# UNIVERSITY OF SWAZILAND

## FACULTY OF COMMERCE

## DEPARTMENT OF BUSINESS ADMINISTRATION

### FINAL EXAMINATION PAPER

### MAY 2007

**(FULL TIME / IDE STUDENTS).**

---

**TITLE PAPER** : **RESEARCH METHODOLOGY**

**COURSE TITLE** : **COM 400**

**TIME ALLOWED** : **THREE (3) HOURS**

**INSTRUCTIONS** :

**(1) TOTAL NUMBER OF QUESTIONS IN THIS PAPER IS FIVE (5)**

**(2) THE PAPER CONSISTS OF SECTION A AND SECTION B.**

**(3) ANSWER SECTION A WHICH IS COMPULSORY AND ANY TWO QUESTIONS FROM SECTION B.**

**(4) THE MARKS AWARDED FOR A QUESTION /PART OF A QUESTION ARE INDICATED AT THE END OF EACH QUESTION / PART OF QUESTION.**

**NOTE: MAXIMUM MARKS WILL BE AWARDED FOR GOOD QUALITY LAYOUT, ACCURACY, AND PRESENTATION OF WORK.**

**THIS PAPER MUST NOT BE OPENED UNTIL PERMISSION HAS BEEN GRANTED BY THE INVIGILATOR.**

**GOOD LUCK!!!**

## *SECTION A (COMPULSORY)*

***CASE STUDY: The attitude of nurses towards patients who suffer from HIV/AIDS.***

***Introduction***:

Attitudes can be described as any general evaluations people that have of others, themselves, and other issues and they are manifested in feelings of like, dislike, favour, and disfavour (Pretty, 1995). Some attitudes have an ego-defensive function by protecting people from threatening truths about themselves or to enhance their self-image. Attitudes can be either negative or positive. Discrimination follows from negative attitudes (prejudice) and it can be described as a display of negative behaviour reflecting negative thoughts and feelings (Bremer & Byrne, 1991).

People reduce the complexity of the social world by demarcating similarities and differences between people – a strategy called social categorization. Groups sharing similarities with the person who holds the attitude are classified as "in-groups", and "out-groups" consist of those people who are perceived as "different". Socially undesirable victims were initially held responsible for AIDS. The mass media quickly labeled AIDS the "homosexual" plague or the black African disease and this stigmatization caused prejudice towards the minority group to increase (van Dyk, 2001). Devine (1995) reported that self-esteem is enhanced by maintaining negative attitudes towards "out group" members such as HIV/AIDS patients, their reaction is often one of disapproval, fear, prejudice, as well as condemnation.

These negative attitudes are carried into the healthcare environment and lead to prejudices towards HIV/AIDS patients amongst nurses. Although the causes of AIDS are known, many nurses are locked in the negative and emotive feelings associated with the initial stage of AIDS. Nurses therefore also adopt discriminatory behaviour towards HIV/AIDS patients by avoiding such patients in the implementation of care. Although overt and direct forms of prejudice have decreased, prejudiced feelings have not been reduced and overt forms of prejudice have been replaced by covert and subtle forms of prejudice. The aim of this research work was to investigate the attitudes of nurses towards HIV/AIDS patients at a specific hospital in "Swaziland" and to establish whether there is a difference in attitudes towards HIV/AIDS patients between younger and older nurses.

***Subjects:***

The target population consisted of a convenience (purposive) sample of nurses at a public hospital in "Swaziland". The nurses had to meet specific criteria and should have had at least two years' experience in the care of HIV/AIDS patients. The respondents consisted of two groups of female nurses. One group consisted of 10 nurses between the ages of 20 and 30 years and the other group of 10 nurses were between the ages of 30 and 50 years. The age categories were used to establish whether differences in attitudes exist. The

average education level of the younger nurses was High School plus two years' training and the average level of the older nurses was Grade 10.

***Measuring Instrument:***

The respondents were interviewed individually by means of unstructured in-depth interviews and field notes were taken by the researcher. The questions related to the differences in treatment of patients affected with HIV/AIDS and interpersonal relations with and behaviour towards HIV/AIDS patients.

Respondents were provided with a case study which reflected on nurses' interpersonal relations and implementation of care towards a patient with HIV/AIDS. By viewing this situation from a distance, respondents could express feelings that they would not have been able to express if they were in the situation. Respondents were also presented with a cartoon of a nurse caring for a patient as a stimulus to which they had to respond. The respondents were asked to explore possible responses on the part of the nurses presented in the sketch. This method provided a much richer understanding of attitudes than abstract questions. Permission was obtained from the appropriate authorities to carry out a project of such a sensitive nature. The respondents were made aware that there were no correct or incorrect responses and that confidentiality would be maintained. The purpose of analyzing the field notes was to identify the most important themes by means of coding. The codes were used to attach meaning to the descriptive information that have been collected.

***Results:***

*Frequencies of answers per theme and age group.*

| *Themes* | *Age group* | *# of responses* | *Percentage* |
|---|---|---|---|
| Fear of contracting HIV/AIDS | 20 – 30 years | 8 | 40% |
| | 30 – 50 years | 6 | 30% |
| Discriminatory behaviour towards patient | 20 – 30 years | 5 | 25% |
| | 30 – 50 years | 3 | 15% |
| Experiencing stress in nursing patients | 20 – 30 years | 9 | 45% |
| | 30 – 50 years | 7 | 35% |
| Experiencing mixed feelings (doubt, | 20 – 30 years | 10 | 50% |
| fear, sympathy, empathy, uncertainty) | 30 – 50 years | 10 | 50% |

***References:***

Bremer, A. T. & Byrne, D. (1991). *Understanding Human Behaviour.* London: Allyn & Bacon.

Devine, P. G. (1995). Prejudice and Out group perception. In A. Tesser (ed.) *Advanced Social Psychology* (pp.467 – 524). New York: McGraw-Hill, Inc.

Petty, R. E. (1995). Attitude change. In A. Tesser (ed.) *Advanced Social Psychology* (pp.195 – 255). New York: McGraw-Hill, Inc

Van Dyk, A. (2001). *HIV/AIDS care and Counselling. A multidisciplinary approach.* Cape Town: Pearson Education.

***Source:*** Welman, Kruger, and Mitchell (2007). *Research Methodology.* Oxford University Press, Cape Town, pp. 315 – 318.

***Read case study and answer the followings:***

(a). Formulate two *research hypotheses or research questions* for the case. (5marks).

(b). What type of measurement level is involved in the dependent and independent variable? Explain your answer briefly. (5marks).

(c). In not more than *two* paragraphs, write the conclusion to this case on the basis of the research findings (i.e. the result). (15marks).

(d). Write an abstract of not more than 120 words for this case. (15marks).

(e). What type of research design was used in this case? Give two advantages of that research design you have mentioned. (10marks).

**Total = 50marks.**

## *SECTION B (ANSWER ANY TWO QUESTIONS).*

**Q2**. (a). A population is divided into three strata so that $N_1$=*5000,* $N_2$=*2000, and* $N_3$ =*3000.* Respective standard deviations are: $\delta_1 = 15$, $\delta_2 = 18$, and $\delta_3 = 5$. How should a sample size $n$ = *84* be allocated to the three strata, if we want optimum allocation using disproportionate sampling design? (10marks).

(b). Distinguish between stratified sampling and cluster sampling. (15marks).

**Q3**. Kruskal-Wallis Test is a general version of the Mann-Whitney test. Given that:

$$H = \frac{12}{N(N+1)}\sum_{j=1}^{k}\frac{T_j^2}{n_j} \cdot -3(N+1)$$

*Where,* $T_j$ = *sum of ranks in column j;* $n_j$ = *number of cases in jth sample;*
$N = \sum w_j$ = *total number of cases;* $k$ = *number of samples.*

*and* $$C = 1 - \left\{ \frac{\sum_{i}^{G} (t_i^3 - t_i)}{N^3 - N} \right\}$$

*where G = number of sets of tied observation; and $t_i$ = number tied in any set i.*

*Also, $H' = H/C$, and d.f. = k – 1.* Given the following price differentials data:

| One Lilangeni | | Three Emalangeni | | *Five Emalangeni* | |
|---|---|---|---|---|---|
| $X_A$ | *Rank* | $X_B$ | *Rank* | $X_C$ | *Rank* |
| 6 | 1 | 8 | 5 | 9 | 8.5 |
| 7 | 2.5 | 9 | 8.5 | 9 | 8.5 |
| 8 | 5 | 8 | 5 | 11 | 14 |
| 7 | 2.5 | 10 | 11.5 | 10 | 11.5 |
| 9 | 8.5 | 11 | 14 | 14 | 18 |
| 11 | 14 | 13 | 16.5 | 13 | 16.5 |

Calculate the value of total $T_j$; *H, C, H', and d.f.* (25marks).

***Q4.*** (a). Differentiate between validity of findings and validity of measurement. (10marks).

(b). Discuss the errors to avoid with *Rating Scales.* (15marks).

***Q5*** (a). When is it appropriate to use nonparametric statistics in research? (15marks).

(b). Explain the term *Snowball sampling* method. (10marks).