

# Coping with Motherhood and Education: Revealing Strategies of Student Nursing Mothers in Distance Education Programs in the Upper West Region, Ghana

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## ABSTRACT

This study explores the social and psychological coping strategies employed by nursing-mother students to manage the challenges of balancing their education, childcare, and family responsibilities. A case study design was employed. It adopted purposive sampling technique to select 10 respondents for interview. Semi-structured interview guide was used for the collection of data. The data were analysed using thematic analysis with the aid of Dedoose analysis software. The study found that nursing-mother students employed various social and psychological coping strategies to manage the challenges of balancing education, childcare, and family responsibilities. Socially, they increased contact hours with their children, sought help from family members, prioritized essential activities, and addressed conflicts through effective communication. Psychologically, they relied on effective communication, motivation to succeed in exams, additional studying, peer-teaching, and technology. Sleep was used as a last resort for psychological calming. These strategies helped them adjust to societal demands while continuing their education. To support nursing-mother students, two recommendations are proposed: the management of UCC study centers in the Upper West Region should establish supportive peer networks where they can share experiences and find emotional support, and integrate stress management workshops to equip them with coping strategies for balancing their responsibilities and promoting well-being.

## 1. Introduction

Having children and going to school are two important components of a woman's life that Balancing the responsibilities of being a mother and a student is a challenging task, particularly for nursing students who are also mothers. It requires careful planning and coordination to manage childcare, nursing duties, studying, and attending classes. However, with the

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introduction of distance education programs, student nursing mothers now have the opportunity to pursue their academic goals while fulfilling their maternal duties.

Distance education programs offer a viable option for student nursing mothers who are striving to balance parenting and studying. These programs provide flexibility, allowing students to learn from the comfort of their homes or other remote locations. As a result, the popularity of distance education has increased among nursing mothers. Nevertheless, there are several strategies that student nursing mothers can employ to effectively cope with these challenges.

Coping strategies play a crucial role in overcoming challenges in various aspects of life. They involve the psychological and behavioral patterns individuals adopt to manage their thoughts, feelings, and actions during challenging situations (Sheroun et al., 2020). People employ different strategies to cope with stressful or challenging events. In Africa, support from family, particularly husbands, grandparents, and other relatives, is an essential coping strategy that cannot be overstated.

Skitmore and Ahmad (2003) conducted studies identifying three types of coping behaviors for dealing with role conflict. These coping behaviors were derived from three role components: structurally imposed demands, personal role conception, and role behavior. Type I coping, known as structural role redefinition, involves actively addressing role conflicts by mutually agreeing with role senders on new expectations. One way to change structural demands is by sharing role tasks, such as cleaning, washing, and childcare. Type II coping, called personal role redefinition, involves changing one's personal perception of role demands received from others. This may include setting priorities among and within roles, ensuring certain demands are always met (e.g., the needs of sick children), while lowering the priority of others (e.g., dusting furniture). Type III coping, reactive role behavior, entails striving to improve role performance without attempting to change the structural or personal definition of roles. This coping strategy assumes that role demands are unchangeable, and the person's main task is to find ways to meet them, demonstrating a passive or reactive approach to roles (Skitmore & Ahmad, 2003; Kuruvilla & Seema, 2016). Although the demands on student nursing mothers may limit the effective implementation of these theories, they can still be helpful in coping with the stress associated with schooling and motherhood.

While there is no single approach to dealing with psychosocial challenges, different proponents from various perspectives categorize coping strategies in their own ways. Kato (2013) identified three categories of coping strategies: reassessing coping, distancing coping, and constructive coping. Reassessing coping involves patiently waiting for a suitable opportunity to act and bring about change or improvement in a situation. It is an active strategy that requires self-control, avoiding premature actions, and waiting for the right moment. Distancing coping involves actively disengaging from a stressful relationship by avoiding contact and overlooking the person causing stress. Student nursing mothers may avoid stressful situations to prevent becoming overwhelmed by their challenges (Allen & Leary, 2010). Constructive coping involves actively seeking ways to improve, maintain, or sustain a relationship without causing harm to others. This may involve self-reflection and trying to understand the feelings of others, emphasizing respect and harmony in relationships.

Baqutayan (2015) proposed that coping functions involve managing changes that lead to stressful situations, preventing stress through individual experiences, and managing stress after events occur. However, he also highlighted that not all coping behaviors are beneficial. Inappropriate coping behaviors, such as smoking or relying on alcohol, can have adverse effects on the mind and body, leading to physical and psychological issues. Therefore, it is important to adopt effective coping behaviors that reduce the negative effects of stress. Being a student and a mother simultaneously is challenging but manageable with careful planning

(Zahra, Akmal, Habib, & Raza, 2017). Failing to cope with the stress caused by academic demands and parenting underscores the need for cautious preparation in managing these activities (Moreau & Kerner, 2012).

A study by Grohman and Lamm (2009) found that 93.3% of student nursing mothers reported emotional support from their husbands and peers, as well as effective time management, as effective coping strategies. The study emphasized the importance of emotional and physical support in the success of student nursing mothers. This finding aligns with Maisela and Ross (2018), who also highlighted the significance of emotional and physical support from family and friends as coping strategies for student nursing mothers.

Additionally, student mothers may attempt to redefine their roles as mothers, reassess their expectations as students, or renegotiate the support they receive from family and friends (Lockwood, Smith, & Karpenko-Seccombe, 2019; Murphy & Cloutier-Fisher, 2002). They may also redefine their perception of the university system and their role within it. Student mothers may employ any or all of these strategies at different times.

When examining the consequences of women combining paid work and family roles, Moen (1992) concluded that the impact of multiple roles on women depends on various factors in their lives. These factors include work conditions, family role conditions (such as the number and age of children), and the extent to which women perceive themselves as trapped or committed to their work and family roles.

Moen, Lam, Ammons, and Kelly (2013) suggested that managing multiple roles, such as fulfilling job demands, adhering to time schedules, meeting family obligations, and engaging in social activities, can be stressful, time-consuming, and sometimes impossible. Women use time management and organizational strategies to cope with this conflict. It is evident from the reviewed literature that student nursing mothers can adapt the three types of coping behavior, seek emotional support from their husbands and peers, and effectively employ principles of time management to cope with the numerous challenges they face.

Despite the increasing popularity of distance education programs and the growing number of student nursing mothers, there is a lack of comprehensive research specifically focusing on the coping strategies employed by these individuals to manage the challenges of motherhood and education in Ghana. Understanding these coping strategies is crucial in supporting and empowering student nursing mothers, as well as informing the development of targeted interventions and support services. Therefore, this study aims to investigate the coping strategies employed by student nursing mothers in distance education in the Upper West Region of Ghana to address their psychosocial challenges.

### **1.1. Research Questions**

1. How do student nursing mothers in distance education programs in the Upper West Region cope with social challenges related to motherhood and education?
2. How do student nursing mothers in distance education programs in the Upper West Region cope with psychological challenges related to motherhood and education?

## **2. Methodology**

### **2.1. Research Design**

In this qualitative research study, the researcher employed a case study research design to explore the coping strategies utilized by student nursing mothers in distance education within the Upper West Region of Ghana. The choice of a case study aligns with Yin's (2014) assertion that it enables the examination of a phenomenon within its natural context. Moreover, case studies are particularly suited for addressing how and why questions, as well as investigating the contextual factors relevant to the phenomenon. The research process commenced with the identification of a specific case, as emphasized by Creswell (2014). By employing a case study design, the researcher aimed to gain a comprehensive understanding of the phenomenon under investigation, while also conducting interviews with participants in their authentic environment to derive meaningful insights.

### **2.2. Population, Sample and Sampling Technique**

The population for this study comprises nursing mothers enrolled in distance learning programs at the UCC (University of Cape Coast) across four learning centers in the Upper West Region. Each learning center has an average of 20 nursing mothers, resulting in a total of 80 nursing mothers pursuing various programs with the UCC. A sample of 10 nursing mothers was selected from the four study centers within the region. The study utilized a purposive sampling technique to recruit the nursing mothers. Purposive sampling was chosen as it allows the researcher to specifically target participants who possess the necessary characteristics to provide the most relevant and valuable information (Kumar, 2011; Neuman, 2014; Polit & Beck, 2010).

### **2.3. Data Collection Instrument**

The researchers utilized a semi-structured interview guide to collect information from the participants. A semi-structured interview guide consists of open-ended questions that offer flexibility and freedom during the conversation process (Hammer & Wildavsky, 2018; Kallio, Pietilä, Johnson, & Kangasniemi, 2016). This tool allowed the researchers to delve deeper by probing for novel and engaging responses. The questions were developed after reviewing relevant literature that aligns with the study's objectives.

### **2.4. Data Processing and Analysis**

The researchers employed thematic analysis to analyze the data. Braun and Clarke (2006) describe thematic content analysis as a method that involves identifying, analyzing, and reporting patterns within data, enabling the researcher to organize and describe the dataset in detail. Following each interview, the researchers transcribed the conversations verbatim. To ensure consistency, they listened to the audio recordings while comparing them with the transcriptions. The transcribed data were carefully reviewed multiple times to ensure accurate understanding and interpretation of the interviews. This process allowed the researchers to immerse themselves in the data, examine it thoroughly, and gain a comprehensive understanding of its significance.

During the data collection phase, the researchers assigned codes to capture the key statements and related opinions based on the study objectives. These codes were consistently applied throughout the data collection process. By assigning relevant words or phrases to specific aspects of the participants' responses, the researchers developed a coding system. The codes

were then grouped to correspond to the different research questions and summarized into themes, consisting of sentences and phrases. To generate the themes and sub-themes, the researchers utilized Dedoose analysis software (version 4.12). Throughout the analysis, the emergent themes and sub-themes were critically reviewed. The researchers also referred to field notes from the respondents to support the identified themes. The coding themes were categorized into distinct reports, following Kumar's classification (2011). The themes and sub-themes were compared based on their uniqueness, frequency, commonalities, and differences. As the study progressed, the themes and sub-themes were refined and modified.

### **3. Analysis and Discussion of Results**

#### **3.1. Demographic Data**

The study involved conducting interviews with ten participants who were all pursuing tertiary education and aged between 21 and 29 years. Out of the ten participants, nine were married. While all participants were students, two of them were also engaged in trading, and one participant was working as a teacher. Among the student participants, some were nursing mothers who had social connections with three teachers, two farmers, a nurse, and a banker through marriage.

During the study, it was found that the participants had between one and two children each, with an equal distribution. Regarding religious affiliation, eight out of the ten participants identified as practicing the Islamic faith. With the exception of one participant who was studying social studies and English, all other participants were enrolled in early childhood development programs. Pseudonyms were assigned to each participant to ensure their identities remained anonymous during data analysis. The pseudonyms were used to protect the privacy of the participants.

### **4. Discussion of Results**

#### **4.1. Research Question One: Strategies for Coping with Social Challenges**

##### **4.1.1. Coping with Childcare**

Nursing mothers appreciate the need for them to always be available to their kids all the times. However, the challenge of schooling is making this quite impossible. So, mothers prioritized dietary, and health needs, among others to cover the gap. In prioritizing the care for their children whilst schooling, a participant put it this way:

*'I have to make sure that his health insurance card is always active so that in case of emergency he will get the needed medication. I also need to ensure that he eats a balanced diet'*(NM002).

Mothers, during all the challenges, devote enough time to the care of their babies. As a result, many would wake up very early in the morning to enable them to cater for the needs of the kids, before their routine household chores. To ensure that the kids feel their presence, the mother devotes their time to playing with the kids. This is outlined in the following text.

*'What I do is that I do well to give her the needed attention because at this age she needs attention. The little time I get I use it to play with her to make her feel my presence'* (NM005).

To ensure that the needs of the baby are always taken care of, some nursing mothers sent their mothers along to the school for the purpose and wondered why creche services are not available.

#### **4.1.2. Coping with Community Services**

A community seems to understand the need for nursing mothers to school more than other societal structures. This varies from one community to the other. In other communities, the members 'bastardize' and give names to pregnant and nursing mothers who school (especially single parents). Mothers have therefore adopted an acceptable way of absenting themselves from community services. An excerpt is as follows:

*'The community has realized the importance of my education, especially in this programme. So they have even exempted me from some of the community activities'* (NM001).

When necessary, nursing-mother students find reasons to avail themselves of community activities like communal labour and community meetings. This allowed them to explain other components of female education, especially nursing mother studentship to them. When there is a conflict between community activity and classes, a polite approach to obtaining permission is adopted to the advantage of nursing mothers. A participant put it this way:

*'I sometimes take off my time to be there when they call for any gathering or communal labour. I make sure that some communications go down well with members of the community [to] remove the perception that one's capability to further her education does not end when she gets pregnant...'* (NM002).

When permission is impossible because of the nature of the community activity, nursing mothers would rather sacrifice their study period to undertake the activity. This makes the community see the value that nursing mother students place on their communities. The community members on their part have taken a second look at the name branding and the derogatory remarks they had earlier put on these mothers.

*I would have to always go early and do something small about the particular activity the members would be undertaking during the weekends. When there is even the need I will always sacrifice a day and join them then the next day I will go to my lectures* (NM004).

#### **4.1.3. Coping with Family**

Student nursing mother reported that coping with their families remain the most difficult thing in their schooling periods. Integrated activities and effective time planning are important coping tools. Time is usually divided among the family, child and academic work. Mothers have adopted waking up early and sleeping late to ensure that all parties are served. Fetching water, attending funerals, cooking or going to the farm to collect some farm produce to the house, among others will have to be done before the child wakes up from sleep. If this is not that, family members would tag such a woman as lazy, belittles them, and have no trust and/or confidence in her. A few participants' remarks are outlined here:

*'It is not easy. But one thing I can do is to always wake up very early so that I can carry out some of the house chores like fetching water, cooking or going to the farm to collect some farm produce to the house before my child will wake up and start crying'* (NM001).

*I have to always plan the day's activities in a way that I can factor in some of the activities the family expects me to do all the time. I have to manage my time well. If*

*there is even the need, I would apportion my time to every house chore I am expected to carry out. I have to always wake very early and carry out some of the domestic chores before the child wakes up and starts to cry especially on the days that I should attend lectures (NM007).*

Family members have lost trust and thus stopped supporting nursing mothers (especially single parents) in their educational careers. This makes such mother work even harder, sometimes to the point of over working. To impress, nursing mothers sacrificed their study periods to do family activities.

In marital homes, however, mothers only need to learn how to coordinate the house activities with studies so that they do not conflict. With effective explanations and sacrifices to meet family needs, some family members have come to appreciate the need for schooling during this period and even serve as support systems for nursing mothers. Interactions in these homes are captured in the text by study participants as follows.

*'When I realize that the complains are just too much and I have not been close to them for some time now, I sacrificed some of the days I attend lectures so that I can attend to them. In the house, I still try to help in a little or offer a better explanation when I am too tired' (NM004).*

*'...I forego my leisure time because if I say I should enjoy my leisure time then a lot of things will go abnormal and unattended. I will not be able to cook for the family or carry out some household chores. In this way, I can meet their expectations' (NM010).*

Other nursing-mother students cope by alternating the days (especially Saturday and Sunday), or weeks between house work (mostly farming; funerals) and academic work, such that if this week is devoted to farm work, the other week will be devoted to academic work. In this way, many family members can understand, and even explain to their colleagues in support of the nursing mother.

Effective communication worked for many who engaged in it. When this is done, nursing-mother students get advocates who lobby with others to have favourable attitudes towards their schooling needs. Some husbands are beginning to help with cooking, whilst others help with handling the child. A participant's strategy is outlined below:

*'What I do right now is communication. I always explain to them so that they will understand the reason why I am here [school].... they turn to even care more for you. They always try to hear from you while you are in school' (NM006).*

Nursing mothers also cope with families by influencing the decision-making process so that adverse decisions are not taken and imposed on them. This goes to strengthen family ties and improves interpersonal relations, as everyone sees the decision as their own, as outlined.

*Sometimes I do take part in family decisions. Then I support the family in a way when the need arises (NM009).*

## **4.2. Research Question Two: Strategies for Coping with Psychological Challenges**

### **4.2.1. Coping with Academic Work**

Many nursing mothers reported putting in the greatest efforts here. Further sacrifices in the form of sleep and extra classes are made to be able to cope. After initial jittering starts, nursing mothers adjust to the learning environment and produce above-average performance. A study participant put much more clearly as indicated.

*I always go the extra mile ... when it comes to my studies. That is to say that I have sacrificed sleep, especially at midnight when the child and everyone are asleep to do my studies. We organize and invite a tutor to come and have a class with us. Through the extra classes, I can understand better what I could not understand during the instructional hours ... to cover up the model [and even] .... To revises them [our models] (NM001).*

*Extra classes are just good. The extra classes enable you to cover courses or topics that you could not cover with the lecturers. The extra classes enable you to catch up with the tutor and your colleagues if you have been absent from lectures for some time. Through the extra classes, you are able you ask all questions you could not ask in class and that increases your level of understanding ... (NM007).*

Other measures adopted by nursing mothers include: attending all lectures practically possible, contributing during class discussions, taking part in group studies and whilst praying for good health to cope with studies. To do this, they report to classes regularly and punctually so they take strategic seats in the lecture halls.

Other mothers engage their colleague students if attempts at getting the understanding from individualized studies do not yield the desired results. To some, this encounter is a two-way learning experience, which opens doors for further research, as a participant explained:

*'[I realized] I get more understanding when a colleague comes for me to explain something to her. When I can do that to her satisfaction it gets into and stays in my head. It equally benefits the one that has come for more explanation. Even when I am not able to explain I take the question from there and make research on it and offer the explanation later' (NM004).*

Group discussions work well for other mothers too. This is especially helpful for mothers who are not able to find time to participate in extra classes. Though mothers deliberately allocate time to studies, there are times when group studies are unavoidable. Some participants' remarks about group studies are outlined below.

*Aside from reading, I often take part in group studies. Some of the teachers don't teach all their topics and ... organise the extra classes [so that] if you are not able to participate, you [will have] to learn it on your own. Sometimes if you learn alone, you won't understand but if you are in a group, they will explain this better and you will see and understand what the person is saying (NM005).*

*It is helpful because sometimes you can learn something that you as an individual wouldn't have been to learn. The ideas shared there widen your scope of understanding and grasp of the concept. So sometimes there is no need to go and even open your model again (NM010).*

Nursing mothers also used technology to enable them to cope with academic work. The use of mobile phones has been helpful to nursing mothers in their studies, especially where distance, weather conditions, and economic state, do not permit. For instance, if face-to-face learning is not practicable, phone calls, and video calls, among others are explored to still keep in touch with a 'teacher' of a sort. Further explanations are as follows:

*What I do is, even sometimes when you are walking with people you are learning. Through phone calls, you connect with colleague students to know what they are learning or other things that are going on (NM006).*

*Considering how far apart we are from one another we don't meet physically to do group discussions but rather we do it on phone. So, through a phone call, we are always able to raise questions and discuss them (NM008).*

A major motivating factor that 'push' nursing mother to put-up their very best is the avoidance of referrals in exams. Night studies, extra classes, conference calls, the group discussions, among other strategies, all come because nursing-mother students want to avoid referrals as this participant explained further.

*First of all, I have to learn hard to always pass all my semester courses and avoid referrals. Because when you have so many referrals, it can frustrate or kill your morale to complete your successfully. So many referrals too can drain a lot of your money. So I study hard to excel in all semester exams so that it motivates me to complete successfully despite the challenges (NM007).*

Nursing mothers have also found the availability of creches to be helpful in learning. This is helpful for both the child's and the mother's academic work. A nursing mother explained the usefulness of a creche this way:

*When you send your child there, you have the confidence and trust that he will be safe. So as the child is away, you will be free to go about your duties and so by the time the child might have been brought back, you have already done a lot of the work (NM008).*

#### **4.2.2. Coping with Stress**

Participants usually rely on the help of relatives, especially mothers-in-law, husbands, grandmothers and others to do baby-sitting when they are stressed up. This gives them a breathing space to recoup some energy. This is how one of them put it:

*'When I am stressed up by work, I try to solicit help from people especially my mother-in-law to handle the child then I either sleep or continue to do the work little by little. When she is not around I have to always leave whatever I am doing and attend to the child. If the situation is too much I just try and put the child to sleep and I will also sleep' (NM007).*

Other participants assess the stressful situation, identify the cause and handle it so that it does not interfere with work. If it turns out that the work that is being done is the cause of the stress, participants would put away the work, rest their minds, ease the pressure, get some sleep if possible and then gather enough energy to continue. In this way, nursing mothers can empty themselves after sleep and see any other work undone as a new beginning. A participant captured it this way:

*'sometimes I have to just abandon the work and take enough rest. When I regain energy and sound mind then I will continue' (NM008).*

If the above does not relieve the stressful situation of student nursing mothers, others find time to chat with their friends, family members and love ones. Yet, others resort to watching drama or reading story books to help them ease the pressure. This is how one put it.

*'Sometimes I do chat with some of my colleague workers and then I do read drama books, novels and storybooks' (NM009).*

In the case of work overload, student nursing mothers after sending the children away or forcing them to sleep would prioritize their work to give them a lower burden to work with. In many instances, it is the family responsibility which is always put on hold, as outlined by participants:

*'...I always explain to the family that I also need time for my studies and not all the time I should be doing or taking part fully in family activities. So, when it happens like that some huge amount of burden on me is always taken away from me and enables me to go about things with ease' (NM004).*

### 4.2.3. Managing Emotional Challenges

Anger, sadness, excitement, and maintaining a positive attitude, interfere with the academic performance of nursing-mother students. The study participants, being conscious of these took steps to manage them, so that they do not interfere with their studies.

Student nursing mothers adopted jovial behaviours to be able to manage their anger so that it does not hurt their relationship with the public. Others would take time off the crowd, to engage themselves in other personal activities that do not have any bearing on the anger-provoking situations, mindful that they can easily transfer such anger to family, friends and loved ones. Regular activities that help take away anger include washing, fetching water, cooking, singing inspirational songs, and taking a walk away from the incidence, among others.

These activities, they explained, create a gap between the action and their response to the anger situation, and make way for a more favourable response later. They asserted that the more proximal they are to the anger zone, the more likely they are, to react. Some participants reported that, when they are angry, they do not even want to see their babies, let alone play with them. Nursing-mother students may whip, shout or ignore their crying babies, or even cry themselves when they are angry. A few excerpts that add meaning to participants' reactions and management of anger are presented here.

*I am the jovial type. So hardly do you see me angry? In the rare situation that I get angry quickly do something to do away with the anger. I will just create some jokes or make play with you because I know what anger can do to my relationship with people. So, I made it to be part of my instinct not to get angry easily no matter how I am provoked (NM001).*

*In the situation of anger, I try to engage myself in some activity that needs silence and full-time concentration. So, as I am carrying out that activity, I can dispel the anger without venting it on the one who caused me to be angry or any other person. I also move away from the zone where my anger is provoked. For example, if it is a quarrel with a colleague or a family member, I speak less and move away from there (NM002).*

*It is not easy just to do away with anger like that. When it occurs, I always find something to do with my hands and mind. I don't always want my children to be closed to me at that moment because I am always most likely to transfer the reaction of my anger to them. So I normally don't talk when I am angry (NM003).*

*Mostly when I am angry, I don't talk because in that situation I am bound to unleash unhealthy words. I will try to say things that will cool down my temper and in the long run, when I am light up, I feel like I was not supposed to say that. So, when I am annoyed, I just keep quite or find a place and relax (NM006).*

Student nursing mothers believe that every person from time to time would feel sad, so they see sadness as an event that must pass. So, many would see it as a normal happening and be allowed to take its normal course. Participants recounted that non-payment of school fees, attitudes of close relatives like husbands, and low performance in academic work, are the usual sadness-invoking situations. When it happens, they feel bored, lonely, depressed, and sometimes, unable to eat food. Some proactively look for the situation causing the sadness and address it to cut short its reign in their lives. For others, a neutral or serene environment is

usually a desired destination. This allows them to sleep, or relax getting the situation to near normal. Here are a few personal responses from study participants:

*When I feel sad I just don't feel like doing anything again. I do feel like I have lost everything. One moment of my sad experience was when I could not pay my fees for admission at the stipulated time. I could afford thousand cedis but the full fees were a thousand six hundred cedis. I almost gave up on my vision to pursue this programme. My parents could not help in any way. So when I feel sad it is not always easy for me but I manage to handle myself well (NM001).*

*When I am sad, I don't feel the urge to do anything again. Sometimes I feel like abandoning the course especially when the stress is born out of poor performance or a sour relationship with a lecturer. Last [time] I even discussed with my husband that I would like to quit the programme but just that he objected to the idea and encouraged me to continue. I always want to be left alone to ponder over the sadness. I want people's consolation at that moment because it is likely to make me cry more. So while I am thinking I gather courage and tell myself that what has happened has already happened and no amount of thinking or worries can reverse the situation that led to the sadness (NM003).*

*Honestly, in most cases, it is my husband that makes me sad. So in such situations, I always find a working subject that will get me to engage rather than making attempts to react to him. So when I get a question to work around, it makes me think critically to solve the questions and by the time I realized the sadness is gone (NM003).*

*As human beings naturally you feel sad at a time. So, in that situation, I turn to God and start singing songs of words of encouragement. So, in the process of singing, I become ok (NM010).*

Nursing-mother students are excited when exciting news comes their way. Participants usually want to express their excitement by jumping, dancing or singing out in loud voices. A surprise gift, unusually high performance in class, good news from home, unexpected visits, and milestone achievements by their babies, are sources of excitement for nursing-mother students. Excitement gives hope to participants. They express their excitement, bearing in mind that, not everyone has received such news and so take steps to moderate it. In public places, participants reported they express their excitement by smiling. This is outlined as follows:

*I first of all take that moment to appreciate God silently in my heart for whatever he has done for me that necessitated the excitement. So, by doing this I can enjoy the excitement mindful of causing another person's displeasure. I have to always bear in mind that at any point in time excitement can occur and sadness can occur as well and therefore there is the need to express my excitement in a mild way to attract negative comments from people (NM001).*

*I feel like jumping, dancing or singing out loud in my voice. [But] I go solemn and give appreciation to those or whoever has made me excited. Maybe it is a surprise gift, a visit good piece of information or any other thing that has salvaged me from a situation. I equally give thanks to God and so doing all these in such a situation put me in a better position not to attract negative attention (NM004).*

Nursing-mother students want to remain positive all the time. But negative thoughts, attitudes, and behaviour cues keep occurring to them throughout their daily routines. Some reported contemplating stopping schooling altogether, to get adjusted to life better. However, the network of family, friends, role models, and counsellors and above all, blessings from the almighty, kept them on. Here are a few strategies:

*I look up to role models, I pray and I stay focused. I seek counselling too (NM001).*

*I have to always find some activity that will get me engaged. When I get my hands and mind engaged negative thoughts that will be forcing me to react to the situation will be eliminated (NM004).*

The student nursing mother observed that the childcare, the other social responsibility, and academic work put a lot of stress on them. They usually feel exhausted, tired and empty. This originates from the various pressures seeking their attention. When it becomes obvious that everything cannot be done, participants reported that they usually set priorities, involve more hands, or look for other strategies, including task shifting. Nursing-mother students also reported doing reflective thinking, especially that their mothers sacrificed for their welfare, and so, it's time to do the same for their children. Others also focus on the joy of the future that is visualizing that the child could grow up to be a great person etc. A few illustrations are outlined here:

*During stressful situations, I try to get someone that can take care of the child while I go about the other pressing duties. For example, in the house, it is my mother who helps me handle the child in times like that. When the child is not with me in such moments, I quickly try to steal some time to sleep or rest. I am always able to organize the body well before they bring back the child. I believe that I am the reason for my happiness. So I do well to keep my child and me safe and I do not interfere with people's matters that may bring me trouble (NM002).*

*Because I do not have anybody to always help me, I always stop the work I am doing and take a rest when I realize that I am too tired and stressed up. I either sleep or just relax till I have regained some strength then I will continue from wherever I have stopped (NM003).*

*In my [role] conflict situation, I always explain to the family that I also need time for my studies and not all the time I should be doing or taking part fully in the family activities. When I can explain it better for them to see the need for my success in my studies, they understand me, absorb much of the responsibilities and I manage with little alongside the studies (NM004).*

According to study participants, it is not easy to deal with psychological challenges, as they barely have much control over them, especially when they think a lot about their situation. Participants recounted the many times they found themselves amid conflicting responsibilities that demanded their attention, and how many of them felt like just 'giving-up on life.' So, they have resolved to either deal with the situation as it arises or just relax and let it pass if they have no control over it.

Sometimes, the psychological states affect the mother-child relation, especially breastfeeding. There are times mothers feel they are not producing enough breast milk for their children. Mothers adopted the strategy of 'letting go' of worrying situations to remain positive. Others also read inspirational messages and pray to their maker to keep them positive-minded. They made these decisions with the resolution to focus on the positive side of life. Learnt family members and friends have become very useful counselling resources for study participants.

*Now I can say I am determined, focused and decided and that no amount of intimidation from outside can stop me from achieving my dream. So now I have a made-up mind and that is my driving force now. The stress, frustration, mockery and others no longer scratch my back... (NM001).*

*First of all, I always hold a positive view of myself and my child, eliminate all the odds and accuse fingers. Then I should also improve upon my diet, seeking counselling or even visiting a doctor (NM002).*

*Now I can say that I have created a positive mental picture for myself. The stress, anger, frustration and sadness that used to derail my happiness no longer have a bigger part of my life, though they sometimes still occur which is natural (NM003).*

*It is not always easy when you are surrounded with so many responsibilities, in fact pressing responsibilities for that matter that need your attention. Sometimes I feel like giving up on some. However, I try to put always reorganize myself first in my mind before moving into physical action. So as I organize myself mentally I can delete all the odds and focus on the good ones and that maintains (NM004).*

*What I used to do and I am using is that this is not the end. I know my successful improvement depends on my healthy mental status and it shall come to pass. This is just a two-year program and by the grace of God, one year is almost gone (NM003).*

#### **4.2.4. Support Systems for Student Nursing Mothers**

Many nursing mothers are considering hiring helping hands (baby sitters, house-helpers) to support the care of the babies during class hours. The helpers, according to study participants, would ease nursing-mother students some burden and time, consequently easing stress.

*I will have to get a baby nurse that I can always come with to school. So that while I am in the class studying she will be taking of the child but I will always go out from time to time to breastfeed or check on them (NM007).*

The national health insurance scheme has become an important system for ensuring the health needs of mothers and their children. It takes away the fear of going to the hospital and promotes early care-seeking for the sick child. This intervention is a safety precaution for the health of the mother and child. This is out the card applies to a participant.

*I have also made sure that his insurance card is active so that in case of an emergency there wouldn't be any delay in administering medication (NM007).*

Some family members (husbands, mothers, mothers-in-law, siblings) have been a source of support to nursing-mother students. This came after intensive lobbying to get such members to appreciate the need for school whilst nursing a child. The family, in some cases, are changing from adversaries to support systems. Some confirmations of this support system are as follows: *Now even on some days that I don't go to school, almost everybody tries to find out the problem (NM004).*

*That's why my mother is the one taking care of the baby because she has experience with childcare and she knows what the child wants. For instance, if the child is sick because she is having the experience, she will know what to do (NM005).*

Friends are also gradually developing as a support system for nursing-mother students. This system is usually activated when the family system is used-up or unavailable for the purpose.

*Sometimes if the work is too loaded for me to do, I always call friends to help me. Some of my friends will [voluntarily] also come to help me so that the stress will not be as much as doing it alone (NM005).*

The participants, therefore, called for the institution of creche to give support to nursing-mother students, so that babies who are within the age brackets can be sent there. This will be highly patronised if mothers are assured of the level of training and competence of the attendants.

Another factor that can lead nursing-mother students to patronize the services will be the cost of the services provided. Additionally, the free time that this intervention will give to nursing mothers will be more than helpful at school, to concentrate; and at home, to do some chores.

*To me, it is always during lecture time the child is also at crèche, which is good. Sometimes the person you leave your child with in the house might not know how the person will handle her. So it is good that you send the child to a special place where professionals are employed to do that job and when they fail they are held accountable (NM004).*

*It is a good thing, a good idea for that matter if you are financially strong because you are not just going to leave her like that. The people working there are professionals and they have the qualities to manage your child well (NM006).*

Financial constraints appear to be an important area that nursing mother students need a support system on in the course of their studies. According to participants, it is not always the case that, they don't have the money at all for the programme, but the eventualities that may arise during the study, concerning childcare (sickness), accommodation (rent), studies (extra classes, payment for course materials) among others. This was the unanimous reason that may compel nursing mother students to stop the course. An uncommon finding that came from participants was the fact that nursing-mother students engaged in petty work to be able to cater for their kids and school. It affects the ability to learn as this participant explained:

*First of all, I burn a lot of energy doing some petty work that can earn some money to take care of the child. I have to buy food, cloths, sandals and other baby toys he can play with. The thoughts alone as to how to get these, tax me a lot of my energy with some little energy for my studies. Hence it is affecting my ability to learn (NM002).*

These systems are proactively being pursued by nursing-mother students to adjust to the increasing demands for their time, efforts and resources so that they can complete their studies successfully.

## **5. Discussion of Findings**

Educational systems and advocates across the globe, have advocated the need to lessen pressures on students pursuing distance education due to the compressed nature of this system (Ambrosio, 2013; National Center for Educational Statistics, 2013). In the absence of any advocacy for favorable treatment, nursing-mother students in this study designed coping measures with every aspect of their daily lives that needed some form of adjustments. In the study, the researcher identified themes in the coping strategies of mothers, including coping with social measures, psychological measures, and naturally occurring support systems that mothers leveraged on to be able to adjust.

Mothers generally designed measures to cope with childcare, family lives and community services, as well as measures to cope with studies. These were done to make them fit into society whilst continuing with their education. The study found that nursing-mother students increased their contact hours with children by choosing to wake up early and go to bed late. The time is then divided among household chores, child care and academic work. If this does not help, nursing-mother students invited their mothers into their matrimonial homes to have helping hands. In addition, nursing mother students removed some activities from their daily schedules, especially if those were their endeavours. Lastly, nursing mothers sacrificed their study period to make time to attend to home issues. These findings contradict the finding of Pinilla and Muñoz (2005), in which the domestic home was a fertile ground for nursing-mother student education.

Psychologically, mothers designed measures to help them overcome stress, manage their emotions and stop psychological from becoming challenges. Effective communication has been an effective coping strategy for nursing-mother students. In addressing community issues, the study found that nursing-mother students choose a polite approach whenever conflicts arose. This makes it possible to influence the decision at the stakeholder levels before it is imposed on them.

The desire to succeed in examinations is the major trigger for mothers to remain positive. The current study found nursing-mother students adopting studying extra hours, and attending extra classes to be able to cover the gaps created by the stress-filled study period. This finding in this current study contradicts the recommendations of the Population Reference Bureau (2014) that institutions offerings distance education should consider flexible class hours, programmes structured to lengthen degree procurement, and lengthened deadlines on assignments. The nursing-mother students, however, adopted many other supporting measures to enable them to cope, including, peer-teaching, which provides the opportunity to share emotions, or group discussions, where interpersonal issues are shared too. Technology was found to help cope with psychological challenges, first as a learning aid and then as a stress reduction measure. When all measures have failed, the study found sleep to be the last resort that psychologically calms nursing-mother students, especially when mothers are angry, sad or unexplainably excited.

The natural structures that mothers' used included adjusting their internal environment, restructuring family relations, as well as advocating for non-existing ones like a creche. The researcher believes that the current state of facilities at distance education learning centres contradicts the National Center for Educational Statistics (2013) recommendation that, these centres should have child care centres on the campuses. The department also recommended distance learning facilities provide some financial support to especially nursing mother students to ease learning. Contrary to this, participants in the current study adjusted to financial pressures by mothers venturing into petty trade. As a result, nursing mother students in the current study, are considering engaging babysitters, and creches outside learning centres campuses as options that would provide extra support to them

## **5.1. Key Findings**

**Social Coping Strategies:** The study identified that nursing-mother students employed various social coping strategies to manage the challenges of balancing their education, childcare, and family responsibilities. These strategies included increased contact hours with children by waking up early and going to bed late, seeking help from their mothers or other family members for childcare and household chores, removing non-essential activities from their schedules, and sacrificing study time to attend to home issues. Additionally, nursing-mother students used effective communication and a polite approach to address conflicts within their communities, enabling them to influence decisions that might impact their education. These social coping strategies were essential in helping nursing-mother students adjust and fit into society while continuing their education.

**Psychological Coping Strategies:** The study found that nursing-mother students implemented various psychological coping strategies to overcome stress, manage their emotions, and prevent psychological challenges from becoming overwhelming. Effective communication was identified as an important coping strategy in dealing with the stressors associated with distance education. Nursing-mother students also demonstrated a strong desire to succeed in their examinations, which served as a motivational factor. They coped by studying extra hours, attending additional classes, and adopting peer-teaching or group discussions to share emotions and interpersonal issues. Technology was found to be helpful as both a learning aid and a means

of reducing stress. Finally, when all else failed, sleep was identified as a last resort for psychological calming, particularly in situations when mothers were angry, sad, or excessively excited.

## **6. Conclusion**

In conclusion, the study highlighted the resourcefulness and resilience of nursing-mother students as they navigated the challenges of balancing their education, childcare, and family responsibilities. These students employed a range of social coping strategies, such as seeking help from family members, adjusting their schedules, and effectively communicating to address conflicts. Additionally, they utilized psychological coping strategies, including effective communication, motivation to succeed, peer support, and the use of technology. When faced with overwhelming stress, sleep served as a crucial means of psychological calming. These findings emphasize the importance of both social and psychological coping strategies in enabling nursing-mother students to adapt, integrate into society, and continue their education successfully.

## **7. Recommendations**

Based on the key findings of the study regarding social and psychological coping strategies employed by nursing-mother students, here are two recommendations to support and enhance their overall well-being and educational success:

**Establish Supportive Peer Networks:** Management of UCC study centres in the Upper West Region should encourage the formation of support groups or peer networks specifically tailored for nursing-mother students. These groups can serve as safe spaces for sharing experiences, emotions, and challenges related to balancing education, childcare, and family responsibilities. Such support networks can offer emotional validation, advice, and practical solutions to cope with stressors. The centres could facilitate the creation of these groups and provide resources to ensure that nursing-mother students have opportunities to connect and support one another, both on-campus and in virtual environments.

**Integrate Stress Management and Well-being Workshops:** Management of UCC study centres in the Upper West Region should endeavor to incorporate stress management and well-being workshops into the curriculum or extracurricular activities for nursing-mother students. These workshops can equip students with effective psychological coping strategies and techniques to handle stress, anxiety, and emotional challenges. Topics covered in the workshops could include mindfulness practices, time management skills, communication training, and relaxation techniques. By providing these resources and tools, educational institutions can empower nursing-mother students to develop resilience, enhance their psychological well-being, and excel in their studies while managing their multiple responsibilities effectively.

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