and emotional competency are crucial precursors for student's cognitive engagement in the independent learning process. A refocused and more integrated role for student support services locating them within shared disciplinary areas to normalise and respond to the influential affective dimension of SMIL and enable ease of regular access is therefore recommended.

7.5 Implications for nurse educationalists and programme teams

The findings of this study suggest that students do wish to develop as an independent learner but are initially confused and uncertain how to achieve this in the new higher education context. Regression to their previous "hard earned" academic identity in line with their core expectations helps sustain their self-concept at a time when they feel overwhelmed with negative emotions and as a result struggle to problem solve and engage in SMIL. Since uncertainty appears to have benefits in terms of transformation but overwhelming negative affect and self-threats do not (Jacob et al 2019), it is important for nurse educationalists to offer an empathic and psychologically supportive pedagogical

approach that helps student nurses critically reflect on and recognise not only autonomous differences in HE learning but to also help them develop their emotional literacy skills that enable them to recognise they are capable of being the protagonists of their own learning.

Consequently, the affective dimension of independent learning and the emotional vulnerabilities of students when developing this important graduate skill needs to be proactively considered when designing (and co-creating with students) nursing curricula and associated learning opportunities as this can be easily misunderstood by faculty as disengagement and lack of student motivation. The augmentative merit of emotional intelligence, as a formal part of this, is also recommended for consideration so that the development of emotional competencies are integrated throughout the totality of students learning experiences. To this end it is important that learning to be independent is framed in terms of a positive psychological and strengths-based pedagogy, rather than as a skill deficit. Key to achieving this is also connecting students not only with faculty but with their peers and providing multiple opportunities for students to develop affiliated and psychologically safe social relationships since peers – and more importantly trusted peer dialogue - can be one of the most powerful sources of help in developing emotional regulatory skills and hence independent learning.

To enable this to be achieved, programme teams themselves may need protected time and opportunities to explore together their shared understanding of the purpose of SMIL together with the influential affective, temporal and social dimensions of SMIL that influence this so that they can share and empirically investigate good practice examples to inform their curricula design, pedagogy and student support. This enhanced and shared discourse is likely to be essential in any transformed and student-centred pedagogy in order to acknowledge and internalise both the epistemological and ontological developmental benefit to students. In this respect Thomas et al (2015b) provide a checklist of discursive questions to help structure and facilitate faculty discussions related to pre-entry, induction, holistic academic skill development, assessment, task design, support, academic level transition alongside

management and consistency. The findings of this study also highlight the importance of such curricula and pedagogical discussions also including strategies that embed and facilitate positive, empathic and non-judgmental

- validation of students as knowers and co-creators in their own learning
- guided and unstructured reflective opportunities to recognise and explore students experience of dissonance, emotional/epistemological turmoil and self-talk/other successful coping responses, gratitude's and cognitive reappraisal opportunities
- space to develop trusting faculty and peer to peer relationships in and outside of the class setting
- Socratic questioning, reframing exercises and challenging discursive dialogues within scaffolded zones of proximal development that help create flow states
- small groups learning activities within a flipped classroom context and group assessment opportunities particularly at the start of students SMIL journey
- curricula content that regularly explores problem, emotion and meaning focused coping and motivations alongside opportunities for peer and selfdialogues and review
- possibility of school calendar curricula that accommodate the life load of student's multiple identities
- the movement towards assessment tasks that increasingly require an authorial voice as student nurses become more effective inmanaging their emotions and engaging in independent learning tasks

Such collaborative, trusting and dialogical endeavours are also likely to have wider benefits for faculty who may struggle (emotionally and pedagogically) in understanding how they might authentically recognise and respond effectively to student's uncertainty, existential concerns and emotional vulnerabilities in a way that promotes rather than stifles, student autonomy. This is likely to be particularly important given the often-hidden emotional labour costs (Hochschild, 1983) of higher education teaching and facilitated learning within an externally structured, massified and theoretically dense nursing curricula that takes place in an increasing neoliberal HE context.

Collaborative time to engage in self-reflective consciousness raising and mindfulness techniques to help nurse educationalists themselves become more aware of both their own emotions and to improve both their empathic responsiveness to others is therefore recommended. The central role for programme and faculty leads in promoting and actively reviewing academic staff's Eudaemonic wellbeing (Chen et al 2013) is also likely to influential.

7.6 Implications for student nurses

The student nurse lived experience of SMIL was explored in this study in a small number of student nurses in one UK university. However, this study has the potential to offer some general recommendations for current and future nursing students. For example, the effective regulation of overwhelming emotions though social relationships with peers was key to independent learning engagement and success in this study. Developing and maintaining strong social networks and peer study groups from the outset and even using social media channels in advance of programme commencement to start to forge a sense of belongingness and affiliation with peers is strongly recommended as independent learning with others has multiple affective and cognitive benefits over learning in isolation, particularly in the early stages of learning to be independent.

Similarly, balancing multiple identities is challenging as family and friends may not easily understand the nuances and demands of independent learning even though they may express enthusiasm and support. Sharing lived experiences with them and encouraging peers to jointly problem solve difficulties is recommended as is the exchange of dialogical ideas with peers in order to offer new insights based on others success.

Being able to effectively manage overwhelming emotions is also important. Peers can act as an important academic resource but reaching out to others, both support services and academic staff, is also recommended as even the disclosure and labelling of emotions can assist in reducing their psychological valence. This is particularly important when the self feels threatened and learning strategies used are becoming less effective. Engaging in university

provided emotional wellbeing programmes and learning opportunities is therefore also recommended as emotional intelligence and affective insights provide a useful epistemological resource for more effective and less stressful independent learning.

The internal characteristics and past strategies used by students themselves are also key. Critical reflection on past difficulties and struggles and working out what worked in the past can help strengthen resolve to manage negative affect and difficult transitions as well as identify the need for new ways of coping and the role others can play within this through self-talk strategies. Important within this is the need to reflect on expectations that students bring to HE and thus it is recommended that students take every opportunity to actively discuss these with faculty, their peers and prior educationalists so that they can commence their journey to independence based on a realistic and shared expectancy platform and realise that independent learning is a form of intellectual struggle, but which has many personal and academic benefits. Equally, important is the need to clarify future goals and to regularly remind oneself of these to help stay engaged in independent learning and avoid the temptation to procrastinate and delay academic tasks through regular self-talk and peer dialogue.

7.7 Summary of key recommendations

A summary of the key implications of this study include:

For HE and post 16 policy makers and providers

- To work in closer collaboration with pre-entry policy stake-holders and providers to help future entrants into nursing become more effectively prepared for the challenge of independent learning including emotional literacy pedagogies
- To contribute to Teaching Excellence Framework and Student Outcomes framework with SMIL case studies
- Higher education institutions to provide access to academic support and resources for pre-entry independent projects undertaken as part of secondary and further education and to encourage student ambassadors to discuss the nature of SMIL during recruitment initiatives

 Submit to the Office for Students learning gain project to illustrate the many different ways student nurses develop ontologically in their learning and not just epistemologically

For university and student support services

- To encourage HEI providers to develop independent learning policies that encourage the co-creation of contexts in which emotional learning and peer and faculty interaction, dialogue and active engagement can be developed, both from a pedagogical and estates perspective
- To encourage, from an estates perspective, the co-design of physical and virtual learning spaces that facilitate both easy access to solitary and group learning environments as well as one that encourages peer and faculty learning discourses in and out of the formal classroom
- To provide professional development opportunities to help faculty respond to the emotional needs of students as a key aspect of helping undergraduates be protagonists in their own learning

For nurse educationalists and programme teams

- To design curricula that acknowledges the emotional and peer support needs and vulnerabilities of students as they learn to become independent in their learning
- To engage in pedagogical discussions and co-constructed strategies that embed and facilitate positive and empathic facilitation of independent learning
- To recognise the sentient nature of learning to be independent and adopt a positive psychology approach to the facilitation of independent learning opportunities

Implications for student nurses

- To build supportive peer connections and relationships as a means of learning to reappraise and regulate their negative emotions and to form trusted study groups to begin learning independently together
- To engage in regular self-talk strategies and learn to trust their inner
 voice in self-compassionate ways so they gain maintain their wellbeing

- and more effectively engage in independent earning opportunities
- To make effective use of university wellbeing services when feeling overwhelmed

7.8 Strengths

This study provides a contemporary and updated insight into the lived experience of SMIL in order to fill a gap in what is already known about learning to be independent within the higher education context. Previous qualitative research has tended to explore undergraduates in general as well as registered and post graduate nurse experiences, often with phenomenological insights arising from the international research context. This study has however offered a specific, contemporary and unique insight into the experience of adult student nurses from their own perspective within the UK.

This study was also undertaken using robust methods informed by an constructivist paradigm and IPA methodological and philosophical lens. The ontological positioning of this research recognised that the meaning of SMIL was constructed by adult student nurses as they interacted and engaged in the context of their own life world. The participants as final year students nearing the end of their programme were each able to offer rich first-hand data on this experience as it was lived by them. This enabled a differing contribution to be made to the predominantly positivist and quantitative body of knowledge regarding student nurse's independent learning that currently exists. This study has therefore offered new insights into what has been a largely neglected area of investigation. In doing so this study has built on what is already known and privileged and foregrounded the voice of the students themselves; voices which have been otherwise not heard in the wider research literature yet are an important and influential aspect of any pedagogical endeavour.

The use of IPA has also enabled a deep, granulated and unique insight into this lived experience and meaning making processes of learning independence. This has included the highlighting of both convergence and divergence of the lived experience due to the idiographic nature of the chosen methodology. For

example, Helen often demonstrated quite a divergent experience to the other participants. Smith et al (2009) highlight the need to attend to such context when interpreting the life world within IPA research and it would appear that Helen's more relativist epistemological position was influential, and her academic identity was consequently less threatened. As such, she did not feel the need to "prove to others" her academic ability and was one of the few participants to have easy access to academic capital in her home environment. The IPA nature of this study thus allowed me to demonstrate the way in which SMIL is lived by participants not homogeneously but as unique experiences even when similar shared experiences can be identified. This was a significant advantage of using this qualitative research method which Smith (2007) argues can bring researchers "closer to significant aspects of a shared humanity."

Equally, while IPA is increasingly being used in higher education research, it has not been utilised before to explore student nurses lived experience of independent learning. The quality and strength of this study has been discussed previously in section 3.10 and helps to demonstrate the rigor of this approach and how it can lead to a quality research study. A further strength of this study is that it demonstrates the potential use of this as a qualitative research method that might encourage future researchers to continue to develop its use within nurse education and independent learning specifically.

Finally, the findings generated from this study indicated that from the perspective of student nurses themselves, learning to regulate and manage emotions are pivotal to learning to be independent and an important precursor to the development of technical skills required for independence. Therefore, this study's strength also lies in that it has provides a significant contribution to the debate on the nature of adult learners as well as contemporary and future nurse curriculum development where learning to be independent is likely to remain a key graduate outcome. Indeed, the recently published standards for preregistration nursing (NMC 2018c) prioritise the need for 21st century nurses to be both "emotionally intelligent and resilient" and this study has the potential to assist nurse educationalist in understanding how this process can be supported and facilitated during pedagogical processes including independent learning.

7.9 Limitations

As a novice IPA researcher, the process of undertaking this study was not without its challenges. It required a new set of skills alongside an increased philosophical understanding and knowledge base. A more experienced IPA researcher may have completed the study with greater skill, insight and utility. However, to mitigate against this, regular supervision was sought alongside an extensive literature review and attendance at various study days, master classes and regional IPA research meetings.

This small-scale research was also situated within the context of one UK post-1992 university and was therefore bounded by location and time. It might be that socio-culture influences of other, perhaps more elite, HEI's, may have illuminated the phenomenon of SMIL for adult student nurses differently. These findings, interpretations and conclusions drawn are thus specific to both the participants involved and myself as the researcher, ultimately being circumstantially and temporally situated. For example, IPA adopts a contextual position and does not therefore seek empirical generalisability in the quantitative sense.

The credibility and transferability of this study therefore needs to be judged by criteria reflecting the philosophical position underpinning qualitative research rather than by traditional positivist measures. The richness of data and "subtle inflections of meaning" (Smith and Osborn 2003) achieved can thus be considered a strength since my aim in undertaking this IPA study has always been to offer just one of many possible interpretations in line with Gadamer's (1976) hermeneutic notion of a horizon of truths and understandings.

In terms of sampling, all participants shared the same ethnicity and all, but one was female. It may be that a greater ethnic and gender mix may have also produced different findings. However, at the time of the data collection, this ethnicity and gender both dominated and continues to dominate the specific undergraduate programme where the research was undertaken. Equally, while a number of the findings are reflected in the feministic nursing literature related to mature students with dependent others, both the male and younger

participants also narrated similar experiences suggesting these findings were more likely to be related to the phenomenon under study. The influence of intersectionality while not a focus of this study, may be a concern for future SMIL researchers. However, in this project IPA does not aim for a representative sample due to its focus on the in-depth understanding and richness of meaning of both individually and socially shared experiences. As such, this study sought to reveal how SMIL is "lived" by adult nursing students in the context of one university. The coherence and helpfulness of this study will therefore ultimately be judged by its readership.

Nonetheless, the purposeful convenience sampling used - whereby participants were selected on the basis of their extended experience of the phenomena - could have been circumscribed by the largely self-selecting nature of the thirteen participants who volunteered and met this criteria. It may be that they were motivated to tell a specific story and different findings may have been possible with a different sample. For example, the magnitude of their emotional experiences of SMIL emerged for all but one participant soon after the first interview question was posed and could therefore have influenced the way in which they approached the remainder of the interview. However, when the anonymised findings were shared with two groups of third year students unconnected with this study and at their request, it was pleasing to note their positive reactions and impassioned agreement that this also reflected their own lived experience.

7.10 Implications for future research

This study makes a number of recommendations for future research related to SMIL as well as nurse education researchers.

7.10.1 IPA as a future methodology within nurse education research

IPA was successfully used in this study to reveal a deeper rich understanding of student nurses lived experience of SMIL related to both convergence and diverge of experiences from their own perspective. It also added an extra layer of research understanding situated in the context of student nurses own everyday lives to help explain why they find SMIL complex and challenging. Yet

as a methodology it is not widely used in educational research settings and even less so in nurse education, albeit in the former a growing body of evidence is slowly emerging. It is thus recommended that future nurse educational researchers consider the utility of this interpretative phenomenological methodology when deciding on a methodological approach that best reflects their research question and help enhance the evidence base of IPA within future research.

However, as with all methodologies, IPA is not without its challenges and the constant close monitoring and comparison of raw data to identify both shared and distinct experiential features is resource and time intensive. Institutional pressure to produce "outputs" can mean qualitative approaches like IPA can be perceived less favourably. However, there is also a pressure to provide effective and evidence-based pedagogies responsive to changing student needs that enable undergraduates to grow, develop and remain engaged in their learning. This study has shown that IPA has the potential to contribute to this within nurse education. Notwithstanding these merits, it is recommended that future single IPA researchers consider a smaller sample size than the one used here in order to gain a more nuanced idiographic understanding of the phenomenon under study.

7.10.2 Phenomenological exploration of nurse educationalists lifeworld perspectives of SMIL

Phenomenological exploration of nurse educationalists lifeworld perspectives of SMIL within undergraduate nursing programmes is also recommended as the findings of this study suggest there may be a dissonance between these, and students' own lived experiences, particularly around how dependence and independence are conceptualised. These potential differences and resultant misunderstandings appear to have negative impacts on both student nurses and their educators but the extent and nature of this is not currently well understood. Further research is likely to reveal a much needed and more indepth and nuanced understanding.

7.10.3 Phenomenological exploration of the student nurse lived experience of SMIL in other institutions, countries, fields of practice and contexts

This small-scale IPA study was situated within the context of one UK University from the perspective of thirteen adult nursing students. However, to build on these research findings and further enhance research understanding related to SMIL, it is recommended that the phenomenological student nurse experience of SMIL be further studied in other institutions, countries and fields of practice (eg mental health, learning disabilities, children and young people).

This study limited itself to the traditional undergraduate degree programme that leads to professional registration. However, with more diverse entry routes (eg nurse apprenticeships; top-up degrees for nurse associates), similar research may be beneficial in these settings as these also rely heavily on independent learning as a key pedagogical strategy for success. Equally, student nurses, student nurse apprentices and associate nurses working towards a degree programme are also required to learn independently within practice learning opportunities. This study suggests student nurses in particular perceive the purpose of SMIL as related to summative assessments in the university setting and they made little connection and application of this to practice except in terms of their distal, instrumental, goal focused motivation. Future research may therefore wish to focus on how student nurses make sense of their lived experience of independent learning opportunities when in practice to help build a greater picture of the lifeworld of student nurses' journey from dependence to independence.

7.10.4 Longitudinal research into the lived experience of SMIL

A longitudinal study of student nurse's progression into registered practice could also provide useful insights into the longevity of the positive emotional regulatory and pedagogical outcomes of this study as student nurse transition into their registered nurse role and continue to learn independently. This transitional period is widely reported as complex and challenging whereby initial excitement is rapidly replaced by disillusionment as prior expectations fail to be met (eg Whitehead et al 2013), in similar ways in which the transition to SMIL in

the HE context was reported by participants in this study. The various dimensions of the model of SMIL lived experience offered in this study has the potential to also illuminate this longevity within a longitudinal future study. Equally, self-reports of emotions can be subject to memory bias (Pekrun 2019) and thus a longitudinal research approach to student nurses as they engage in SMIL is also recommended.



8.1 Overview of chapter

Willig (2013) argues that reflexivity requires phenomenological researchers to explore the ways in which their involvement has influenced, acted upon and informed their study as a strategy for philosophical congruence. However, she also distinguishes between two important types of reflexivity, namely personal and epistemological, arguing that both need to be considered within an IPA research study. The latter, linked to the methodological considerations, has been a focus of the reflexivity offered both throughout and at the end of chapter three. Similarly, my personal reflexivity began in chapter one where my foreknowledge and personal story set out how my own values, experiences, beliefs and commitments together with my wider aims in life, have shaped this research. However, Willig (2013) also contends that personal reflexivity includes thoughts about how the research has changed me as a person, professional and a researcher. This final chapter therefore develops my reflexivity to highlight my personal reflexive transformations as both an educationalist and a researcher before identifying my future intentions. As such, this chapter captures key aspects of my own lived experience and fore structure change as a novice researcher and as a nurse educator who is constantly learning and experiencing the world of my own temporal and situated existence.

8.2 Becoming more reflexively attentive and questioning

What I was not anticipating, - as I have always prided myself on my self-awareness and empathic ability, - was the extent to which this project would challenge my own assumptive world views (Janoff-Bulman 1992) and in doing so start to reveal more of my unknown self. As such, I have come to understand myself much better through the interpretative phenomenological research process and have developed my skills as a more reflexively attentive and questioning person, both to myself and others. Mann (2016) similarly refers to a growing self-awareness that develops when undertaking qualitative research and engaging with reflexivity from the onset of a research project.

As I actively engaged in this process, I began to wonder whether the conscious assumptions that I brought to the study also masked unconscious ones and in particular the tacit desire for recognition. For example, a key philosophical proposition of Hegel (2018) is that the self is a fundamental struggle for recognition and is formed and developed within a relationship that is mutually and positively acknowledged by others. On reflection, I realise I have always enjoyed the challenge of independent learning and recognise the same in my children. The personal reward in the lifeworld making sense and revealing itself after a sustained period of intense immersion in perplexity and struggle is for me intellectually unrivalled and a key motivator to my constant curiosity and choice of career. With hindsight I now understand the self-protective nature of my initial and rather naïve taken-for-granted assumptions that student nurses in this study, while likely experiencing difficulties to start with, would also share this unfettered enthusiasm. I had not however anticipated the extent to which their own self was threatened, and the overwhelming felt nature of SMIL that would come to dominate their lived experience.

This moment of realisation was particularly interesting for a number of reasons. In the first instance, it reinforced the importance of reflexivity to an IPA research study as without it, I would not have realised how easily my natural attitude could be mistaken for a phenomenological attitude and could therefore have inadvertently biased the study findings. Secondly, it led me to question my own past pedagogical disappointments within my educational role when students appeared to lack academic engagement and the extent to which I was truly empathic. While I had previously expressed empathic concern, I began to realise that my empathic perspective-taking related as much to my own sense of thwarted emancipatory intentions and lack of recognition, as it did about understanding their perspective and lived experience. As such, I was not always empathically connecting with students as I had anticipated since empathy also requires a constant reflexive element in which hidden assumptions are foregrounded in order to truly enter into another's world.

Thus, I realised I was focused on helping others reveal their tacit assumptions while naively ignoring my own. The importance of the latter has been a key and powerful learning aspect of the phenomenological attitude I have had to adopt within this study and will remain with me beyond the life of this project both personally and professionally.

The hidden need for recognition was also powerfully underlined when students expressed disappointment and resentment towards unnamed colleagues for a perceived lack of concern for their developmental needs and unfamiliarity with learner independence. For example, I noted in my reflexive diary that I became momentarily distracted by a desire to respond with "but that's not me!" and I had to work hard at refocusing on the participant's own narrative story and away from my immediate felt reaction and perceived lack of recognition. This was a valuable phenomenological and personal learning experience as while I had anticipated the dynamic and unknown nature of qualitative interviewing for participants, I suddenly realised that this applies equally to the researcher whose unexpected, embodied reactions are similarly unknown in advance. The ongoing reflexive process enabled me to actively seek out and more fully understand my own "theories in use" (Kinsella 2007) and thus prevent them from obscuring the participant's own accounts in advance of future interactions.

The phenomenological interview process also shed light on myself as a nurse educationist in other ways and in particular the extent to which I enacted my espoused pedagogical philosophy of caring about, rather than the more paternalistic caring for others, which prior to this study I had unquestioned confidence in. However, during her interview Harriet's fragile sense of self became evident to both of us and I found myself wanting to unexpectedly "save" her from her own distressing self- realisation. These unexpectedly intense feelings continued even though Harriet's experience of comfort and discomfort shifted so that by the end of the interview Harriet expressed gratitude for the cathartic nature of her self-disclosures. She also appeared empowered by her greater self- awareness, even proposing differing strategies she would use to boost her esteem in future.

Following the interview, I questioned whether my need is unknowingly reflected in my wider pedagogical practice and that of others for whom nursing and the deontic concept of caring for others is deeply embedded in our shared and often highly gendered professional past. For example, nurses are often motivated by prosocial and often gendered ambitions derived from the desire to protect and promote the welfare of others (Dill et al 2016). Yet the emotional labour literature, also suggests that practitioners with strong prosocial motivation' can also be at risk of unconsciously being guided by their own need to offer protection and thus are less likely to develop a healthy empowering distance (Hochschild 1983; Erickson and Ritter 2001). On reflection I do believe I created an intimate and healthy distance in the interviews but as an emerging scholar and IPA researcher I have also learnt to not just focus on the importance of ethics literature and institutional guidance related to harm avoidance and benefit but to also recognise and respect the expertise of participants themselves.

Consequently, I learnt to use subsequent debriefings at the end of interviews more effectively after Harriet's interview by asking participants what they had personally gained from the interview and how they and others might respond to this. Through the critical and ongoing reflexive nature of this I have also learnt to be much more questioning and critically thoughtful and reflective in my every day pedagogical practice not just in the research study. In doing so I have already noticed a transformation as I now search below the surface in terms of the tacit assumptions as well as structural and historicality influences on these when I interact with others. These skills I believe will help me be more authentic in my future educational and research practice as I realise that commitment to an ideology is easy to express, but without constant reflexivity will be inauthentic, incomplete and difficult to realise.

8.3 Reflexivity and developing as a researcher

Getting to grips with IPA as a novice researcher has been challenging, illuminating, daunting and rewarding. Feelings which have oscillated throughout the life of the study and often led to a repetitive internal dialogue of questioning of "am I being interpretative enough" and "is this reflected in the raw data?" Extensive reviews of the literature supported by various workshops, master

classes, a regional and online IPA support group and supervisory dialogue helped develop my IPA understanding and to appreciate the complexity of phenomenological inquiry not just IPA. In particular I have enjoyed the philosophical challenge of this qualitative research method and the opportunity to read and ultimately grapple with previously unknown and complex philosophical ideas underpinning this together with their real-life application.

An essential aspect of this has been my extensive reflective diary and field notes that have helped document my entire research journey to ensure it remains true to the very honest and detailed narratives offered by participants as well as my understanding of the underpinning philosophy of IPA. It is interesting to note that many of my early reflections involved minimal awareness of the impact of my foreknowledge, were fairly formulaic and demonstrated only a superficial awareness of myself as a research instrument. However, with ongoing immersion, sage supervisory feedback and reflective persistence there was a noticeable change in depth and clarity as to how my previously blind-spotted foreknowledge and beliefs not only became explicit, but continually evolved during the life of this project. The phenomenological importance of both the doing (experiential) and being (authentic ontology) modes of existence (Su 2011) for researchers was therefore reinforced and helped to bring the philosophical basis constantly alive for me in this project.

This helped when I faced one of my biggest challenges that of writing the discussion chapter. For example, I was particularly attentive to the phenomenological attitude and IPA approach in the methodological design, data collection and data analysis of the findings. I similarly became able to recognise and feel proud of my increased IPA competence. However, it was as if I had forgotten this in repeated early drafts of the discussion chapter which felt muddled, incomplete and submerged in the priority I was inadvertently giving to others research findings and theoretical explanations, rather than my own. Consequently, I lost the participants voice and was no longer "telling the story as it is" (Smith et al 2009). In hindsight I recognise that for novice researchers like myself every change in research focus creates a need for learning and greater reflexic self-awareness to avoid doing what I did and inadvertently

moving from "unconscious competence" back to "unconscious incompetence" (Getha-Taylor et al 2013). The need to extend a reflexive approach to the entire write up stages was therefore powerfully reinforced.

What also helped me to recognise this was the helpful feedback of my supervisors who not only provided much needed emotional support at a difficult time in my life but were also able to help ask a series of reflexic (and very insightful as well as compassionate) probing questions to enable us all to jointly diagnose the problem and to enable my ownership of this. This also prevented me from reverting to facades of competence (creating emotional and cognitive false impressions of expertise) and negative self- presentations akin to those described by Devine and Hunter (2017) at a point when I felt emotionally exhausted, and which could have negatively impacted on the quality and authenticity of this research.

Equally surprising was not just the altruism and enthusiasm of the thirteen participants who narrated their experiences but the way in which they also felt a sense of connection with each other even though they often did not know each other and were unaware of who had participated. A similar sense of connection is reported by Hoover and Morrow (2015) in their follow up study with female sexual assault survivors but otherwise appears unreported and was thus interesting to reflect on. For example, at the end of interviews, nearly all participants asked about how many other participants were involved and seemed pleased that not only their story was being heard but that of others too. Frequently, they mentioned that rarely if ever had they been asked about their independent learning experiences and they were glad that their own and others voice were now being formally recognised and acknowledged in some way. This appeared to provide them with a sense of validation and of contributing to something valuable and bigger than themselves.

It also appeared to provide a positive outcome for some of the distressing emotional experiences they recounted even though they were unaware of whether others had reported similar experiences. Likewise, they also appeared to feel a sense of connection to an academic community in which research was

an important aspect and which they might also consider actively contributing to in the future. This surprised me but also reinforced my commitment to not only this project but more generally to qualitative research in nursing as a way of telling untold experiential stories to a wider audience. It also highlighted how role modelling research activity can also assist in moving nursing from a tradition based to a more evidence and researched based profession in which future graduates also feel a valued and essential part. As an educationalist it also taught me to actively listen more to students and to ask more phenomenological questions within my practice if I am to actualise my commitment to higher education as both an ontological and epistemological transformational opportunity.

I also presented my initial literature review at the 2017 HEA Annual Conference (Glendening 2017) with a challenge to academic peers to "reconsider our love affair with Knowles." I was surprised at the positive response from academic peers, both nationally and internationally, who felt a similar dissatisfaction at assuming undergraduates are by virtue of their adult status ready and eager to be self-directing as well as how they too struggled to inspire new undergraduates to be independent learners. This also reinforced to me the importance of not just undertaking research but also sharing and disseminating this. This has been a valuable insight learnt as a result of this study as I have always been eager to read others research but reluctant to publish my own in case it would not be of interest or relevance to others. It has thus stimulated and enhanced my self- efficacy as I now begin the journey of disseminating and publishing my findings.

8.4 Drawing the chapter to a conclusion and looking to the future

The journey of this PhD has been challenging, inspiring and rewarding, not just professionally but personally. I have learnt not to assume or anticipate but to actively explore taken-for-granted assumptions in a reflexive manner in order to actively listen to the stories of others and to more deeply enter into their world. I have also learnt that to do so also helps me to be a more authentic practitioner and researcher and thus close the gap between my philosophical aspirations and my actions.

IPA research is complex and time consuming. Maintaining a phenomenological attitude has also tested me. The fact that in IPA research I am an active and dynamic research instrument that influences and shapes the entire research process is something I have been cognisant of throughout. Reflexivity has therefore been an ongoing feature of this study (Willig 2013). Likewise, this chapter has only offered a brief glimpse to help illustrate different ways in which my increased awareness of my perspective, foreknowledge and "horizons of understanding" (Gadamer 1976) as a researcher have helped to ensure quality and that I have presented the phenomenon from the perspective of participants and not purely my own. From a personal reflexive perspective, this has led to many unexpected learning outcomes beyond research competence which I will be able to take with me long after the completion of this study. As a result, I feel motivated, confident and more informed to take forward all that I have learnt to help advance the pedagogical, epistemological and ontological experiences of SMIL for current and future nursing students and academic peers, both in this institution and beyond. Therefore, while this specific journey is coming to an end, other journeys are beginning.



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Appendices

8.4.1 Appendix one: Inclusion and exclusion criteria, databases, search terms and Boolean logic

	Inclusion	Exclusion				
Availability Publication period Source Type (related to key words)	 Published in English language Available as full text Published between 1997 – 2017 Peer reviewed primary research Peer reviewed discussion papers Doctoral thesis Conference papers 	 Not written in the English language Not available as full text Published outside of the timescales Peer review primary research not directly related to key words Discussion papers: not peer reviewed 				
Databases used	 Academic Search Complete British Nursing Index CINAHL Complete: Cumulative In Literature Education Source ERIC: Educational Resources info ETHos-UK HEER: Higher Education Empirica Internurse JSTOR Medline Complete PsycARTICLES PsycINFO ResearchResearch Sage Journals Online Science Direct Scopos Springer Link Web of Science 	ormation Centre				
Search terms and Boolean logic	self-directed learn*	OR self-managed learn* OR self-regulated learn* OR direct independent learn* OR independent learn* OR independent study OR self study OR autonomous learn*				
	AND					
	higher education	OR university OR college				
	AND					
	student nurs*	OR nurs*				
	NOT					
	school children	OR pupil OR child*				

8.4.2 Appendix two: Extract from the literature review matrix

No:	Year/Country	Reference	Sample/location		Methodology, methods (design and instruments)	recommendations	Pedagogical/ epistemological SDL basis	Inclusion/exclusion (Theme)
1.	1986 Canada	Taylor (1986).	n = 8 postgraduate students on a 13- week CPD teaching and learning module	To analyse the lived experience of SDL in the classroom during a 13 weeks education based HE module	Qualitative (interpretative) Cumulative comparative sequential and inductive analysis Weekly unstructured interviews	collapse of students	this	Inclusion (dated but paucity of research regarding student experience – therefore included in light of research question) Student experience
2.	1997 UK	Pedley and Arber (1997).	n = 97 UK nursing students over a 9/12 period (3 x cohorts)	To evaluate the effectiveness of a student-centred module using Jarvis' experiential framework To identify whether students are able to take the responsibility associated with a SDL approach to learning	Mixed methods Quantitative (survey) Simple descriptive statistical analysis of 12 closed questions Qualitative (exploratory) content analysis of 12 open-ended questions and group discussions Convenience sample	SDL learning opportunity as it	Not identified	Inclusion: Benefit of SDL

	ar/Country		Sample/location		Methodology, methods (design and instruments)		epistemological SDL basis	Inclusion/exclusion (Theme)
3. 200 Aus	i1 stralia	, ,	x large urban public university (Sydney) 1st year nursing students	reliability of Fisher et al's (2001) redesigned readiness scale for nurse education (SDLRSNE)	Quantitative (developmental) Delphi Technique Convenience sampling Self-report questionnaire using 5-point Likert scale Sub scales (SDLRS) Self- management Desire for learning Self-control	SDLRS has reliability/internal consistency for nursing students	Knowles (1975)	Inclusion Readiness for SDL SDLRSNE scale
4. 200 UK	1		registration paediatric nursing students enrolled on a CPD module and academic lecturers		Qualitative (interpretative) Thematic analysis of lesson observations and semi- structured interviews	Faculty and students experience difficulty articulating a precise SDL definition (focused on observable elements not cognitive processes involved) Faculty and students valued SDL for the increased responsibility for learning but only if used in conjunction with teacher led TandL strategies Faculty and students felt that they were not respected by the other Recommendation Recommendation Recommendation Future research to focus on student's perceptions of autonomy and control rather than on SDL methods and assessment tools		Inclusion Student experience Faculty experience

No: Year/C	ountry Reference	Sample/location	Aim(s)	Methodology, methods (design and instruments)		Pedagogical/ epistemological SDL basis	Inclusion/exclusion (Theme)
5. 2001 Canada	Lunyk-Child et al (2001)		To explore faculty and g student perceptions of SDL	Comparative content analysis of focus group interviews	requires students to value	Knowles (1975)	Inclusion Student experience Faculty experience

8.4.3 Appendix three: Analytical framework for review of literature

(adapted Benton and Cormack 2000; Hart 1998)

Article Number (matrix code): 20

Smedley, A. 2011. The self-directed learning readiness of first year Bachelor of Nursing Students. *Journal of Research in Nursing*. 12 (4): 373-385.

1. Title:

"The self-directed learning readiness of first year bachelor of nursing students.

1.1. Is the title concise?

YES

1.2. Is the title informative?

YES

1.3. 1.3 Does the title clearly indicate the content?

YES

SDL readiness and first year undergraduate nursing students

1.4. Does the title clearly indicate the research approach used?

NO

Quantitative approach implied in the abstract and confirmed on p375

Author (s)

"Alison Smedley"

2.1. Does the author(s) have appropriate academic qualifications?

YES

Not stated on article but implied by holding a post of Senior Lecturer in nursing (previous midwifery) working in an Australian university where undergraduate nursing programmes are provided. Staff profile on university website indicates Head of Nursing post currently held with a range of nursing, midwifery and educational academic qualifications to doctoral level. Research interest in student nurse engagement in HE. Confirmed via mySearch dataset search indicates 14 peer reviewed journal articles published by this author since 1999 on student engagement.

2.2. Does the author(s) have appropriate professional qualifications and experience?

YES - as above

3. Abstract

3.1. Is there an abstract included?

YES

3.2. Does the abstract identify the research problem?

YES

Identified SDL as a key policy and pedagogical (transformative) learning strategy in HE as well as undergraduate nursing. However unclear how prepared new nursing entrants are for this learning method and thus set out to evaluate and compare results from this private HEI with a larger and similar public HEI in Australia

3.3. Does the abstract state the hypothesis (if appropriate)?

N/A

Not experimental design and not testing cause and effect relationships

3.4. Does the abstract outline the methodology?

NO

However methodology and method detailed on pp375-379.

3.5. Does the abstract give details of the sample subjects?

YES

Not detailed in abstract beyond identification that this involves first year Bachelor of Nursing Students. However, further details provided on p376 identifying n = 67/first year nursing students completed and returned questionnaire from one private Australian HEI

3.6. Does the abstract report major findings?

NO

Only intentions – major findings reported on p383

4. Introduction

4.1. Is the problem clearly identified?

YES

NB: Appears to resonate with UK student nurses and similar debate/profile observed in own faculty.

Identified SDL as an aim of all HEI's to transform learners towards life-long learning through teaching students how to learn independently through the provision of SDL which is argued to be:

- popular HE approach to learning that provides a more flexible learning approach based on individual learning needs that helps learners be more open to change /alternative ways of doing and thinking
- essential professional role for nurses who are required to remain updated as part of evidence-based practice as well as function in the contemporary workplace.
- Australian NMC (2006) also requires nurse graduates to be" critical thinkers, self-directed and to pursue on-going learning (p374)
- assumes however that learners have
 - developed the necessary metacognitive skills ("the "how" and "why") to be able to be self-directing
 - willing and eager to be self-directing/responsible for own learning
- Key aspect of debate in HEI where research is undertaken about how ready new entrants are for SDL since many are direct school leavers who appear unprepared, unfamiliar and unwilling to embrace this learning approach.
- While Knowles (1998) andragogy theory appears to be the basis for promotion of SDL, identified that adults learn best when they are ready to learn and thus raises the question about whether new entrants (esp. school leavers) are in fact ready for and able to make the most of SDL opportunities.
- Author identifies this as a "dilemma" (p374) for contemporary nurse educators.
- Sees assessment of SDL readiness to identify and assist those students who may need additional help/facilitation.

In summary, problem identified appears to be

... that not all new entrants into undergraduate nursing programmes appear ready for SDL. Yet SDL is a key learning strategy of HE and undergraduate nursing with many potential benefits for those that can make the most of this.

4.2. Is a rationale for the study stated?

YES - see above

Professional Aus. NMC requirement/key aspect of HE learning. Theoretical concepts of how adults learn best (eg Knowles 1975).

4.3. Are limitations of the study clearly stated?

NΩ

Interesting omission - may be due to the constraints of publishing? However, limits appear to be relative smaller sample size viz a viz similar research studies assessing readiness for SDL (eg Fisher et al 2001; Yuan et al 2011). One Australian university (however, findings were similar to

those obtained when surveying a larger Australian public university and other studies (eg Fisher et al 2001; Kocaman et al 2009; Yuan et al 2011). Dual agency role of researcher not identified here but in methodology.

5. Literature Review

5.1. Is the literature review up-to-date?

YES - but limited

Literature review fairly limited and integrated more in introduction and discussion, rather than a separate section. Only two past research studies are utilised both being a decade old (eg 2001; 2002) from when the research was undertaken, albeit SDL does appear an under-researched area of educational and nursing research. The remaining sources consulted in the paper are

- Opinion based sources on SDL (4)
- Policy/professional justification (3)
- Theoretical justification (9)
- Extensive Australian literature review undertaken in 1991 (two decades earlier)

5.2. Does the literature review identify the underlying theoretical frameworks?

Conceptual/theoretical framework emphasised related to andragogy and in particular Knowles (1990) ideas about how adults learn (theory of andragogy). Draws attention to the notion that adults are primarily self-directing in their approach to learning but also balances this with that adults first need to be "ready to learn." (NB: An argument not always identified by other papers which appear to adopt a narrower conceptualisation of Knowles (1990) theory of andragogy).

Although not identified in the literature review, the author does appear to also draw on educational concepts/theoretical ideas about the nature of HE learning and the value/purpose of a university education (eg Zgaga 2009 from my own reading)

5.3. Does the literature review present a balanced evaluation of material both supporting and challenging the position being proposed?

YES - but caution

Limited evaluation in review with more balanced evaluation in the discussion but caution identifying where similarities and differences exist with current and past research findings. Does appear to adopt a critical and nuanced analytical (and cogent) approach to own results as well as the rationale for the study when reviewing theoretical basis of Knowles (1990).

5.4. Does the literature clearly identify the need for the research proposed? YES (NB more implicit than explicit perhaps)

Cogent argument advanced in the introduction as to the research problem but limited literature review has not necessarily reinforced this. Lack of research (beyond initial validation and reliability studies for original SDL readiness scale used) in this area not made explicit but would appear to be a significant rationale (but omitted – possible publishing constraints?)

5.5. Are important references omitted?

IN PART (NB: missed many international research findings)

References used identify key theoretical ideas and justification. The original (seminal) research that developed and tested the SDLR scale is identified and evaluated well but as stated above (5.1), the wider research into SDL is not well identified. This is in part perhaps because there is a dearth of research in this area with much similar research being undertaken at the same time (and after) this actual study. Nonetheless, Yuan et al's (2011) similar but Chinese study published in the same year as this does draws on a much wider and international review of the literature. For example, this study appears to limit itself to a review of primarily Australian research studies, unlike Yuan et al's (2011).

6. Hypothesis

6.1. Does the study use an experimental approach?

6.2. Is the hypothesis capable of testing?

N/A

6.3. Is the hypothesis unambiguous?

N/A

7. Operational definitions

7.1. Are all terms used in the research question/problem clearly defined? NO

only SDL not defined but potential benefits highlighted and link to life-long described/ defined learning made clear (eg SDL is a competency of LLL). As such, SDL described indirectly. Metacognition also argued to be a key aspect of SDL and defined as "an awareness and control of one's own learning, experience and knowledge (p374: Perfect and Schwatz 2002)

NB: not exclusive to this study – appears to be rarely defined (shared understanding assumed but might this be part of the problem (eg so students share the same understanding as faculty? Knowles (1975; 1990) is the most commonly used definition which is referred to here but not made explicit

8. Methodology

8.1. Does the methodology section clearly state the research approach to be used?

Quantitative approach in the form of a self-reporting questionnaire

8.2. Is the method appropriate to the research problem?

YES

The study aimed to investigate and measure the readiness of beginning degree level nursing students in Australia readiness for SDL within a small HEI. Thus, quantitative approach appears to most congruent approach and the survey method an appropriate way of achieving this.

Sample group

72% response rate equating to a sample size of 67 newly enrolled first year nursing students. Sampling of these students appears appropriate to the research question, albeit the sample size appears relatively small for generalisations of the findings.

NB: Yuan et al (2011) similar study of Chinese undergraduate students undertaken in the same year and using the same instrument (Chinese translated version) used a larger sample (n = 536)

Data collection

was in the form of an anonymous self-reported questionnaire enabling researcher to remain slightly detached from the sample group since there was a dual agency role which could have introduced potential bias if not attended to/addressed. That said, could address this differently if needed to be perhaps but given the philosophical underpinnings of quantitative research with its emphasis on positivism and object reality as independent of those who observe it, this would appear an appropriate data collection method.

Data collection instrument

was the Fisher et al (2001) SDLRS which has been devised for nurses (given previous Guglielmino 1977 scale was not well suited to nursing students). Instrument originates in Australia (where this study was undertaken) and content validity was tested by Fisher et al (2001) across 201 new undergraduate nursing students and found to be a valid and reliable tool. Nature of instrument explained well.

Data analysis: SDLRS instrument

Analysis used the computer assisted Statistical Program for Social Sciences (SPSS) to test for internal reliability, subsection consistency and item unidimensionality of the SDLRS instrument chosen. For example:

Item unidimensionality

Reflects the extent to which each item is measuring the same concept. Statistical analysis suggested that the SDLRS instrument chosen has significant internal consistency as all but two "items to sum correlation" had a score >0.3. These findings were similar to the original Fisher et al (2001) research which this study was later compared to.

Internal reliability and subsection consistency

Factor analysis indicated at least three subscales (eg self-management; desire for learning; self-control) as well as a total SDLRS scale. The choice of a Cronbach alpha coefficient would seem appropriate as scores of ≥ 0.6 support the existence of distinct subscales. In this study the alpha values achieved ≥ 0.6 reaffirming the reliability and internal consistency of the chosen instrument

Data analysis of collected data: t - test

An appropriate choice appears to have been made in the use of the t-test on the data collected. For example, the t-test assesses whether the means of two or more different groups are statistically different from each other. In this study, it was used to assess whether male and female as well as younger and older participants were significantly different in their readiness for SDL. Results of the t-test suggest no significant difference between males and females were found but age did appear significant with younger students leaving school (eg 18 to 19 year olds) than older aged students entering HE.

NB: Similar maturational findings to that of Yuan et al (2011)

The t-test also enabled the results to be interpreted correctly and, for example, to identify the limits of the data with the small sample size used. For example, the data collected was not sufficiently large enough to confirm whether students with dependent children differed in the readiness for SDL than those without dependent children. The same was found with entry qualifications which may also need a larger sample to confirm

8.3. Are the strengths and weaknesses of the approach chosen stated?

YES (instrument and sample)

Weaknesses were stated for the small sample size in light of statistical tools instrument used in the data analysis (see t-test above) as well as the strengths of using and sample the chosen SDLRS instrument to enable comparison with findings of a similar and larger Australian study undertaken by Fisher et al (2001). Data collection method strengths also identified in terms of dual agency role and need to avoid undue bias and ensure ethical principles related to freely given informed consent (implied, rather than explicit). Strengths and weaknesses of approach not explored (may again be due to limits of publishing).

9. Subjects

9.1. Are the subjects clearly identified?

YES

All newly enrolled first year nursing students on an undergraduate bachelor's degree programme in one private Australian HEI

10. Sample Selection

10.1. Is the sample selection approach congruent with the method to be used? YFS*

The research aim was to measure SDL readiness in new undergraduate nursing students on a bachelor nursing programme. The sample selection of offering questionnaires to all new entrants appears congruent as the aim in quantitative research would be to capture a representative sample (not necessarily richness of data). NB: Representativeness refers to how well the sample used compares with and is representative of the population of interest. Too many non-responses (non-response bias) could significantly limit the validity and reliability of the findings. The sample size is relatively small compared to similar studies in the literature (eg Yuan et al 2011) and limits of this for data analysis have been identified by the author.

10.2. Is the approach to the sample selection clearly stated?

Clear but brief information provided indicating a 72% response rate which given the original relatively small sample size would be needed perhaps to achieve a representative sample as well as valid and reliable findings/results. Achieved well in this study. Fincham(2008) writing on behalf of the editorial board of the American Journal of Pharmaceutical Education, states that for their journal (and as a mark of good practice in terms of validity and reliability a minimum response rate of) \geq 60% is required (\geq 80% required if research claiming to represent all pharmaceutical schools and colleges.

NB: Example of US standard for valid and reliable response rates (to achieve representativeness) in one peer reviewed journal

10.3. Is the sample size clearly stated?

YES

n = 67 (see 10.1 and 10.2)

11. Data Collection

11.1. Are the data collection procedures adequately described?

YES (but brief)

Clear but brief description and thus not clear if any bias was inadvertently but brief introduced and/or strategies were effectively used to achieve the relatively high response rate (eg incentives; prompts; paper-based v online instrument completion). Interestingly, Fincham (2008) suggests paper based surveys may produce better response rates than online submissions). Data was collected using the widely used Fisher et al (2001) SDLRS, previously tested extensively and found to be a valid and reliable instrument for nursing students. NB: Further information in 8.2

11.2. Has the validity and reliability of any instruments or questionnaires been clearly stated? YES

Extensive reporting and effective use of tables, figures and graphs to help explain this to researchers/readers less familiar with statistical and quantitative data. This has the potential to help others evaluate the validity and reliability of this study in an informed manner. See 8.2

12. Ethical Considerations

12.1. If the study involves human subjects, has the study ethical committee approval?

Clearly stated that approval gained from LREC NB: 12.2 to 12.4 more implied by this than explicit

12.2. Is informed consent sought?

Not made explicit, nor mentioned directly by implied by 12.

12.3. Is confidentiality assured?

Not made explicit, nor mentioned in depth albeit questionnaire is anonymised and no names used in article. Location is kept confidential but implied by authors email address and biographical details.

12.4. Is anonymity guaranteed?

Does mention scale was anonymised and anonymity appears to have been maintained (see 12.3 above).

13. Results

13.1. Are results presented clearly?

YES

Presented using useful subheadings over seven pages (pp376-382).

13.2. Are the results internally consistent?

YES

A range of statistical tests were undertaken (see 8.2 data analysis) including Cronbach's Alpha which, according to Watson et al (2006), is a useful statistic for representing internal consistency of summated rating scales such as Likert scales (eg as used in this study). According to Watson et al (2006) scores of 0.7 and above are considered satisfactory to support a claim of reasonable internal consistency. This study obtained scores of 0.780 to 0.81 suggesting results were internally consistent.

Item unidimensionality analysis also indicates the SDLRS was also internally consistent (see 8.2 – data analysis SDLRS instrument)

13.3. Is sufficient detail given to the reader to judge how much confidence can be placed in the findings?

YES

Yes – the rationale for statistical tests are explained and presented both in graphs/tables as well as text. The results are detailed over seven pages in a logical and systematic manner.

NB: Watson et al's (2006) explanations of the chosen statistical tests appears to support authors rationales and decision making to confirm "approriate"

13.4. Does graphic material enhance clarity of the results being presented?

Yes - see above 13.3

14. Data Analysis

14.1. Is the approach appropriate to the type of data collected?

YES

Statistical analysis of quantitative study appears appropriate, and tests chosen similarly appear appropriate (see 8.2 –data analysis). Detailed rationales and results provided by author.

14.2. Is any statistical analysis correctly performed?

YES - See 8.2 data analysis

14.3. Is there sufficient analysis to determine whether "significant differences" are not attributable to variations in other relevant variables?

YES - See 8.2 data analysis of collected data (t-test)

14.4. Is complete information (test value, Df and p) reported?

YES

t-test

reported and useful with small sample size to indicate limits of the data given the relatively small sample size. Used appropriately (eg according to Watson et al 2006) as only used to look at differences between two groups (eg male-female; students with dependent children-students without dependent children).

Degrees of freedom (Df)

not reported on but likely to have been calculated within the SPSS workings as according to Watson et al(2006) it is usually required before the significant tests of t-test can be calculated.

Pearson Correlation Coefficient

was used to measure the strength of the association between continuous variables (age and SDL).

ANOVA (ANalysis of Variance) testing

was undertaken to explore variation among and between groups within the sample. This suggested that there was no difference between entry level qualifications and readiness for SDL. However, the ANOVA tests also suggested that this might be ifficult to generalise given the small sample size used.

15. Discussion

15.1. Is the discussion balanced?

YES

Logical and well-argued but a little limited compared to other similar studies (eg Yuan et al 2011)

15.2. Does the discussion draw upon previous research?

YES but limited and slightly dated

See comments 5.5 – possible omissions

Results are discussed viz a viz the seminal study of Fisher et al (2001) which was also undertaken in Australia, albeit a decade earlier. One other nine year old article used offering a theoretical explanation for SDL based on some key educational and professional nursing concepts.

15.3. Are the weaknesses of the study acknowledged?

YES but limited

Small sample size prevented all results being interpreted as were not statistically significant. No separate section on limitations provided (may be due to publishing limits) but some limits identified within results section

15.4. Are clinical implications discussed?

YES

In terms of educational and professional requirements and the need to consider when curricula planning.

16. Conclusion

16.1. Are conclusions supported by the results obtained?

YES &NO

Compared results with Fisher et al's (2001) seminar research and concluded: (link to 18.5 claim of interpretation)

Neither HEI nor number of students within an undergraduate nursing programme influence a student's SDL abilities

NO - not clear how this conclusion arrived at from results of this one study (weak evidence from results) as not explicit from SDLRS used/small sample size.

SDL readiness increases with life experience with younger nursing students less ready for this type of learning

YES: Clearly supported by statistically significant results

SDL readiness does not appear influenced by gender

YES: Clearly supported by statistically significant results

Suggesting that could include male students in own sample without problems. However, idiographic nature of IPA means that I may not need to always focus on similarities but uniqueness to each person in the context of their lived world.

It appears that lack of ability to "self-manage" (SDLRS sub scale), - rather than lack of "desire for learning" and "self-control" (also subscales of SDLRS), - is the major factor in reducing nursing students readiness for SDL

YES: Clearly supported by statistically significant results suggesting that even students who are ready for SDL may lack some of these SDL skills including: the ability to

seek out additional information
manage time
be self-disciplined
plan learning
set time for learning
apply methodical and systematic approaches to learning
problem solve
prioritise
seek out additional support

Not all adults are self-directing when they arrive in HE and not all are ready for this

YES: Clearly supported by statistically significant results

SDLRS used has the potential to be used as a useful screening tool to help target those students who may need the most support/are least ready for SDL

YES: Clearly supported by statistically significant results and ease of tool used and even perhaps high response rate of this study.

SDLRS may not require all the items in each subscale to be a valid and reliable tool to assess SDL readiness but further research may be needed

YES: Clearly supported by statistically significant results and in particular the strong correlation between each item in the subscales.

16.2. Are the implications of the study identified?

YES - Curriculum planners and faculty staff to be aware of and design/facilitate:

self-management skills in the early stages of any undergraduate nursing programme.

student nurses may always require contact with "teachers" to support, encourage and direct SDL, especially at the outset of undergraduate programmes (a number of strategies recommended)

SDL skills remain important for professional and HE competences and thus need to be a key but balanced feature of programmes/learning and teaching strategies.

17. Recommendations

17.1. Do the recommendations suggest further areas for research?

Further research on the SDLRS to validate an abridged version that may be easier/more user friendly for use as a screening tool. A larger sample size to assess whether dependent children have an influence on SDL readiness among nursing students.

17.2. Do the recommendations identify how any weaknesses in the study design could be avoided in future research?

NO

Not mentioned – except to state that use of the SDLRS with postgraduate students might be useful as only researched to date with undergraduate nursing students.

18. Argumentation Analysis (Hart 1998: 90)

18.1. Claim of fact

Are statements that can be proven to be true or false by verification and refutation using evidence such as an authoritative reference. The differ from other types of claims in that other claims (eg 18.2 to 18.5) often require "additional warrants and backing for their acceptance" (Hart 1998: 90)

Ϋ́ΕS

Claims of fact supported by evidence from authoritative references (eg Australian NMC) and empirical findings

18.2. Claims of value

Are judgements about the worth of something that cannot be proven true or false but does require some form of qualifying standard and/or counter claim if challenged (Hart, 1998:90).

In discussion, there is a claim based on Patterson et al's (2002) theoretical review/defence of SDL that claims that SDL provides students with the necessary competences to become lifelong learners. However, no empirical/research based evidence is provided (akin to many other studies reviewed), no does this appear a well research area.

NB: Theoretical defence (not empirical/research based) – evidence and reasoning accepted for this claim appears a key theme on the literature

18.3. Claims of policy

Are normative statements about what ought to be done, rather than what is done.

Key points section within implications offer normative strategies but these strategies appear unconnected to the study results and based more on adult learning theory/pedagogical ideas.

18.4. Claims of concept

Are about definitions and the values implied in the accompanying discourse (eg emotive language; restrictive language) that can influence interpretation. Thus, not simply about how defined in a dictionary per se.

One of the few articles that questions Knowles (1998) ideas about andragogy and the claim that

adults are by nature self-directing which appears a less restrictive approach NB: Does appear to reflect a marginal or minority discourse in the SDL literature (may need to check with further and on-going reading.

18.5. Claims of interpretation

Are about proposals and recommendations on how the data/evidence are to be understood. Premise being that "facts mean nothing without interpretation" but interpretations "can and do differ" (Hart 1998:90).

Not clear how arrived at first conclusion from results gained suggesting a claim of interpretation (see 16..1.1)

8.4.4 Appendix four: Participant background information

Pseudonym	Brief biography
Anna	Anna is a student in her late forties who previously worked in the public sector in a middle management role. She has always wanted to be a nurse but took time to bring up her family first. Her children have now left home, and she feels the time is right to embark on her second career. She undertook an Access to HE programme prior to entry.
Beatrice	Beatrice is in her early twenties and commenced the programme following a gap year in which she travelled abroad following her A-levels as her career plans were uncertain on leaving school. On her return and still unsure of her future plans, Beatrice started working in social care and recognised a desire to become a qualified nurse. Beatrice lives at home with her parents who are graduates and work in various senior health care professions.
Charlotte	Charlotte is a graduate in her late twenties who lives with her husband who is also a graduate. Charlotte wanted to change career following a period of working as a health care support worker.
Claudia	Claudia is a student in her mid-thirties who lives with her school age children and husband. She was an experienced health care support worker and undertook an Access to HE programme at a local FE college. She is the first generation in her family to go to university.
Harriet	Harriet is in her early twenties and commenced the programme straight from studying her A-levels. She lives with her boyfriend who previously went to university. Harriet is the first generation in her family to go to university and was keen to do so from a very young age.
Helen	Helen is a student in her mid-fifties who lives with her husband, both are graduates. Helen's adult children have left home and have both graduated from university. Helen has most recently worked as an experienced health care support worker following time taken to raise her family.
Laura	Laura is a student in her late forties who previously worked in various job roles before becoming an experienced health care support worker. Laura never anticipated going to university but was encouraged to apply by her previous employer who felt she had much to offer professional nursing. She lives with her partner and her adult children live nearby. One of her children went to university but her parents did not. Laura undertook an Access to HE programme prior to entry.

Pseudonym	Brief biography
Lydia	Lydia is a student in her mid-thirties with school age children and partner. She has worked in health and social care for a number of years in support roles and undertook the Access to HE course. She is the first generation undergraduate in her family.
Millie	Millie is a student in her mid-twenties who worked in retail prior to deciding to change career. She lives with her boyfriend who has not been to university but some of their shared friends have. Millie is a first generation undergraduate in her family and she undertook an Access to HE course.
Natasha	Natasha is a student in her mid-thirties who lives with her school age children and husband. She held a middle management position prior to commencement of the programme and undertook an Access to HE programme at a local FE college. She is the first generation in her family to go to university.
Ruby	Ruby is a graduate who decided to change careers in her mid- twenties. Her previous degree was art based and did not involve much academic written essay work. Ruby describes the programme as very different to her previous higher education experience where independent learning was focused on developing her art portfolio.
Toby	Toby is a married student in his early thirties. Nursing is a second career but one in which he states he has always been interested in but did not feel the time was right when leaving school. His wife is now able to work to support the family income and therefore Toby and his family felt the time was now right to commence the programme.
Ursula	Ursula is a student in her early thirties who lives with her school age children and husband. She undertook an Access to HE programme at a local FE college following time spent bringing up her children and is the first generation in her family including her husband to go to university.

8.4.5 Appendix five: Participant information sheet

Participation Information Sheet

Research study

How is self- managed independent learning experienced by undergraduate student nurses on their Bachelor of Science adult nursing programme?

Invitation

You are being invited to take part in a research study.

Before you decide whether to participate it is important for you to understand why the research is being done and what it will involve for you. Please take time to read the following information carefully and discuss it with others if you wish. Please also ask me if there is anything that is not clear or if you would like further information. It is important to take time to decide whether or not you wish to take part.

There is a wealth of literature that explores the role of self- managed independent learning within both higher education and nursing but limited research that explores the experiences of this from the perspective of students themselves. Interestingly, there is even less known about this from the perspective of student nurses. This study therefore aims to explore student nurses' own experiences of self- managed independent learning in order to better understand this phenomenon.

What is the purpose of the study?

The aim of the study is to gain a deeper understanding of t self- managed independent learning experience in nursing from the students' perspective within the context of their BSc (Hons) adult nursing experience. It is being undertaken as part of my own PhD studies at Bournemouth University and not in my role as a member of the programme team

Why have I been chosen?

You have been chosen because you are an adult nursing student and have experience of self-managed independent learning as part of your degree programme. It is anticipated that approximately ten adult nursing students with experience of self-managed independent learning will be recruited to participate in this study.

Do I have to take part? No

Your participation is entirely voluntary, and it is up to you to decide whether or not you wish to take part. If you do decide to take part, you will be given this information sheet to keep. I will also describe the study and go through this information sheet with you. If you still wish to proceed, I will then ask you to sign a consent form to show that you agree to take part. I will also provide you with a signed copy for your own records and store the original securely. Your undergraduate education will not be adversely affected whether you decide to participate or not.

Can I withdraw from the study? Yes

You can withdraw at any time and do not have to give a reason. You can withdraw in writing/via email if this is preferable and only need to state that you wish to withdraw, no reason is needed. This will not affect you adversely and any information already given will not be used within the study. Again, this will not affect your education, nor your progress on the nursing programme.

What will happen to me if I take part?

You are being asked to participate in a one to one semi-structured interview lasting about an hour which will be digitally audio-recorded for analysis at a later stage. During the interview, you will be asked to talk freely about your experiences of self-managed independent learning while on the BSc (Hons) adult nursing programme. I may ask a limited number of open questions during this time.

You are also being asked to participate in a small number of follow-up interviews, anticipated to be no more than two or three, where I would like to ask follow-up questions on issues you or others may have raised. This is in order to check that I have accurately understood and captured your experiences from your own perspective.

If you are willing to participate, we will negotiate mutually convenient times and dates where the digitally audio-recorded interviews will take place. The interviews will take place at the university in a private area free of distractions. This (data collection) stage of the study should last no longer than twelve months.

Are there any disadvantages of taking part? No

It is not anticipated that you will suffer any risks or be disadvantaged during the research study. However, if you do experience any emotional and psychological discomfort as a result of reflecting on your experiences, you are free to stop the interview whenever you wish. If you feel upset after the interview, the university provide a number of services to support your health and wellbeing which you may wish to access The AskBU team can provide contact details and can be contacted on

Tel: 01202 868686 Email: askBU@bmth.ac.uk

Web:

http://studentportal.bournemouth.ac.uk/help/askbu

What are the benefits of taking part?

While there are no immediate benefits for participating in this study, it is hoped that the information that you share will help to develop a greater understanding from the students' perspective of self- managed independent learning. It may therefore help to support other students in the future. You may however gain some benefit in discussing and reflecting on these experiences in terms of your own personal, professional and academic development

Will the information I give be kept confidential? Yes

All information obtained from you will be handled in a confidential and respectful manner. For example, it will not be shared with your academic advisor, nor other members of the programme team and will only be used for the purposes of this research study. You will also not be identified in any reports or publications that result from this. For example, I will allocate you a coded pseudonym and this is how you will be referred to throughout the study. You will therefore not be identifiable in my doctoral thesis or in any subsequent reports or publications that may result from this. However, should you disclose any information that indicates a significant risk of harm to you or others, I am duty bound to report this. I will however discuss this with you before doing so and explain my rationales for taking any such action in line with current university and professional nursing guidance.

Where will the information be kept and who will have access to it?

All the transcribed and audio information you provide will be stored in a locked filing cabinet and on a password protected computer. Only myself and my supervisory team will have direct access to the information you provide. This information will be held securely for five years following completion of the study and then destroyed.

What will happen to the results of the research?

The results will be presented in my final thesis. It is envisaged that part of the study will be published in professional and academic journals as well as presented at conferences. However, you will only be referred to by the coded pseudonym allocated to you.

Who can I contact if I have any concerns or questions?

If you have a concern about any aspect of the study and at any stage, please contact myself in the first instance. If I am unable to help, you can contact my supervisors.

Nikki Glendening (researcher)

Senior Lecturer in Adult Nursing Faculty of Health and Social Sciences, Bournemouth University UCY Campus, 81 Preston Road Yeovil Somerset BA20 2DN Tel: 01935 845544 nglendening@bournemouth.ac.uk

Supervisors contact details:

Professor Elizabeth Rosser (supervisor)

Deputy Dean of Education and Professional Practice Faculty of Health and Social Sciences (FHSS) Bournemouth University Email: erosser@bournemouth.ac.uk Telephone: 01202 967280

Dr Liz Norton (supervisor)

Senior Lecturer

Faculty of Health and Social Sciences (FHSS) Bournemouth University Email: Inorton@bournemouth.ac.uk Telephone: 01202 967264

Dr Helen Farasat (supervisor)

Senior Lecturer in Child and Young People Nursing Faculty of Health and Social Sciences (FHSS) Bournemouth University Email: hfarasat@bournemouth.ac.uk Telephone: 01202 961574

What should I do now?

Please take this sheet away with you and think about whether you would like to take part in this research. Once you have decided and/or are interested in finding out more information, please contact me and we can discuss a mutually convenient time to meet and discuss this study and information sheet. During this meeting and if you still wish to participate, we can complete and sign the consent form. I will then provide you with a copy and retain the original in a safe and secure place.

Thank you for taking the time to read this information and for your consideration in taking part in this research.

It really is much appreciated. Kind regards, Nikki Glendening nglendening@bournemouth.ac.uk

8.4.6 Appendix six: Consent form

Consent Form

Project title

How is self- managed independent learning experienced by undergraduate student nurses on their Bachelor of Science adult nursing programme?

Name of researcher: Nikki Glendening

Position: Post Graduate Researcher

Faculty of Health and Social Sciences (FHSS) Bournemouth University

Contact details: Email: nglendening@bournemouth.ac.uk

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Name of participant:

How is independent self-managed independent learning experienced by undergraduate student nurses on their Bachelor of Science adult nursing programme?

Please Initial Here	
I confirm that I have read and understood the participant information sheet for the research project named overleaf and have had the opportunity to ask questions.	
I understand that my participation is voluntary and that I am free to withdraw at any time, without giving reason and without there being any negative consequences.	
I understand that my name or practice area, will not be linked with the research materials, and I will not be identified or identifiable in the report or reports that result from the research.	
I understand that I am being asked to take part in a number of audio/tape recorded interviews	
I understand that anonymised extracts from the audio recorded interviews may be used in presentations (both internal and external to the university) and any future publications.	
I agree to take part in the above research project.	
I give consent for the interview	
Preferred conact method/details: phone/e-mail	
Name of Participant Date Signature:	
Name of Researcher Date Signature:	

8.4.7 Appendix seven: Semi-structured interview framework

Interview Framework

Introduction

The aim of my research is to provide a greater understanding about how self-managed independent learning is experienced by adult nursing students like yourself.

Operational definition:

"Learning in which students, - either on their own or in collaboration with peers, - are required and supported to play an active, engaged and increasingly independent role in their own learning experience, guided by curriculum content, pedagogy, assessment and the learning environment."

Length/frequency of interview

The interview should last no more than an hour and will be recorded using this Dictaphone. It may be repeated at a later date to follow up issues raised if you are happy to consent to that.

Focus of interview/reassurance

There are no right or wrong answers to any of the questions that I will ask. Instead I am interested in your experiences, thoughts and what is important to you. While I may ask a number of questions during the interview, I am more interested in what you want to say and what has been important and most significant to you.

Consent form

I would like to go through the consent form with you to clarify you are happy to continue and are clear how the information you provide will be used.

Interview question:

Grand tour question - asking about how things usually are/are experienced

- What does self-managed independent learning mean to you?
- Can you tell me about your experiences of self-managed independent learning?

If participant unsure, ask

How would you define/understand it?

Prompts:

Specific grand tour question – asking about specific experiences

Can you describe a specific example of this?

Mini-tour and probing questions – asking about and exploring a smaller unit of experience mentioned by participants

- How did this make you feel? (affective)
- How did you make sense of/understand this? (cognitive)
- What helps motivate you with this? (motivational)
- What is the most important? (salience)
- How do you manage this? (regulation/management)
- Can you tell me about any challenges have you faced? (challenges)
- Can you tell me about the support you received? (support)
- What has helped you cope and what have you learnt? (coping, resilience, metacognition)

Non-directive active listening responses

Clarification response: Clarifies understanding

■ "Are you saying that you ..."

Echoing response:

Repeating last few words using the participants own words to help develop understanding

Paraphrasing response:

Repeating the message using my own words to help develop understanding

Reflective response:

Repeats message to tentatively clarify/check out feelings with the client: "It seems that you feel

Anticipated challenges:

Possible responses to participant who ask:

Does this answer your question?

It's your experience that is important here.

Was that the right/wrong answer?

I'm not so interested in "right or wrong" answers. Instead, I am more interested in your experiences and thoughts as well as what you feel is important. What do you think?

Final questions:

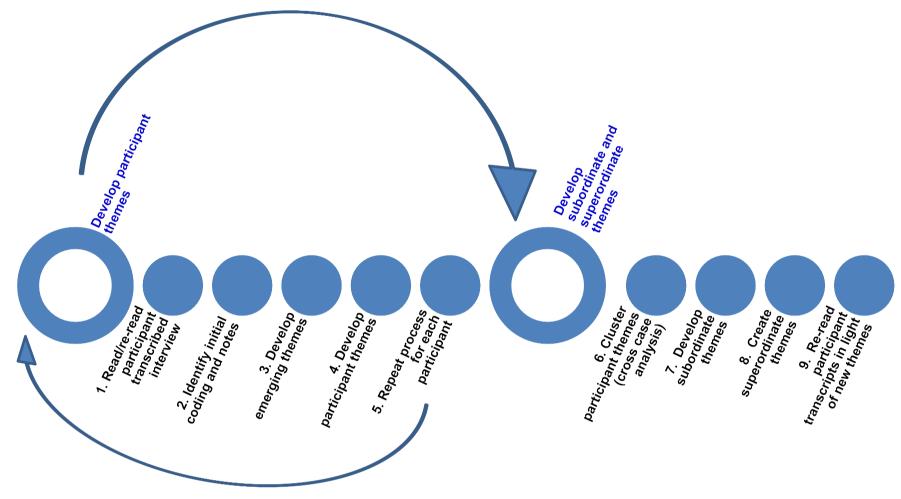
- Is there anything else you would like to share about your experiences of self-managed independent learning?
- I don't think I have any more questions. That was really interesting Thank you.
- Was that OK?
- How has it felt to talk about your experiences?

Acknowledge participation/reinforce gratitude/promote well-being

- Thank you for participating in this study ... it is very much appreciated.
- Everything you have said will remain confidential as agreed.
- What will you do now to relax after the interview ... anything nice?

Notes

8.4.8 Appendix eight: Process of analysis from individual participant to cross case analysis



8.4.9 Appendix nine: Extract from participant transcript

Total interview duration: 63 minutes and 29 seconds

Interview extract with Lydia with examples of

- descriptive and emerging interpretative questionings posed during the initial analysis (stage 2: Initial noting)
- the emergent themes that developed from this (stage 3: developing emerging themes)

Emergent Theme	Time	Speaker	Verbatim Transcript	Explanatory comment
	00:19:10	Researcher	Okay. Thanks. You were saying about the banter to start with and that is was therapeutic. In what way is it therapeutic?	
Location Self-monitoring Wasted time Thinking time	00:19:21		I'm like, "Come on, do some work stop wasting time." Everyone agrees but the silly	Location (campus) appears to
	00:19:38	Researcher	No?	
Procrastination Embarrassment Social (peer) interactions Silence and engagement	00:19:39		anything just to keep the, I don't know, probably still trying to slightly avoid actually getting on and doing anything even though we've come in and we all bring in sweets andyeah (laughter). I think it continues for a little while, but it did take a good two hours when I came in last week for us to actually get on and start doing things. But then there's absolute silence and everyone was engaged. And nothing disturbed it once we were set, once we realised that you know, "Okay, we can muck about because we haven't got you know, a lecturer in the room but we feel okay now." (Laughter) But once we'd sort of settled down, it stayed that way. And when we left, we were quite calm but when we came in we were very like hyperactive and stressed	Change of location appears helpful to limit procrastination but SMIL is not immediately engaged in. Embarrassed laughter and use of the term "muck about" appears to imply some degree of self- conscious emotions related to this delay in task focus. However, this period of social interaction also appears an important pre-cursor for the subsequent SMIL engagement. Passing around sweets may have some prosocial meaning for this group Earlier dislike of silence in the home environment appears replaced by a valuing of silence (why is this?) Appears to be a transitioning from negative emotions and stress to a sense of calmness
	00:20:26	Researcher	Are the sweets important then?	
Social chat	00:20:30		know. I think everything goes	Sweets create safe and structured social environment - perhaps for peer dialogue?

	00:20:38	Researcher	Why is that then?	
	00:20:39	Lydia	in the trial	
Social interaction Gossip True self Emotional release Sense of connection/ shared experiences (in it together)			it'sI don't know. It's not just comfort eating while we're sort of, I don't know. A bit like cats padding on the furniture before they get comfy. Sweets give us an opportunity to just talk and be ourselves. It's a bit like I'll have sort of a little nibble and a bit of a gossip and the stress goes away cos you realise it's not just you who is struggling or	Social dialogue prior to SMIL engagement appears important ritualistic feature for emotional regulation, a sense of comfort and coping with stress. Lydia appears to gain a sense of social connectedness from this and the gossip she refers to appears to help her cope. She appears to be able to be her "true- self" in the company of peers as they share challenges related to multiple social roles perhaps
	00:21:00	Researcher	A ritual that you do each time?	
Ritualistic Sense of connection Empathy and shared experiences Labelling emotions Increased self- awareness	00:21:04		we feel close and we can say things about how we feel. And	This dialogue and sense of social connection appears to help Lydia become more self-aware as she is able to name her emotions and understand them better. This labelling appears to be a cathartic experience for Lydia and seems possible because of an implied sense of empathy in the study group and shared understanding perhaps
	00:21:23	Researcher	So that helps you to say that?	
Overwhelming negative affect when alone (at home) Catastrophising /procrastination Self under threat Limited concentration	00:21:27		why but I can't concentrate, and I just get everything out of proportion and think the worst about my ability to do this. — and then I just want to procrastinate and put it all off so I can at least feel better for a short while at least. But, I come in here and suddenly the words come tumbling out of me and I know what's wrong and I know	Lydia is contrasting her SMIL experience with peers on campus with that when she is engaged in SMIL alone in the home environment. SMIL alone at home appears emotionally overwhelming and her negative affect appears to be leading to a degree of catastrophising and flawed thinking. It also appears to threaten her sense of self. Her subsequent desire to procrastinate appears to be a way of temporarily regulating her negative emotions. Lydia appears to be able to articulate and make sense of her emotional distress when she is able to name her emotions in peer company.

8.4.10 Appendix ten: Example of theme clustering (Ursula)

	eme	Page	Participants key words/phrases
<i>A</i> ۱	world that cannot be		
un	derstood or controlled		
•	Uncertain expectations	1	Didn't understand what was expected
•	Invisible self	2	My effort is just not recognised
•	Feeling unprepared	1	Nobody told me it would be like this
•	Feeling isolated	5	I felt very alone with my stupid thoughts
•	Out of comfort zone	7	Everything is always new and you are constantly being
			pushed to learn more
•	Multiple expectations and	16	Everyone wants a bit of me but there's only 24 hours in
	roles		the day
Со	nstantly living with unwanted		
em	notions		
•	Feeling overwhelmed	3	It just gets too much. How am I expected to think?
•	Shame and guilt	16	Can't remember a time when I did not feel ashamed or
			guilty
•	Anger at lack of compassion	5	I hate it that they forget what it's like to be a student and
			the sacrifices you have to make
•	Struggles with new identity	18	I cry all the time. I just want to be a good student
•	Disappearing self	16	There is no time for me, no time to remember who I am
•	Emotional roller-coaster	9	I'm up one minute, down the next. Up, down, up down and so it goes on
Tr	ving to take back control		
•	Distancing and avoidance	3	I know I procrastinate but I need the head space, so it's
		•	not really wasted
	Free time	3	I deserve the time off
	Study time (temporal)	22	It's only study time If I have achieved something
	Inner voice	17	I try to listen to myself now
	Being hopeful	13	I just constantly hope it will get easier and make sense
	_ cg //opera/	.0	me
	Feeling connected	19	Now we study together, I can think. I can relax. I can be
	. coming controlled		myself.
	Feeling gratitude	19	I will always feel grateful to my study friends they've got
		10	
•	reeling gratitude		me through
•		15	me through
	Naming emotions Wanting something different	15 24	me through Saying how I feel out loud helps me cope It's no longer just good enough for me to pass. I'm going

8.4.11 Appendix eleven: Documenting verbatim text evidence in sub and super ordinate themes:

Superordinate theme: Connecting socially
Subordinate theme: Managing own and other's emotions

Anna	We'd just get together and just bitch about our family and feel better for it
Beatrice	When I talk in the library with the others you sort of understand how you feel and why you've been feeling so confused for so long. You can just say it to them, then you realise it's not so bad because you just said it The sky didn't fall in and I know I'll be okay.
Charlotte	Being off topic is okay as you feel better with people than when you're alone as just looking at them or hearing them, the ideas come back with clarity and I am once again at one with the world
Claudia	and it's okay to say "I hate my husband" – they understand what I'm on about
Harriet	When I'm with others I can work out how I feel, even though it might make me stressed
Helen	He [husband] doesn't mind listening and as I walk away, I realise what the problem is and why I felt so down
Laura	It's not until I sort of hear myself speak that I realise how I feel
Lydia	It's like – It's just like just being able to say to the girls [peers in study group], "I'm stressed or I'm anxious" and suddenly you realise "Yes I am" and then you realise "that's why you've been feeling so horrible and can't concentrate"
Millie	I can never work out how I feel until I've chatted with the others
Natasha	Like we recognised we needed time together at the start to help us focus and it helped us relax, be less anxious and start thinking. It's an important routine for us and it works. We do it all the time now We just talk about our family and how horrible they can be sometimes. We love them but they can just so misunderstand us
Ruby	I can get really stressed but the others just make me feel normal
Toby	We help each other to feel okay by just being there I guess
Ursula	I like studying with the group now as they get me, they don't judge me. It's that empathy kind of element of it, rather than sympathy that you kind of find helps and makes you feel better about yourself. Don't get me wrong I love my family, but I just don't get that from the family

8.4.12 Appendix twelve: Documenting the cross-case analysis

Process started with sticky notes and concept mapping and moved to an electronic tabulated form for ease of data management

Feeling overwhelmed

	Anna	Beatrice	Charlotte	Claudia	Harriet	Helen	Laura	Lydia	Millie	Natasha	Ruby	Тову	Ursula	Present in at least half
Uncertainty v certainty	√	✓	✓	✓	✓	✓	>	>	✓	>	✓	√	√	Yes
Fragile sense of self	✓	✓		✓	✓		<	✓	✓	✓	✓	✓	✓	Yes
Being on an emotional rollercoaster	✓	√	√	√	√		√	√	√	√	√	√	✓	Yes
Managing multiple identities and expectations	✓			√	√		√	√	√	√	√	√	✓	Yes
Being doubted by	✓	✓					√				√		✓	No

The pressure of time

	Anna	Beatrice	Charlotte	Claudia	Harriet	Helen	Laura	Lydia	Millie	Natasha	Ruby	Тову	Ursula	Present in at least half
Study v free time	✓	✓	✓	✓	✓	✓	✓	√	√	✓	√	✓	√	Yes
Wasted	✓	√		√	√		√	✓	✓	√	√	√	√	Yes
Changing temporal orientations	✓	√	√	√	√	√	√	√	√	√	√	√	√	Yes
Time as a privilege			✓		✓							√		No

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