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UNIVERSITY OF SOUTHAMPTON

FACULTY OF SOCIAL AND HUMAN SCIENCES

Southampton Education School

An Investigation into the Issues of Staff's Conceptions and Experiences of Internationalisation and the Implications for its Delivery in Higher Education

by

Steven Ryall

Thesis for the degree of Doctor of Education

September 2013

UNIVERSITY OF SOUTHAMPTON

ABSTRACT

FACULTY OF SOCIAL AND HUMAN SCIENCES

Education

Thesis for the degree of Doctor of Education

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This study investigated staff conceptions of internationalisation from a Health Sciences Faculty perspective in a university in the South of England. Of particular interest were the conceptions of internationalisation that staff use, the constituents of internationalisation, the process that it followed and what staff considered to be the implications for delivery of a programme of internationalisation. Findings were based on an initial questionnaire and interviews with members of academic staff within the Faculty. A phenomenological approach was adopted for the analysis. There were several key outcomes of the study. Internationalisation was considered as developing people's knowledge of global issues, their awareness of other ways of knowing and being, growth in intercultural sensitivity and skills and ability to see the bigger picture and their position within it. Participants considered that internationalisation was also enhancing people's ability both to cooperate and collaborate with others and adapt to a changing world. Acquiring knowledge, skills and vision was the basis for this. Internationalisation was considered a process where the stages of input, activities, output and outcome formed the signposts of a complex, interlinked set of stages. The internationalisation stages were positioned within a surrounding external environment of overarching issues that influenced it at different levels (global, national, HE and individual). Strategy was central to the process and was achieved when the resources, input and activities were weighed against the tangible benefits, outcomes and profits gained against a background of how the institution interpreted and managed changes in the external environment.

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DECLARATION OF AUTHORSHIP

I, Steven Ryall, declare that the thesis entitled

An Investigation into the Issues of Staff's Conceptions and Experiences of Internationalisation and the Implications for its Delivery in Higher Education

and the work presented in the thesis is both my own, and have been generated by me as the result of my own original research. I confirm that:

- this work was done wholly or mainly while in candidature for a research degree at this University;
- where any part of this thesis has previously been submitted for a degree or any other qualification at this University or any other institution, this has been clearly stated;
- where I have consulted the published work of others, this is always clearly attributed;
- where I have quoted from the work of others, the source is always given. With the exception of such quotations, this thesis is entirely my own work;
- I have acknowledged all main sources of help;
- where the thesis is based on work done by myself jointly with others, I have made clear exactly what was done by others and what I have contributed myself; and
- none of this work has been published before submission, or [delete as appropriate] parts of this work have been published as: [please list references].

Signed: ....

Date:.....18th June 2014.....

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Abbreviations

AHP Allied Health Professionals

EEC – European Economic Community

EU European Union

GATS – General Agreement on Trade in Services

HE – Higher Education

HESA Higher Education Statistics Agency

IA Internationalisation Abroad

IaH Internationalisation at Home

IoC Internationalisation of the Curriculum

OECD – Organisation for Economic Cooperation and Development

UK – United Kingdom

UKCOSA United Kingdom Council for Overseas Student Affairs

WHO World Health Organisation

1. INTRODUCTION

1.1 Preamble

Higher education is committed to the development of an educational experience appropriate to life and work in a world with a globally oriented economy, a multicultural society and an increasingly mobile population. For a university, competing within this global marketplace is seen as crucial to the institution's development, expansion and financial survival. For the institution, operating within a social and political external environment that is continually changing while configuring an appropriate educational experience can present a range of challenges. The ways in which universities address these challenges and respond to the pressures of the global arena has been termed internationalisation within higher education (HE) literature.

Global pressures and policies are pushing for cross-boundary interaction and the reciprocal transfer of technologies and knowledge and this can be felt at different levels of society – international, national, regional, business sector, local and individual. The ability to respond requires not only an understanding of different languages but an appreciation of the ideologies, customs and values of multiple countries and cultures. For healthcare educational programmes, which traverse both HE and health service sectors, the practicalities of preparing students for employment in diverse healthcare settings both in the home country or abroad present additional challenges. These challenges revolve around nurturing the academic, social, practical and critical clinical decision-making skills that healthcare professionals require to practise in the country of their choice.

Faculty academic staff have key roles in the practical implementation of internationalisation through facilitating the national and international educational process and development of appropriate skills, supporting students and colleagues, and delivering the educational programmes. Internationalisation may not necessarily be at the forefront of consideration when developing programmes and therefore exploring academic staff members' views of internationalisation may help in understanding the process and how it might be better configured and delivered.

1.2 Context

There are numerous national, European and global developments facilitating the mobility and interaction of people on a global stage. These policy trends and pressures, spanning political policies and ideologies, economies, populations, societal customs and values, are blurring international boundaries and have been labelled 'globalisation'. Cheng (2003: 660) states that 'globalisation refers to the transfer, adaptation and development of the values, knowledge, technology and behavioural norms' which can have far reaching effects that cascade down from world and national levels to regional, local and individual levels. The ways in which the people at the different levels engage and respond to the globalisation process has been termed 'internationalisation'. Thus the terms globalisation and internationalisation have become closely associated with each other.

The demands of globalisation and pressures to respond have forced organisations, businesses and individuals to change their perspectives and become more aware of their position and relationships in a global society, and their ability to move within it. With greater awareness comes recognition of the value of acquiring the knowledge, awareness, skills and abilities to work across cultures, not only within a person's own country but internationally. In addition, business sectors and organisations are changing to reflect changes in customers' needs, demands, values and expectations, and also because services and resources are being sourced and supplied both nationally and supra-nationally.

In the HE context, Knight (1993: 6) suggests that internationalisation is adding 'an international and intercultural dimension to all university teaching, research and service functions'. While Leask (2003: 1) considers that demonstrating internationalisation 'is critical for universities' success', instituting a programme of internationalisation or setting a strategic direction is not a straightforward or simple process. Kelly (2009: 51) notes that, within education, these global pressures can be 'unpredictable… and development of national policy is tied to the process of translating global trends to local contexts'. So careful planning is required by organisations and individuals as they unpick how changes affect them and how they should respond.

Middlehurst and Woodfield (2007: 269) indicate that strategy, its development and implementation of internationalisation is framed differently by people within the education establishment. Unpicking how changes affect people will be interpreted

against a background of varying needs, values and expectations at international, national, sector, professional, local and individual levels. Therefore, to operate shrewdly within this environment and achieve an optimal solution the university requires a good understanding of the political, economic, socio-cultural and technological dimensions of its local, sector and national environments. Making internationalisation work will then depend on how any constraining factors are balanced with the capacity, capability and resources available, and the desired outcome. Not only are HE organisations having to change, but so too are the individuals associated with those organisations in having to translate global issues into local actions. This has led to Rizvi (2005) suggesting that globalisation and internationalisation are causing a gradual change in many areas of society and how people see themselves and others.

Universities are competing for international students and are expanding into the international arena to increase business opportunities. The challenges for HE staff are to prepare their business and their graduates for working and communicating in diverse changing environments and to make their 'policies and programmes reflect this greater global reality' (Hanson, 2008: 1). For a university, supporting and improving status within university ranking systems and enhancing its educational reputation, quality and value, in line with the Prime Minister's Initiative for International Education (DIUS, 2006), is crucial to success. Students, regardless of the profession involved, aspire to achieve the requisite skills and qualities both to facilitate mobility and to enable them to work with multicultural societies around the world; in Leask's (2003: 1) words, to prepare them 'to be active and critical participants in world society'. As healthcare professionals, all healthcare students (home, European Union and international) are prepared adequately for national healthcare services and can also apply their skills to work in an international context.

The importance of internationalisation is reflected in mobility statistics of students both coming into the country for study and graduates considering overseas appointments post-qualification. The UK healthcare courses seem to be increasingly popular with international students. Statistics from the Higher Education Statistics Agency (HESA) Table 1 (2013a) show that from 2008/9 the percentage of students from 'Other EU and non-EU countries' in undergraduate study was 9.9% and rose to 12.5% by 2012/13. Within subjects, the student introduction tables for 2008/9 (HESA, 2009) and 2012/13 (HESA, 2013b) show that the percentage of non-UK students within Medicine rose from 14.6% to 15.3% and within Subjects Allied to Medicine rose from 7.0% to 7.5%.

It has been observed that, after graduation, healthcare students from different professions are exploring employment opportunities overseas. In a statistical analysis of the register the Nursing and Midwifery Council Table 9 figures (2009: 9) demonstrate an 43% increase in requests to verify registration with a view to employment overseas between 2006 and 2008 (note that the increase in requests does not account for multiple applications by one person or mean that overseas positions have been taken up). Information on working and travelling abroad can be readily found on websites such as www.physiobob.com, a discussion forum for physiotherapists, where many communication threads are available both seeking and giving advice. And so the pressures to train a global healthcare workforce and provide education for both national and international students has to be balanced against the UK government's health intentions, to secure a streamlined, efficient healthcare service manned by well-trained professional staff. While it has been recognised that it is 'critically important to build equality and diversity into the way the NHS delivers services' (speech by Rt. Hon. John Hutton MP, Minister of State for Health, 15 October 2003) and a wider knowledge of different cultures and societies is useful, preparing students for working abroad is not a prime intention for the government when funding healthcare training. The degree to which internationalisation impacts is therefore dependent on the degree of importance afforded to participation in the process and what is hoped to be gained from engaging with it.

As Faculty academic staff play key roles in the educational and internationalisation processes, it is important to understand their conceptions of internationalisation, its constituents and how its delivery impacts on them and the University in order to inform the process. By taking into consideration their views, they may become involved with the strategy, as it becomes relevant to them.

1.3 Study Rationale, Aims and Research Questions

There are many University and external pressures driving the perception of a need to 'internationalise' University operations and the curricula and pedagogy, but there are no explicit industry comparisons available or directions to take. In 2012/13 the University had responsibility for 16,055 undergraduate and 7060 postgraduate students, of which 2735 undergraduate and 3495 postgraduate students were from the European Union or non-European Union (HESA, 2013c). The University is focussed on developing its internationalisation strategy so the Faculty is in the process of developing a considered internationalisation policy that encompasses the University's intentions to increase international student recruitment, internationalising the

curriculum, increasing opportunities for mobility and extending links, collaborations and partnerships. The Faculty was formed from the amalgamation of two Schools in 2008 so now provides training for five different healthcare professions (Nursing, Midwifery, Physiotherapy, Occupational Therapy and Podiatry), each of which has different professional practices. Consequently the internationalisation strategy is not only being developed against a background of financial constraints but accommodates the benchmarks and expectations of different professional programmes and their respective regulatory bodies.

Finding a strategic direction and approach that is workable for each profession will present a challenge. It is not clear what factors will influence the Faculty's operational definition of internationalisation and how this may modulate the form it may take when applied. To help define an approach and develop a measured programme of internationalisation it is important to establish a baseline definition. The first step is to investigate staff members' conceptions of internationalisation, its desired outcome and the issues impacting on it to determine what could feasibly be introduced to internationalise the healthcare programmes and what could make them achievable.

Thus the main aim of this study was:

> To investigate the issues of staff members' conceptions and experiences of internationalisation and the implications for its delivery in higher education

The research questions relate to the outcome, input/resources, activities and components and output of internationalisation:

- What are staff conceptions of internationalisation within the Faculty of Health Sciences?
- How do staff conceive the constituents of internationalisation?
- What are the implications for delivery of the internationalisation process within the Faculty of Health Sciences?

1.4 Thesis Construction

Internationalisation is complex. What the internationalisation process comprises, how it is configured and the issues influencing how it operates are the subject of debate. As this study aims to elicit information on staff members' thoughts and experiences and to explore the complex relationships within internationalisation, a mixed-methods

approach to obtaining both quantitative and qualitative data was appropriate. The approach initially used questionnaires to gain a breadth of both quantitative and qualitative information. Although providing an overview of a group of people, questionnaires have the drawback that the information gained tends to be relatively superficial so can be constraining (Hulley and Cummings, 1988). Therefore qualitative methods using interviews were also used to uncover further the social processes not amenable to quantitative methods and provide deeper and richer data. The thesis will begin with an exploration of the literature in Chapter Two. The literature review will be based around the following themes: defining globalisation; globalisation as pressure towards internationalisation; clarifying and defining internationalisation; a needs analysis for internationalisation; issues impacting on enacting internationalisation; critical success factors and constraints. Chapter Three will provide a description of the research design and Chapter Four will outline the results obtained from the study, which will be discussed in the context of the literature. The conclusions for the study will be presented within Chapter Five.

2. LITERATURE REVIEW

2.1 Structure of the Literature Review

Internationalisation and globalisation are terms commonly referred to in the higher education literature as they can have a substantial impact on its delivery. Although the relationship between internationalisation and globalisation is the subject of debate, it is important to understand how these terms are interpreted at different stakeholder levels, how the effects of global pressures are cascaded down through the levels, and their eventual translation into educational delivery. This study aimed to explore University staff members' perspectives and working conceptions of internationalisation, its delivery, potential outcomes and the issues impacting on education. The following literature review presents an overview of globalisation as applied in higher education (HE) and, more specifically, healthcare education by exploring its definitions, what it encompasses, and the pressures it exerts towards internationalisation. In addition the subsequent framing of internationalisation, the processes of translating global issues into local contexts, the issues impacting on internationalisation and the initiatives designed to address the challenges it poses will be explored. The author has adopted a Faculty level 'stakeholder' stance throughout. This means that the author is looking at the results of the study as a participant, as opposed to the stance that might be adopted as a manager.

2.2 Understanding Globalisation and Internationalisation in the Context of Higher Education

Internationalisation and globalisation are terms that have been in use for some time. Globalisation is an issue that is widely acknowledged, yet consensus on its meaning is difficult to achieve as it is shrouded in a variety of definitions with different foci and conceptions. The foci range from narrow perspectives that concentrate on the end product of globalisation, or the impact on people, society and nations, to the adoption of a broad overview of the process itself. Conceptions vary according to different models of interpretation that may facilitate or hinder how interactions and collaborations between countries and organisations are conducted. The dimensions and conceptions of globalisation will be explored and the ensuing implications discussed.

2.2.1 Discourse, Definitions and Conceptions of Globalisation

Globalisation is subject to a wide range of interpretations and there is disagreement about 'the origins, mechanisms, significance and implication of the concept' (Crossley and Watson, 2003: 53). Globalisation can be viewed both as a discourse and a process. Authors such as Amos et al. (2002) view globalisation as mere rhetoric associated with describing contemporary political, cultural and social events, whereas others view globalisation as a process that is changing behaviours.

There is 'intensification of communication and cooperation and greater economic linkages between countries' (Schriewer, 2003: 272) that stimulates the creation of more extensive networks, acceleration of flows of trade, migration and information exchange (Crossley and Watson, 2003: 52). These changes may appear as a pattern of convergence of economies, increasing interdependence and liberalisation of trade and markets (Enders, 2004: 367). This results in different pressures of either cooperation or competition. Cooperation and integration are generated by an underlying sense of civic responsibility and a desire to develop a learning society (Schriewer, 2003), yet the liberalisation of trade also means that there is a desire to create a knowledge economy and 'commodification of information' (Dodds, 2008: 510), and a unique selling point to set institutions apart from competitors. Schriewer (2003: 273) calls the tension between pressures to cooperate and to compete the 'simultaneity of contrary currents'.

Institutions are developing new ways for educational delivery and governance mechanisms at different levels (Knight, 2006). Enders (2004: 369) argues that globalisation 'does not have to be a uniform process and not necessarily lead to uniform outcomes'. However, the process of some institutions setting themselves apart from each other may create a power imbalance (Dodds, 2008), where some may gain a more advantageous position in exporting their version of HE than others. This system of exporting programmes, and its associated mechanisms and activities, could be viewed as having the potential for social consequences through 'changes in perceptions, ideas, identity, attitudes, tastes, and traditions' (Schriewer, 2003: 272). But this is arguable and it may just represent a 'shift in rhetoric' (Amos et al., 2002: 198). Globalisation 'has caused significant concern and dilemmas for academics and university policy makers' (Dixon, 2006: 320) and so ongoing strategy construction is required as new information and points of reference emerge over time. However, how the institution conceives globalisation will exert an influence on the way in which it bridges the gap between policy statements and the reality of enacting them.

Definitions of globalisation reflect the different views of process and discourse. Globalisation as a force that promotes greater mutual international involvement is interpreted by Luitjen-Lub et al. (2005: 12) as *'an increasing convergence and interdependence of economies and societies'*. However, this is very general and does not say how it happens or incorporates any impact on society or social consequences. The interpretation offered by Cheng (2003: 660) more fully captures the social products of globalisation and also implies that it is a normalising process that promotes harmonisation and uniformity. Cheng's (2003: 660) suggestion is that globalisation is the *'transfer, adaptation and development of values, knowledge, technology and behavioural norms across countries and societies in different parts of the world'*. Held et al. (1999: 15–16) and Marginson and Sawir (2006: 346) take a process view of globalisation and suggest that definitions must express a spatio-temporal component and that reference needs to be made to the range, intensity, speed and flow of activities occurring across borders. The interpretation offered by Cheng (2003: 660) more fully captures the social products of globalisation and also implies that it is a normalising process that promotes harmonisation and uniformity. Cheng's (2003: 660) suggestion is that globalisation is the *'transfer, adaptation and development of values, knowledge, technology and behavioural norms across* countries and societies in different parts of the world'.

To try to give structure to understanding the definitions for globalisation, Dodds (2008: 506) provides an overview by categorising them into '*global flows and/or pressures*' and '*policy trends*'. She suggests the pressures come from people, capital and information or culture, whereas policy trends result from factors such as economic or general trade agreements. These may or may not affect countries in the same way. It may be useful to add a further category of environmental pressures. Bottery (1999: 302–4) accommodates this by differentiating these pressures and policies further by separating globalisation into political, managerial, economic, cultural and environmental dimensions. Bottery's (1999: 302) refinement helps to sub-classify the pressures and policies into the trends, issues, practices, ideas and 'symbolic mediation' that act as a 'catalyst for globalization'.

An alternate conception of globalisation is that of Held et al. (1999: 2), who proposes three approaches by which the effects of globalisation can be viewed: the 'hyperglobalist' approach, the 'transformationalist' approach and the 'sceptic' approach. Each of these describes the degree of participation of institutions and people in the process. The hyperglobalist embraces the view that global issues assume a greater importance than national policy and identity and override them. In effect this approach promotes a realignment and harmonisation of aspirations with global forces and changes. The

transformationalist's view is that the process of engagement with global networks and involvement in economic pressures causes nations to evolve and adapt. The sceptic's approach is that the 'nation' still exists as a separate entity and that it operates independent of global economic forces.

Taking an overview, the differing effects and approaches adopted could form a continuum, where the sceptic and hyperglobalist views represent opposite ends of this continuum and the transformationalist view lies somewhere in the middle. At the sceptic end of the continuum there can be potential for a 'de-globalising' approach with reversion or contraction to local and national business with individualised policies and practices developed and embedded within national perspective and identity. With the current extent of the financial interconnection worldwide, for the hyperglobalist, the assumption is that countries can appear to react like a collective. In this case, few national businesses and public sectors in those countries, including HE, can remain unaffected. Yet despite this interconnection and cooperation, countries can, to a certain extent, be buffered from the impact of global change. This is guided by the policies and approaches that they choose to adopt. Within HE, although the sector exists worldwide, each country appears to adapt according to their context and circumstance (transformationalist). Within this framework different institutions can choose to work at different points along the continuum. A definition of globalisation specific to HE, proffered by Altbach and Knight (2007: 290), is '*the economic, political and societal forces pushing 21st century higher education towards greater international involvement*'.

In summary, globalisation is a driving force that poses many challenges for HE, and its effects cascade down through countries, governments, institutions, businesses and individuals who have to operate, communicate and do business as a unit. Fundamentally, any HE institution must continually reassess the impact of economic forces, global and customer pressures and constraints on business and educational delivery so that a level of engagement can be configured and an appropriate response formulated. The responses are often referred to as internationalisation.

2.2.2 Exploring Some of the Definitions of Internationalisation in Higher Education

Internationalisation, according to Merriam-Webster's dictionary (1993), is the action of internationalising, which is 'to make international in relations, effect or scope'. It is not a new term: the Oxford English Dictionary (1993) gives its first usage in 1864 in Webster's

Dictionary of the American language. Yet, in an HE context, it has further meanings and connotations. Various authors have suggested their own interpretations of internationalisation by relating it to the process of internationalisation, its constituents or outcome, depending on their primary driving force or motivation.

Marginson's (2007: 38) simple and general definition states that 'internationalisation is best understood simply as relations across national borders, or institutions situated within national systems'. Knight's description of internationalisation (1993: 21, cited by Knight and de Wit, 1995), as it relates to HE, applies '*an international/intercultural dimension into the teaching, research and service function of the institution'* with a process and content view. It leaves readers to interpret for themselves the extent and form of incorporating an international and intercultural dimension. In 2003, Knight (p. 2) extended her definition, stating 'internationalisation at the national, sector and institutional levels is defined as the process of integrating an international, intercultural or global dimension into the purpose, functions or delivery of post-secondary education'. The updated definition was influenced by the changes that have occurred since 1993. Political, economic, social and developments have meant that provision of education across geographic borders has become more commonplace and technological developments have increased the variety of delivery methods that can be utilised.

Stromquist (2007: 102) proposes an alternative perspective by suggesting that internationalisation equates to 'entrepreneurialism'. Stromquist's study of a private institution's programme of internationalisation carried out interviews with professors and top-level administrators about governance, research, teaching and selection procedures. She found that the institution concentrated on marketable aspects of education rather than the altruistic intent of sharing of knowledge that benefits all. This study was based in the United States where the HE culture is driven by competition, market principles and entrepreneurialism. The consequences of such a culture would be the creation of power differentials and a push towards homogeneity through economics, with market ascendancy tending to dictate what form of environment is created. While economics is a potent driver that cannot be ignored, this approach may not be uniform at a global or national level. National policies, their HE structures and cultures may exert a moderating influence and alter the internationalisation approach taken.

Naidoo (2006) takes a constituents approach and presents a list of the components of internationalisation relating to the international mobility of students, staff, institution and

programme. However, definitions of internationalisation, as a response to globalisation, should also relate to outcome. Elkin et al. (2005: 321) encompass this by describing a complex process, the aim of which is '*to create values, beliefs and intellectual insight in which both domestic and international students and staff participate and benefit equally*'. However, relating it solely to outcome again only addresses specific parts of the educational process, culture and delivery and not the wider parts of university business. Yang (2002: 83) manages to encompass this by suggesting that internationalisation means '*the awareness and operation of interactions within and between cultures through its teaching, research and service functions, with the ultimate aim of achieving mutual understanding across cultural borders*'. This elaborates on the meaning of internationalisation but is only generated from an intercultural perspective, so is not easy to reconcile with internationalisation as a process, or the other outcomes that can emerge from it.

Already, within these few definitions it is obvious that internationalisation has many aspects, but the following commonalities seem to emerge and topics raised by the definitions are used as part of the basis for the current study's Phase 1 questionnaire:

- Facilitation of people to become critical members of global society;
- Inclusion of an international perspective through interaction, knowledge, understanding;
- Inclusion of an intercultural perspective through interaction, knowledge, understanding;
- Reciprocal processes that embody cooperation, collaboration and partnership; and
- Promotion of cross-border mobility

To stay competitive, many universities in the sector are opening up to the international market, hence definitions of internationalisation have had to evolve to account for such developments in the sector and the updated terminology. Each definition presents a useful reminder of the elements worthy of consideration, covering a wide spectrum of policy and infrastructure changes (including culture, research and support services) and educational process changes (including content, activities, and delivery) in response to national and international ideas, issues, policies and directives. Some of those policies relevant to UK HE are presented in Table 2.1.

2.2.3 How Globalisation Promotes the Need for Internationalisation in Higher Education

Globalisation, as a force to initiate change on a worldwide basis and internationalisation, and as a response to these forces, means they are inextricably linked. Knight's (2004) paper is helpful in providing a thorough explanation of some of the drivers, from national, sector and institution perspectives, and the motivations and rationales compelling universities to consider internationalisation. In her paper she suggests numerous benefits may be accrued such as name recognition/branding, collaborative ventures, projects, research activities and educational activities to promote an international and intercultural environment leading to income generation, and international linkages. In weighing the benefits and costs, institutions need to determine the level of importance afforded to:

- the needs of the institution, balanced with the requirement for activities that contribute to a national identity and those of being a global participant;
- maintaining a balance between national and international income streams;
- market positioning in a knowledge economy as opposed to sharing knowledge or collaborating for mutual benefit or a social obligation; and
- determining the degree of cultural and international issues awareness and employability skills required to become a global graduate and the activities to achieve them.

It is therefore important to look at national and supranational policies, directives and ideas that have exerted an influence on the management of education in HE to understand the context in which some the internationalisation responses were configured. Table 2.1 overleaf outlines these various policies and the areas where they have shaped a response. While it does not present all the issues, there are some main characteristics and ideas emerging from it that initiate change. These include:

- cross-border mobility;
- borderless higher education;
- cross-border and intercultural collaboration and developing partnerships; and
- harmonising and mutual recognition of qualifications.

Table 2.1 Major ideas or policies arising from globalisation and their implications

Dimension	Number	Major Idea or Policy	Arena	Areas of Influence	Implications for HE
POLITICAL - Legislation and Policy	1	European Directive 2005/36/EEC	European Union (EU)	Mutual recognition of Professional Qualifications	Cross-border mobility and recognition
	2	Bologna process	European Union (EU)	Harmonise qualifications cross-border mobility	Borderless HE
	3	Organisation for Economic Co-operation and Development (OECD, 1999)	International	Use of networking to facilitate governmental level sharing/comparisons of domestic/ international policy and good practice	Promotes international and intercultural collaboration for managing innovation. Impacts on teaching, research and service functions.
	4	Prime Minister's Initiative for International Education (PMI, 2006)	National	A 5 year strategy for attracting international students	Developing partnerships between universities and government to promote/ supply education abroad and attract students to the UK.
	5	'Putting the World into World-Class Education' (2004)	National	Curricular content and delivery	Inclusion of a 'global' or intercultural perspective within programmes and curricula
	6	British Council	National	Encourages worldwide mutual understanding and sharing of knowledge and	Encourages intercultural dialogue and sharing of knowledge, education and

Dimension	Number	Major Idea or Policy	Arena	Areas of Influence	Implications for HE
				ideas	creativity across borders.
ECONOMIC	7	General Agreement on Trade in Services (GATS)	International	Cross-border trade, supply or presence in other countries	Removes barriers to encourage trade or supply of education and services in other countries
	8	Formation of European Union	International	Regional bloc designed for economic benefits Freedom of movement of people, goods, services and capital	Forging of supranational or intergovernmental agreements. Adds a European dimension to member country policy design and governance of education
SOCIAL - Education, Content and Delivery	9	Worldwide Universities Network (WUN)	International	Cross-border mobility	Student and HE staff exchange programmes to develop employment skills and competencies for global mobility
	10	ERASMUS	European Union (EU)	Cross-border mobility	
TECHNICAL	11	The internet	Across levels		Easy access of information and communication, E-learning courses

Several policies and ideas within HE outlined in Table 2.1 (Bologna; OECD, 1999; PMI: DIUS, 2006; British Council; WUN; and Erasmus) are geared to promote cross-border delivery or trade in education, research and business services, and also collaboration and developing partnerships. Within HE, teaching and sharing of knowledge, research, intercultural dialogue and other services takes place across the education environment. Prominent initiatives already in place to facilitate this are the General Agreement on Trade in Services (GATS), Bologna (European Association for International Education and the Bologna Process, 2008), the European Directive 2005/36/EEC (European Union, 2005) for the Mutual Recognition of Professional Qualifications, the Prime Minister's Initiative for International Education (PMI – a 5-year strategy for attracting international students), the intentions of the OECD (1999) and of the British Council (2007). While these facilitate mobility, collaboration and dialogue, there is less focus on intercultural knowledge and skills. The ability to move across borders potentially helps trade, delivery of goods and services and the employment prospects of individuals, yet success also depends on individuals having the requisite knowledge and skills to operate within a particular country. Several European and international initiatives (drivers 1, 2, 7, 9, 10 in Table 2.1) facilitate the acquisition and recognition of such skills through exchange or migration, and encouraging movement across borders. It could be argued that some degree of international and intercultural awareness might be assimilated through operating across borders and being part of the process of immersion in the culture or international setting. However, consideration has to be given to determining the level of skill that needs to be recognised and, for other authors such as Leggott and Stapleford (2007), whether it should be a more formal part of the HE education process and curricula (see section 2.3.1 below).

Huisman and van der Wende (2005) presented their data on different countries' responses to internationalisation as part of the Higher Education Institutions' Responses to Europeanisation, Internationalisation and Globalisation (abbreviated to 'HEIGLO') project. They grouped internationalisation activities into student and staff mobility, curriculum development, research and scholarly collaboration, export of knowledge and transnational education and extracurricular activities (van der Wende et al., 2005: 203), which ties into the major ideas identified from the drivers mentioned in Table 2.1. Van der Wende et al. (2004: 10) had previously coined the term 'Europeanisation' to distinguish it as a regional version of internationalisation. It was evident from the studies conducted by Huisman and van der Wende (2005) that, while there are commonalities between countries, differences in sizes of institutions, subjects covered, and their needs meant that there was a wide variation in institutional approaches to addressing internationalisation. However, whether a response is termed Europeanisation or internationalisation, the idea conveyed by this study for HE is the

merit of maintaining focus on the educational, technical, political, socially transformative and business implications that result from globalisation so as to be able, as Kelly (2008: 63) points out, to translate them into a local context. Consequently, van der Wende's (2004) reports form part of the basis for the current study questionnaire to understand how staff and students at the delivery end of the process see themselves within the context of global policies, practices and learning, and what issues impact upon delivering internationalisation.

2.3 Framing Internationalisation and Translating Issues into Local Contexts

Sections 2.2.2 and 2.2.3 indicate that there are many considerations for an institution to take into account in framing its approach to internationalisation. Because all the elements of internationalisation are open to individual adaptation and interpretation when situating itself in the most appropriate position and advantage, the University must first define what it means when it talks about internationalisation and how it engages with the process. In this way internationalisation has become a strategic expression of intent to show stakeholders, those external to the University, staff and students of the institution's approach, the extent and the form that internationalisation takes, the outcomes that are desired and the route being taken to achieve them. An internationalisation needs analysis is the collection of information of all the requirements, expectations and desires of an institution and its stakeholders. This is used to design and refine the goals, purposes and delivery of the service provided, requirements being the institution's or individual's essential needs, while expectations are what they intend to do and desires are what they would like to do. A needs analysis helps to identify the shortfalls in comparison with other programmes, services or institutions, and outlines potential obstacles that arise from conflicting needs between different stakeholders, or conflicting value systems (Otter, 2007: 47). Decisions are dependent on the underlying driving force and the key for the institution is to understand the needs, how these needs could be addressed and consequently the process that internationalisation will follow.

Deardorff (2006: 243) applies a logic model that considers internationalisation as a linear chain of events. She bases it on Rogers' (2000) theoretical general programme logic model, which originated from programme evaluation theory. This theory simplifies organisational processes to make them more amenable to being assessed. Deardorff (2006: 243) categorises internationalisation in terms of the delivery (input, constituents, activities, output and outcome) and the process followed, as these form

the basis of many definitions in the literature. However, although internationalisation may appear to be a chain of events, section 2.3 of the literature review outlines that the separate elements of the chain actually influence each other. The effort to disentangle the separate elements to aid evaluation may oversimplify the relationships and more research needs to be done to understand how the relationships are interwoven so the evaluation may be facilitated.

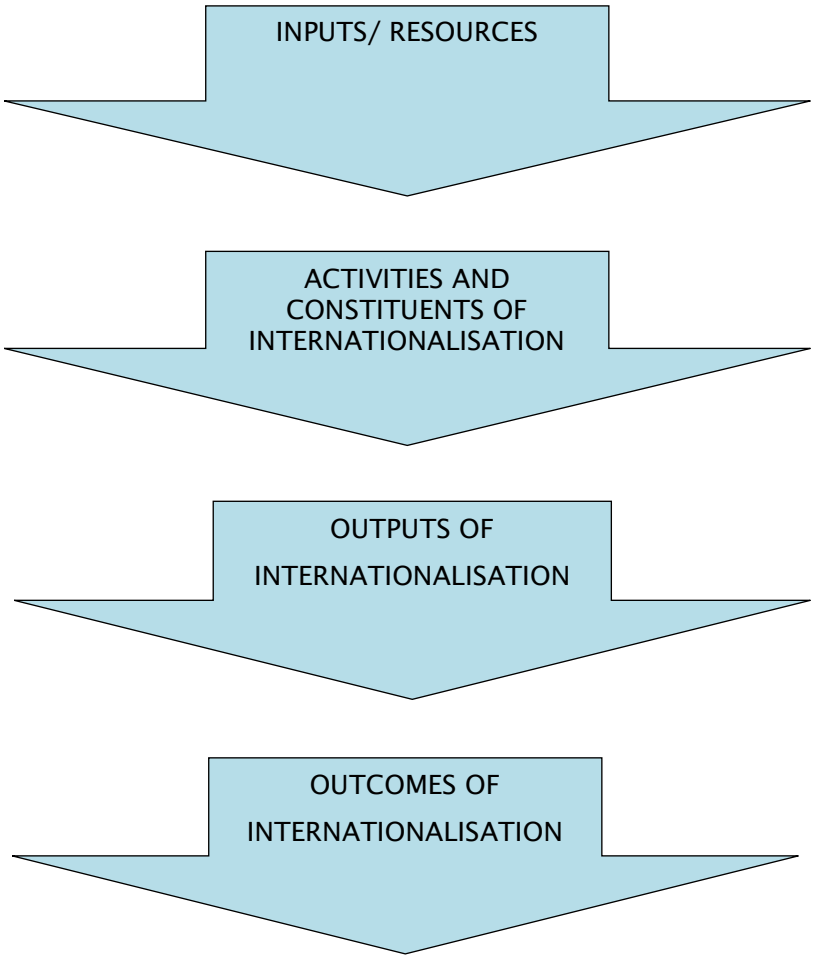

Figure 2.1 General programme logic model applied to internationalisation, according to Deardorff (2006: 243)

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This simple model can help to categorise needs as they are expressed by different stakeholders and so, for example, at institutional level the main focus will be output

and outcome. Those working at the 'coal face' may be more concerned with the resources required to implement an activity.

2.3.1 Internationalisation Needs Analysis and Issues Impacting on the Internationalisation Process

The process of internationalisation could represent a specific set of needs, as a consequence of the pressures of globalisation (section 2.2.2), that represents the requirements, expectations and desires, from different sources, that institutions and individuals expect from internationalisation. Bradshaw (1972: 72–73) distinguishes between comparative, normative and perceived needs:

comparative needs – from comparing levels of service between similar communities.

normative needs – derived from custom, authority, regulatory requirements or policy drivers at multiple layers of HE and Healthcare sectors

perceived needs – the way stakeholders or institutions express their specific requirements.

Comparative needs

The comparative need, which Teichler (1996) suggests is invaluable, comes from comparing one university to other similar institutions in similar circumstances, thus forming the background against which the faculty and university internationalisation strategy is formulated. Several authors have examined how internationalisation has been framed by different organisations and gauged the level of importance that achieving internationalisation holds. The Association of Commonwealth Universities Observatory on Borderless Higher Education (2004) has identified a spectrum of initiatives. These comprise such initiatives as private universities overseas, ownership of a campus and supply of education overseas, affiliations with overseas universities, where branches are abroad and are 'foreign owned', and partnerships involving mutual cooperation with overseas institutions. For the last initiative to take place there still needs to be advantages for both, so internationalisation is not just something that is undertaken as a result of public responsibility but for competitive/ commercial/ financial advantage in the supply of programmes not currently available through overseas institutions. Data on many aspects of internationalisation are available from different parts of the globe, but studies illustrate that internationalisation can be interpreted and enacted in different ways; there can be many alternative indicators for

evaluation of internationalisation and so there are challenges in comparing them directly.

De Wit et al.'s (2005) collection of overviews of internationalisation of HE in Latin America shows differences in interpretation and how internationalisation is instituted. In Peru, internationalisation is an end point and universities 'seek to become internationalised rather than international' (Butters et al., 2005: 281). What Butters et al. allude to is that resources and activities are present to expose staff and students to an international experience. However, the involvement has a predominantly national focus rather than representing participation on the global stage and using this to develop innovative ideas and concepts alongside the rest of the world.

The approach used in Mexico (Gacel-Avila et al., 2005a) contrasts with that in Peru. As with Peru, institutions' efforts are directed to putting the organisational structures in place to internationalise programmes and curricula, and improving the quality of the educational experience, but they are also becoming active on the global stage. Gacel-Avila et al. (2005a) seem to indicate that in general in Latin America, while there is development of programme structures (such as inter-institutional agreements, student and faculty mobility, international networks for research and teaching, and cooperation in research), there is a lack of organisational structures (such as international dimension to policies, quality assurance procedures, development of staff skills and qualifications, and development of international programmes) that facilitate being globally active.

Thus, internationalisation can be influenced by both external (economic competition, international collaboration with developing countries and participation in exchange programmes) and internal factors (values and traditions). This was noted by both Rouhani (2007) and Frohlich (2006). Rouhani's (2007) study of universities in South Africa using the author's empirical data outlines that there are variable approaches, from high priority, systematic introduction of internationalisation to low priority, ad hoc introduction. Rouhani (2007) splits the South African universities into three groups. One group is proactive and seen as providing an enabling environment and exploited the opportunities internationalisation brought. A second group appears to have no long terms plans and seen as reactive to opportunities, and the last group has a passive approach, is disengaged and has a disabling environment. Rouhani (2007) reasons that the last group was overwhelmed with national and institutional agendas and does not have the ability to deliver on internationalisation.

Frohlich's (2006) study of top leaders and key administrative staff in five Norwegian institutions, similar to Rouhani's study (2007), shows there are very different responses depending on institutional profile. In a study of five Dutch HE institutions working on Europeanisation, internationalisation and globalisation, Luitjen-Lub et al. (2005) point out that there are different interpretations of policies and regulations and differences in level of international engagement. There are differences even at academic discipline level, where some disciplines are more internationally oriented than others.

Much of the literature is focussed on the institutional level. At a disciplinary level, within healthcare, Wihlborg's (2003) study of teachers on nursing programmes in southern, central and northern Sweden found that there was a predominance of nationally oriented practice and that a more global perspective needed to be encouraged. Internationalisation was thought of in terms of an international perspective, sociocultural difference, staff and student exchange, differences in healthcare systems, and nurses' abilities and performance (related to humanistic and democratic values). Wihlborg's (2003) conclusion is that exchanges and formal comparisons of nursing education are required and that teachers need to understand internationalisation better to develop students' knowledge and values. The importance of the comparative need is in its overview of drivers and responses and how responses are adapted to the goals and constraints of the institutions.

Normative needs

The normative needs, as applied to HE, are those directed by the sector, the university and, for the purposes of this study, those that are specific to the healthcare professions. Drivers come from transnational policies, some of which are outlined in Table 2.1, plus national government, governing body and professional body policies and directives. Initiatives such as Bologna (European Association for International Education and the Bologna Process, 2008), the European Directive 2005/36/EEC for the Mutual Recognition of Professional Qualifications (European Union, 2005), the Prime Minister's Initiative for International Education (PMI – a 5-year strategy for attracting international students, 2006), and the intentions of the OECD and the British Council come into this category. Within a healthcare context the normative needs are driven by policies and directives at multiple layers of the healthcare sector. This is from the World Health Organisation (WHO), through national health systems, to local systems. For example, in the area of healthcare, certain public health issues such as obesity or diabetes may be termed global issues as they are present in many areas of the world, but they can be approached and dealt with in different ways according to the relative

importance accorded in individual countries and the way their healthcare systems work.

The healthcare systems and bodies that regulate the healthcare professions define the boundaries and constraints within which healthcare workers operate and consequently have considerable impact on healthcare education requirements. So, in healthcare it is also useful to be cognisant of the differences in healthcare systems and regulatory requirements set by professional bodies in different countries. For the University and Faculty of Health Sciences, addressing the normative need is about being able to translate how these pressures shape activities and how to balance them with national and sector pressures and comparative needs.

Perceived needs

Perceived needs arise from the HE institution and the individuals, both staff and students. Knight's paper (2004) gives a comprehensive overview of internationalisation and explains the rationales, programme and institutional strategies at each level, summarising some of the motivations and drivers that compel universities to consider a commitment to internationalisation. Most relate to the strategic and financial realities of operating in the international market. The benefits, outcomes and consequences that need to be considered are name recognition or branding, income generation, international linkages (links made with other institutions and other countries), collaborative ventures, projects, research activities, and educational activities to promote an international and intercultural dimension (Knight, 2004: 26–28).

A significant proportion of the literature referred to so far considers internationalisation at a national and institutional level rather than its relevance to specific educational programmes. Hyland et al.'s (2008) nationwide United Kingdom (UK) study outlines the needs expressed by HE staff and students as a result of their internationalisation experiences. The study used 15 focus groups in five locations, but suffered from limited numbers of participants. Data were obtained from just 31 staff members (none of whom were at senior management or strategic level), 19 international students and 13 home students. It also attempted to gain information from staff across 10 disciplines, but student representation was restricted to business, education, engineering and psychology disciplines (there was no contribution from Medicine or the health-related disciplines). Consequently, a narrow data set is presented that may not reflect the views of the country as a whole or confer sufficient comparability across the disciplines. The findings of this study suggest that internationalisation is everyone's concern and that there is a need to produce an

internationally aware workforce that can adapt to a changing world. Staff considered that internationalisation was about applying an international flavour and an intercultural perspective through using appropriate contexts in which to situate the programme content. For the students interviewed in the study, internationalisation was very much a personal experience. Students tended to concentrate on the socialisation aspects of internationalisation rather than requiring or seeing evidence of an international context being included in learning activities. And so, even at the point of delivery, those needs, expectations and desires relating to internationalisation differ between staff, mindful of the expectations of institutional pressures and policies, and students, who can be seen to be the beneficiaries.

In a similar vein to Hyland et al.'s study, Leggott and Stapleford's (2007: 121) paper describes the generic employability skills that students require and cite Yorke and Knight's (2004) reference to learning skills, networking, negotiation, interpersonal skills, team working and coping with change. Leggott and Stapleford (2007) also talk about their own study, which suggests that an international experience enhances these skills. They indicate there is a perceived need for graduates to acquire some intercultural knowledge and international awareness. Leggott and Stapleford (2007) also explain what activities could contribute to this. These range from increasing awareness and knowledge through reading and theoretical study, to immersive experiences and direct involvement with other countries and cultures. Activities such as learning a foreign language, researching work-related topics in another part of the world and overseas work experience are mentioned. The same needs and activities could also apply to HE staff acquiring skills for mobility in a global labour market (Knight, 2004).

In its widest sense, Leggott and Stapleford (2007) identify up to eighty desirable employability attributes and task-centred skills associated with internationalisation in HE, working on a global stage and learning in a global context. But there are different conceptions and labels used to describe these graduate outcomes (Green et al., 2009). Jones and Killick's (2013) study on internationalising the curriculum demonstrates the difficulty in achieving consensus across the disciplines, employers and students about graduate outcomes. Despite being initially guided by cross-cultural capability, in discussion with the wider university this developed into global perspectives and then again into a global outlook. Oxfam (1997) makes reference to 'global citizenry', however this is essentially about participation, responsibility and activism (Caruana, 2011:18), and Leask (2013a: 1) prefers that students are prepared 'to be active and critical participants in a world society'. This better reflects the connection with working and learning in a global context and citizenship.

The rationales for developing attributes include the benefit of the student and the benefit of society and employers, or as a distinctive and marketable outcome of the university experience. Killick (2006 cited by Killick, 2009: 15) proposes that there are three important attributes: 'the awareness, knowledge and skills to operate in multicultural contexts and across cultural boundaries; the awareness, knowledge and skills to operate in a global context; and values commensurate with those of responsible global citizenship'. Jones and Killick (2013) use a pyramid of development for their design of a programme for all students by working with different levels across the institution. Their generic learning outcomes are intended to be cascaded down and cross-referenced to specific programme learning outcomes to lead to the design of specific activities and input for each programme. In the process of deciding what generic learning outcomes to integrate and how they are integrated, programme planners may need to be aware of any differences between what outcomes are valued by the institution and the preferences expressed by students and employers. Flanders (2011: 96) points out that attributes valued by HE regarding mobility may not represent employability skills valued by the employer, due to the different motivational foci of 'world and cultural experience' and 'on career building and professional practice'. For example, Otter (2007) points to intercultural skills, international perspectives and developing attitudes and values, whereas Campbell's (2010: 494) study of international students finds that the most important generic skill is 'developing different skills to acquire different knowledge relevant to unfamiliar contexts'. Furthermore, direct assessment and attribution to the university experience is problematic (Campbell, 2010) and the ranking of different attributes/skills may also vary according to peoples' or institutions' circumstances at the time.

Making sense of needs and moving forward

An internationalisation needs analysis will define strategic and financial realities and requirements for operating in the HE and healthcare environments and identify any differences in expectations between the institution, stakeholders and individuals across the spectrum of business, educational and social requirements in their specific environments or according to circumstance. So far, through the needs analysis, the literature review has looked at what there is to gain from internationalisation. Now it is important to look at the operationalisation.

Msweli (2012: 107) points to 'four broad categories or rationale for internationalisation: economic, academic, social and cultural, and political'. Institutions decide what emphasises are applied to each category by investing resources and energies. This means balancing different considerations such as income generation,

enhancing student employability and citizenry (through developing teaching, learning and research), developing the social and cultural aspects, and developing partnerships and collaborations.

The terms used to categorise the focus of internationalisation activities are Internationalisation at Home (IaH), Internationalisation Abroad (IA), and Internationalisation of the Curriculum (IoC). Caruana and Spurling (2007: 28) define IaH as 'any internationally related activity with the exception of outbound student and staff mobility', which includes teaching and learning infrastructure (recruitment, support and widening participation), curriculum and research (such as incorporating international and intercultural perspectives, placements and fieldwork) and extracurricular activities (engaging with communities, language study, integration and collaborative projects). Internationalisation Abroad relates to education being conducted across borders, including mobility of individuals through exchange and volunteering, providers of programmes/courses/curricula and international projects through collaborations and partnerships (Knight, 2006). Internationalisation of the Curriculum is 'the incorporation of an international and intercultural dimension into the content of the curriculum as well as the teaching and learning arrangements and support services of a program of study' (Leask, 2009: 209). Leask (2013b) has developed a five-stage model with different disciplines and universities in Australia (imagine – revise and plan – act – evaluate – review and reflect) as an aid for groups or teams putting IoC into practice. Leask's model (2013b) recognises that strategy is about detail, determining the path internationalisation needs to take, what needs to be done, and adapting and circumventing any challenges.

There are similarities between IaH and IoC, yet they are not the same (Caruana and Spurling, 2007). Student mobility is 'becoming more integrated into the curriculum' (Hunter, 2012: 115). 'Home' oriented IaH focusses on issues other than mobility outside the country, whereas IoC can include external mobility, and requires preparation for it, or can be described as 'exported' internationalised programmes that include relevant international and intercultural perspectives. As IoC is discipline-dependent, leadership and support is important (Leask, 2013b) to take it forward, and Clifford (2009: 137) identifies the 'tension between the universal university curriculum and the 'localisation' of the curriculum' to reflect the local environment or requirements. Staff on healthcare programmes, such as nursing, are keenly aware of the need to ensure they 'provide contextually relevant programmes' (Parker and McMillan, 2007: 131). Leask (2012) outlines seven principles for ensuring institutional policy is connected with the curriculum and student life. These describe that staff and

student support, campus culture, diversity and clear policy is essential for IoC to evolve and that decisions made at local level can have wide-ranging impacts.

Curriculum Content and How Activities are Undertaken

Healthcare professionals need knowledge and skills for contemporary clinical practice that emphasise local practices while dealing with a culturally diverse client population. Mobility abroad is useful for bridging the theory–practice gap through providing opportunities to experience different environments and appreciate the effect of culture (Ruddock and Turner, 2007). However, the applicability of western curricular content to non-western countries, particularly with nursing (Parker and McMillan, 2007), is being challenged and curricula need reviewing to meet international requirements. Knowledge of the local contexts is needed to grasp the meaning of how practice is situated effectively (Parker and McMillan, 2007). This has implications for providing support for staff to develop the required knowledge and teaching expertise. It is not just about providing diverse learning opportunities, but carefully considering how learning activities are used and developed (Stohl, 2007). This is due to 'the extent and manner in which teachers shape, support and explicitly discuss features or elements of interchangeable knowledge content of an intercultural character, in order to achieve internationalised education' (Wihlborg, 2009: 120). The literature emphasises the development of intercultural skills, competence (discussed as an outcome in 2.3.5) and personal development. Wihlborg (2009: 124) states that 'pedagogy and learning are very much activities that build on assumptions concerning people's lifeworld, socio-intercultural contexts and formal educational contexts, as well as framings of such contexts of interaction between people.' This is part of what Salvetti and Bertagni (2010: 123) term 'cultural intelligence', listening to and understanding behaviours, habits, contexts and markets that are different from our own.

To be able to transfer learning into practice, it is important to explore how the learning processes are influenced in healthcare situations, through the formal curriculum (programme of teaching), the informal curriculum (co-curricular activities on campus), the incidental lessons learnt through the process and using the disciplinary paradigm (Leask, 2013a). In healthcare, placements in clinical practice add a further complexity as they are part of the curriculum, but not on campus. Knowledge or evidence derived from different placement settings and the international community 'informs clinical decisions throughout the world' (Horton, 2009: 229) and so may expand the scope of the formal and informal curricula and incidental lessons learnt, hence the design of learning activities and the way they are supported are crucial to helping students make the most of such opportunities. Murdoch-Eaton et al. (2011), in the context of medical

programmes, add that activities need to be integrated into the programme to be most effective, rather than added on.

Returning to Deardorff's (2006) model there appears to be little emphasis in the literature to input (amount of resources that are contributed), apart from the process of delivery. This is possibly due to the fact that allocation of resources is tailored to the situation. Both individuals and institutions will determine the balance between how their capabilities and resources support what they want to gain from the internationalisation process. More focus has been given to the activities (the interventions that are applied), and output (the amount of effort put in and the results of the activities) than input (resources allocated to the process) and outcomes (the consequences and analysis of impact that results) of internationalisation, and these will be discussed below.

2.3.2 The Process of Delivering Internationalisation

Leask (2003: 1) suggests that demonstrating internationalisation is 'now critical to universities' success' in situating themselves in the educational marketplace, so institutions must give thought to how their operations will proceed. The mode of delivery of internationalisation will also reflect the definition of internationalisation used. Warner (1992, cited by Qiang, 2003) describes three models of how internationalisation may be operationalised: a 'market model', a 'liberal model' and a 'social transformation model'. Each reflects a different definition of internationalisation and each has consequences for the internationalisation process.

In the market model, university efforts are directed to increasing competitive advantage in an assumed free market. A university using this model considers HE as a business with education, learning and research as the marketable commodities at its core (Knight, 2004: 24). The drive to expand into a wider arena and the resultant competition to gain a larger tranche of the sector then pushes institutions into defining how they are different from others and capitalising on their saleable attributes and unique selling points. Internationalisation is then manoeuvred into becoming what might be termed the insignia of achievement and as a tool to be used for positioning institutions within the marketplace. In this way Stromquist (2007) equates internationalisation with entrepreneurialism. The consequence is the formation of a power differential through affluence and influence, and manipulation by those in the ascendancy to dictate the form of environment that is created. Yet the strength of differences in structures and cultures of HE internationally may provide a tempering influence or even resist this model of working in other areas of the globe.

Teichler (2004: 10) holds a similar view that internationalisation is a trend away from a closed national system of higher education to a system of international knowledge transfer and cross-border movement of knowledge and people. This view has elements of both the liberal model and the approach of social transformation. It promotes intercultural understanding and activities increase awareness of and redress of the potential effects that globalisation has on the population. Teichler (2004: 7) discusses the differences between globalisation and another term, 'Europeanisation', a regional variant of globalisation, and internationalisation. He first proposes that globalisation is a blurring or disappearance of borders and establishment of a competitive, commercialised education and knowledge market. Internationalisation is distinguished from globalisation by having a continuation of borders, but an encouragement of border-crossing activities such as physical mobility, academic cooperation and knowledge transfer, and international education (Teichler, 2004: 8). Borders provide some degree of control for a country so can temper the influences of the market model. Within its own borders a country is able to impose policies that effectively control the conditions under which people and businesses gain access to the market and are able to operate.

Altbach and Knight (2007: 291) concur with Teichler (2004) in their approach to internationalisation. They conclude that it contrasts with globalisation by being a two-way process involving exchange of knowledge and knowledge products (students, programmes, institutional infrastructure). The initiatives they cite, such as Erasmus, the Bologna Process in the European Union (EU) and European Directive 2005/36/EEC, are intended to be socially transforming by harmonising qualifications and allowing cross-border mobility with the collaborative political nature of the EU. This also sits well within the intentions of mutual understanding suggested by the British Council (2007) and the liberal and social transformation operational models. However, HE is still subject to national political influence and the effects of local and institutional finances and culture, to the extent that it may limit the degree to which internationalisation may happen in practice. While the 'one size fits all' (Europeanisation) prescribed formula of collaboration may neutralise the effects of globalisation and serve to benefit the European region as a whole, it may not suit the structures and cultures of some countries and, like globalisation, could be perceived by some as pressure to come into line. This forces further consideration of the types of activities, the outputs and intended outcomes of internationalisation in different countries, and some of the consequences that arise, and there needs to be further research to gain more clarity and consensus.

Delivering on internationalisation depends on the choices made to engage in the process. Although HE may promote greater equality and equilibrium of exchange, it cannot be assumed that each country possesses similar products with equal freedom either to access or to supply them. There is freedom of choice of engaging or not engaging in the internationalisation process, dictated by how universities and individuals weigh their perspectives, strategies and directions, desired outcomes, level of input against the cost/benefit realities of engaging in the process. There are different ways of depicting and viewing this, either through deconstructing the organisation or looking at the components of the processes they use.

Huisman and van der Wende (2005) use Scott's (1998) organisational model (an adaptation of Leavitt's Diamond, Leavitt et al., 1973) as a basis for analysis in their HEIGLO study of HE institutions in the different countries. The model uses social structure, participants, goals and technologies as the interdependent elements of the organisation and suggests that changes in these are contingent on changes in the environment around them. Using so few elements may be limiting. Other methods such as McKinsey's 7-S framework (Peters and Waterman, 2004: 10) is more comprehensive and allows the interrelationship between organisational strategy, structures of the organisation, institutional outputs (education, research and business), modes of delivery, social/organisational culture, people (educational staff, managerial, administrative and support staff, and students), shared values and the skills and accommodation/space to be visualised to analyse the constraints.

However, internationalisation initiatives are not cost-neutral for business activity. Internationalisation can involve partners in a two-way process of engagement and, with a background of a changing external environment, resources and input must be controlled and weighed against tangible benefits. Scoping of internationalisation capability and capacity therefore involves the McKinsey framework elements being applied to each of the stages of the internationalisation process.

Deardorff's model (2006: 24 – see Figure 2.1) provides an overview of the stages and can help to view what, how much and where input/resources are directed and prioritised and align the organisation's needs and vision. What the model may not account for are the external variables: the effects of collaborations and inter-relationships between stakeholders at different levels of the process that may impact on how the process is evaluated. Some stakeholders will have an opinion on the level of input and types of resources needed, whereas others may have different foci on the desired outcomes of the process or the activities contributing to the outcomes. While input and resources may be finite and constrain the capacity to complete activities,

these cannot be static. As the HE environment changes, the institution's focus on their desired outcomes, and the activities to support them, will alter and this may cause tensions in the capacity to deliver and cause the input and resources to be reconfigured or reallocated. This has implications for the degree to which input and resources may be assessed. The process is not simple and the linear sequence, its stages and degree of flexibility need to be tested further.

2.3.3 Activities of Internationalisation

De Wit (2002: 114) proposes that internationalisation should not be a 'catch-all' term and what higher education encompasses should be re-examined and redefined to ensure accuracy in labelling activities and needs. Siaya and Haywood (2003) point out that the HE institution will be concerned with the type of international experience that is being provided. Curricula can be designed to provide opportunities to work with and learn from people from other countries, but the HE experience is not just about gaining education. Effort is expended by institutions on the education, life and culture experience but they also provide opportunities to participate in collaborative ventures, projects and research with other universities and other countries, which can benefit students and staff alike. The educational elements are supplemented with a social experience that embraces different cultures with different values and social mores. Otter (2007: 43) highlights this when discussing the Dearing Report (National Committee for Inquiry into Higher Education, 1997), a major review of HE in the UK that included academic standards. Otter (2007) comments that HE must 'move beyond the notion of there being a fixed common culture and set of values to a world which recognises the plurality of cultures and the possibility of competing value systems'. The importance of intercultural and international awareness in education, for both 'home' and international student groups, means that the UK government included reference to it within the document 'Putting the World into World-Class Education' (Department for Education and Schools, 2004). Harnessing the influence of international differences and culture and making it usable by students and staff of different nationalities is approached in different ways. There are suggestions that it may be accomplished in the classroom (incorporating a 'global' and intercultural perspective into the curriculum), the environment (by placing more value on the social aspects of university life) or by a combination of both:

- Acknowledging different cultures or including international students on campus and within the university schools;

- Using lectures that integrate a global and intercultural perspective, but students examine the issues in self-selected mono-cultural groups in the classroom and on campus; and
- Creating an integrated learning environment with multicultural groups within classes and on campus.

The presence of different cultures is, arguably, not what internationalisation is about, whereas an integrated environment could promote what Gacel-Avila (2005: 126) suggests is the 'key educational resource for training citizens with a critical perspective and adequate preparation to work and live effectively and successfully in a global context'. Gacel-Avila (2005: 126), when discussing internationalisation as the new paradigm for education in the twenty-first century, further suggests that 'the international curriculum should favour the holistic formation of the individual and be based on an integral, humanistic, and socio-reconstructive curricular structure'. Although this transformative change is tempered with the knowledge that, while the most effective sources of intercultural knowledge and understanding are the students themselves (Ryan, 2011), approaches must be mindful of the pedagogical implications of learning styles (Eaves, 2011). Murdoch-Eaton et al. (2011: 567) state that 'the 'transformative approach within programmes requires not only an action approach but also the engagement of the whole institution to facilitate such adaptability and fluidity of content to reflect dynamic and responsive learning'. To achieve this level may demand a huge commitment from the university, staff and students to take ownership of the change and the activities required to make it work. Therefore, staff and student views about the implications for delivery of internationalisation require consideration as all make conscious decisions about how to position themselves for the greatest advantage, depending on their motivations. These may colour their perceptions of engaging in the process and steps would need to be taken to account for this.

The report, 'Broadening our Horizons', by Universities UK and The United Kingdom Council for Overseas Student Affairs (UKCOSA: The Council for International Education, 2004), suggests that at an individual level there appears to be widespread satisfaction with what the British HE experience affords students. However, the overall picture of satisfaction is interspersed with a number of operational issues that require attention. The literature outlines challenges and misunderstandings about such things as cultural expectations on the use of class time, passive learning and lack of critical engagement (Chalmers and Volet, 1997: 91), difficulties with language (Hellsten and Prescott, 2004: 347), awkwardness (Krause, 2006: 233), isolation (Marshall et al., 2004: 279) and inhibitions about contributing (Hellsten and Prescott, 2004: 346). Leaving your home

country and accustomed support network can be a harrowing experience (Hellsten and Prescott, 2004: 347).

In a healthcare education context, studies identify additional problems in understanding important issues such as the multicultural nature of the community, cross-cultural misinterpretations and patient family expectations, as well as differences in medical culture and healthcare delivery (Marshall et al., 2004: 279; Hall et al., 2004: 124). For healthcare students, it is arguable that both home and international students struggle with these problems and all could potentially diminish satisfaction levels with their HE experience and hinder successful internationalisation.

An alternative way of harnessing learning is to undergo experiences off the university campus and many institutions are seeking to develop their business further, in a more formal way, through research and educational activities in collaboration with other institutions. From a staff point of view such projects and research are often developed through informal relationships, but making this a success means the political, economic, social and technical issues from local to national contexts would need to be addressed. There may also be opportunities for student-only exchanges to take place and these may be educational, for instance through the Erasmus/Socrates schemes, exchanges or arrangement of work placements. Providing and developing educational, research and work placement opportunities, exchanges or research connections abroad could provide the simplest approach to introducing an international outcome to a programme of educational study.

Mahat and Hourigan (2006: 1) indicate that there are obvious advantages to working and studying abroad, such as learning a new language, gaining valuable life skills and experiences and learning more about a different culture and society. Identity can be altered by having a wide range of social connections and experiencing social changes (Giddens, 1991) and the experiences acquired through the effects of global possibilities and associations (Campbell and Rew, 1999) may alter personal identity and how others see them. Yet the connections between a person's identity, the university, global policies and professional practices may not be immediately apparent or perceived as part of, or a consequence of internationalisation. What is important is to help individuals recognise that a potential effect on identity may be happening. Reflection on their part on the internationalisation process, and the consequences it has, will help their awareness and understanding of their own perceptions and how they might make the most of opportunities for personal development.

Collaborative ventures and exchanges provide opportunities for staff and students not only to share and disseminate knowledge and work together on an international level but to gain benefits in terms of improving skills for mobility and working with others. Collaborations can be formalised through memoranda of understanding between institutions, but within this there is a challenge of different levels of approach and engagement in internationalisation and competing outcomes. To stay competitive many universities in the sector are opening up to the international market and the Observatory on Borderless Higher Education Association of Commonwealth Universities (2004) outlines the spectrum of outcomes sought by universities. These can be summarised into outcome initiatives that are internally and externally facing, as follows:

1) Internal facing – Supply within own university environment an educational programme that has both international and intercultural dimensions embedded in it.
2) Externally facing – Provide and develop educational, research and/or work placement opportunities, exchanges or research connections abroad; export educational and research programmes across borders in partnership with overseas provider; the movement of education provider overseas; or combinations of any of these.

While these activities can supply a degree of international and intercultural awareness, they are dependent on the goal of the activity and where and what experience is gained through that activity. Both projects and programmes require institutional and individual resources and output to contribute to the social and educational processes and learning that takes place. If emphasis is placed on the academic or research output and outcome, and the social aspects of collaboration are neglected, then the capacity to acquire social capital may be limited. This is especially important for programmes that confer a professional qualification, such as healthcare. Healthcare students attending work placements as part of the curriculum have to work within varied communities and cultures (educational and social) as part of their course, so require the skills, knowledge and attitudes to be able to work with other people. The normative needs part of the needs analysis will help to identify what international and intercultural knowledge and skills are required. Collaboration with other institutions, both at home and overseas, and professional/regulatory bodies would be a useful way to create benchmarks against which programmes can be evaluated.

The challenge for HE institutions is to consider not just how they design and create an educational experience that places value on the different cultures and their input into

the institution, but also how much value and utility is placed on that experience by the different stakeholders.

2.3.4 Issues with Outputs of Internationalisation

As well as looking at the resources and input needed to deliver activities and accomplish goals and outcomes, both individuals and institutions will reflect on the amount of effort put in and the results of activities in which they engage. This will affect how individuals and institutions are able to position themselves, what adaptations they make to the resources and effort they devote to internationalisation activities, and how their identity is viewed by themselves and others.

Internationalisation's original guise, of the exchange and sharing of ideas, cultures, knowledge and values, is perceived as a positive force (Knight, 2009: 120), however there may also be some unanticipated effects. The landscape of HE has changed due to the marketisation of knowledge and competition for institutional ranking, profile and prestige. In addition Hazelkorn (2004), in her review of the intended and unintended consequences of HE policy reviews, mentions the effect of changes in funding streams and the implications of high or low evaluations through different metrics which may create a 'Matthew Effect'. This is a biblical reference to verses in the Book of Matthew on the continuing advantages secured by the elite, compared to the disadvantages accrued by the non-elite, due to the results of high evaluations. In HE, trying to keep pace with changes presents additional difficulties for disadvantaged individuals and institutions. The disadvantages may be not only fiscal but a limitation on their capacity to be involved in the changes and with others in the process. This interferes with their ability to adapt and position their identity on a personal basis, as well as how they are perceived by those internal to or outside the institution. A blurring of individuals' identities and a loss of distinctiveness could be seen as threatening by either individuals or groups.

Within HE, from an individual perspective, academic identity is a complex notion with many competing influences such as values, attitudes, behaviours, knowledge base and activities. Identity is determined by how individuals understand themselves, interpret their experiences, their actions, the groups to which they belong and how they portray themselves (Archer, 2008; Lieff et al., 2012) and how they wish to be perceived and recognised by others (Gee, 2001). Thus, identity is contingent on and shaped by the pressures, cultural and practice norms of the community in which people work and live, and by an external environment influenced by globalisation and internationalisation. For younger academics (Archer, 2008), identity is also tied up with

feeling authentic and successful. Sometimes the conditions surrounding an academic prevents this from happening, for success can be shaped by many things (Archer, 2008) such as ethnicity, social class, gender and age, although their effects cannot be fully described. In addition, the HE environment is in a state of continual flux because of the economical, functional and geographical diversification of HE (Becher and Trowler, 2001: 14–16), which is unsettling. Consequently, the meaning of what it is to be an academic and the constituents of academic work is also changing (Archer, 2008: 385). It is not surprising that Quigley (2011: 21) suggests that academic identity lacks precision in its definition. In the healthcare environment the funding streams, work, workload, modes or working, ways of being managed and organisational structures are also changing. This has an impact on individuals' roles, responsibilities and goals, and how they align with the organisation. Billot (2010: 710) suggests that 'how an academic contextualises their identity has an impact on the way in which they make sense of their workplace'. For academics and both home and international students, to work effectively their sense of identity and sense of the workplace have to be reconciled in some way and thus influence how they situate themselves and how they are positioned by others. Koehne (2005: 105) comments on how international students have a range of identities, in contrast to the generic term 'overseas student' imposed by academics. Koehne (2005: 118) suggests that identity for international students is a fusion of who they are, their experiences and ways of being, and what they want to become. The international student faces many challenges and Koehne (2005) mentions that they have to 'fight' to get where they are and that there is some dissonance when values and pressure for change clash.

For academic healthcare students and staff, identity concerns the co-existing roles and identities of academic and current and future professionals, as proposed by Billot (2010: 716). Lieff et al. (2012: 214) conducted a multidisciplinary study of the development of academic identity in healthcare professionals following a faculty development programme (teaching excellence, scholarship and leadership). They found problems with accessing and using the right language, which 'enabled access to the broader educational community' (Lieff et al., 2012: e213). Lieff et al. (2012: e213) also suggested that healthcare professional participants viewed themselves through a particular lens, and as they were introduced to the new roles of leader, faculty developer and scholar they experienced 'internal conflict between their identity as a clinician and their identity as an educator'. It was possible that each individual had their own well-established blend of attitudes, behaviours and status. Any disconnections or contradictions between roles added complexity and challenged how the individual expressed their sense of self and self-efficacy. Having to balance the expectations and pressures imposed by the healthcare and HE cultures and

communities of practice leads to issues of managing multiple identities. Consider the situation for new students, especially international, where they have to assimilate not only a new language but the additional nuances of languages at their new living environment, of academia and of their new professional discipline of healthcare. Because of the continual reconstruction of identity, both staff and students may need to develop skills for reconciling their emerging identities, strengthening their resilience to change and adapting and engaging with a changing world.

It is important not only to influence people's level of engagement with internationalisation and supporting activities but to ensure that a gap does not form between policy and implementation (Luxon and Peeblo, 2009). This can be a 'chief challenge for developing and sustaining internationalization' (Stohl, 2007: 359), as people have different motivations, directions, level of input through their estimation of the cost/benefit realities of engaging in the process. The most commonly perceived challenges to staff engagement with IoC are: defining what IoC means with respect to the disciplines; clarifying where responsibility lies for IoC; overcoming staff members' misconceptions; how to enhance teaching by utilising staff members' own cultural diversity; and providing suitable infrastructure by addressing wider campus and student support mechanisms (Green and Mertova, 2011: 5). There are also differences in attitudes, beliefs and knowledge between disciplines. Clifford's (2009) study found that some pure disciplines thought of culture as inconsequential, whereas some applied disciplines had high awareness of the impact of culture. Svensson and Wihlborg (2007: 295) found that, within nursing, teachers tended to rely on 'their own personal knowledge and experiences' and that 'general knowledge about other cultures and systems of nursing' were not emphasised. Sawir (2011) found that differences between the disciplines' (arts, engineering, economics and business, and science) beliefs affected their teaching practices.

Green and Mertova (2011: 3) state that a 'clear definition' is needed, a 'university wide framework for internationalising the curriculum' and support for staff members through 'clarity over their roles', and good lines of communication. Leask (2013a: 12) adds the lack of clarity of a rationale and that the nature of disciplines and discipline communities should be considered and integrated. Staff members also need sustainable capabilities, skills and capacity to engage, so there is a need to 'include multiple perspectives and multicultural sources' (Parker and McMillan, 2007: 133), support mechanisms to allow teachers to be able to deal with cross-cultural difference and 'deep reflection on own values, expectations and attitudes' (Das, 2005: 34). Van der Werf (2012: 97) describes the International Competencies Matrix developed in Hanze University, Groningen, that allows staff to assess their own competencies and

suggests that 'training in "weak" competence areas may be necessary to make universities' internationalisation policies a success'. In addition, seeing good practice examples of IoC and 'opportunities to work with colleagues overseas, learn about the backgrounds of their students' (Clifford, 2009: 141) may be helpful. Further attention needs to be paid to this process and obtaining more information about how concepts are specific for disciplines and how they orient themselves to configuring and delivering internationalisation.

2.3.5 Outcomes of Internationalisation

For individuals and the organisation, the outcomes can be considered in two ways. There are those that are internally facing and so impact on the person or within the organisation. There are also outcomes that are externally facing and affect other people or those outside of the institution, and examples are provided below. Knight's (2003: 2) extended clarification of 'internationalisation at the national, sector and institutional levels is defined as the process of integrating an international, intercultural or global dimension into the purpose, functions or delivery of post-secondary education' sets the tone for individual's or institution's internal outcomes, external outcomes and approaches to working with others. Some examples of outcomes from the literature and the previous sections of the literature review are:

Internal facing:

- Individual
    - Acquiring international and intercultural knowledge (Hudzik and Stohl, 2009)
    - Acquiring skills for employability (Leggott and Stapleford, 2007)
    - Social and cultural development and life skills (Hudzik and Stohl, 2009).
- Institution
    - Reputation (Hudzik and Stohl, 2009)
    - Income (Hudzik and Stohl, 2009)
    - High quality services and education (Knight, 2005)
    - Internationalised curricula to develop the knowledge, skills and capabilities of students (Wihlborg, 2003)
    - Development of options for mobility (Mahat and Hourigan, 2006)
    - Greater proportions of international students on campus (Knight, 2005).

External facing:

- Individual
    - Gaining an international experience (Leggott and Stapleford, 2007)
    - Gaining a global perspective (Bourn, 2011)
    - Global citizenship (Caruana, 2010)
    - Intercultural competence (Deardorff, 2006).
- Institution
    - Profile and reputation (Hudzik and Stohl, 2009), and establishing and improving university positions on national and international stages using international metrics and ranking systems
    - Expansion and diversification of educational programmes (Knight, 2005)
    - Cementing position on international stage through collaborating and networking with those outside the institution to develop partnerships for research and business (Knight, 2005)
    - Community problem solving (Hudzik and Stohl, 2009)
    - Development of resources (Knight, 2005).

It is not possible to provide a comprehensive list as the literature appears to focus on activities undertaken rather than outcomes, per se. Perhaps the reason is that the formulation of outcomes of internationalisation is specific to the individual or institution and the meaning that they give to them, so the examples given, although generic in nature, may not be commonly adopted. The specificity of outcomes arises from the content of the outcome and the level to which it is attained. Because this is dependent on the individual's or institution's situations, needs and goals at the time, it is not static and has potential for change. The approach to internationalisation adopted then becomes a strategic expression of intent for stakeholders, those external to the university, staff and students. What it articulates is the extent and forms that internationalisation takes, what outcomes are desired and the route it takes. The task for the individual and the institution is to settle on an interpretation of internationalisation and to configure the elements of their programme of internationalisation to make it suitable for the institution and its stakeholders.

From an institutional perspective the internal outcomes will involve providing a satisfactory level of support mechanisms for the internationalisation process, both for internationalising the university experience and developing business, research and education collaborations. This may involve setting up a system of continual improvement for educational processes, programme outcomes, services and social structures with appropriate stakeholders. There is competition in the HE sector, and

studies of the activities in section 2.3.3 provide examples of what others have done and what has worked for them. These describe a variety of external facing business, research and educational activities (across borders or international collaboration) and internal facing institutional, social and curricular activities (within own borders/institution). The studies are used to help inform decisions regarding input, resources and activities, however, because some of the studies only provide overviews for different nations (Knight, 2004), with differing approaches to internationalisation and contexts, it is difficult to make direct comparisons and gain equivalency. While the studies have limited value for guiding strategy, and should be interpreted and used with caution, an institution will have to be visionary, innovative and, as Rouhani (2007: 482) points out, 'systematic' in its approach to internationalisation.

An example of being systematic is the experience of the University of South Australia, which developed a series of graduate qualities that provide guidance on expectations throughout the institution. One element of the graduate qualities relates to international perspectives, and the University of South Australia has developed its own audit tool with six criteria to determine the extent to which a programme of study develops an international perspective (Leask, 2003: 5). This enables staff to use a ranking system to identify any deficiencies and internal benchmarking to achieve parity between schools and programmes. But a more holistic view may be appropriate, as internationalisation is more than just graduate skills (as outlined in Figure 2.2).

Promoting international and intercultural competence as an outcome presents challenges to normative assessment because it is open to many different meanings and contestation about the different levels that may be required. This is reflected by Law and Muir's (2006) observations of an international student nursing exchange that 'many students find coping with uncertainty and contested notions such as culture confusing and problematic'. The experience of being a stranger was fundamental and cultural skills were developed through a series of stages: unconscious incompetence, conscious incompetence, conscious competence, and unconscious competence (Purnell and Paulanka, 1998). Beach et al.'s (2005) systematic review of effectiveness and costs of cultural competence training of health professionals found that knowledge, attitudes and skills were improved, but there appeared to be no evidence that it had effects on patient adherence to therapy, health outcomes or equity of services. Inglis et al.'s (1998) small study of community nursing students' study abroad showed very little change in nurses' learning from their experiences. This tends to support the view that acquiring skills and knowledge, and intended effects, can be variable and raises questions regarding whether students and programmes have different perspectives on

how to use the teaching and learning opportunities to develop employability skills and knowledge to best effect.

Mak and Barker (2013) developed a resource, EXCELL (Excellence in Cultural Experiential Learning and Leadership), with discipline specific scenarios for facilitating cultural awareness and skills, a framework of generic social competencies and used learning circles to engage staff effectively. Participant learning was evaluated in the form of completion of a cultural map and teacher engagement by a poster showcase of teaching innovations. While completion of a map or a poster might demonstrate knowledge acquisition, however, it may not demonstrate learning development, the impact on the student, the impact of teaching and learning or evaluation of its transfer into practice. Some advocate the use of competencies and a set of skills that allow a person to view and analyse culture and then be able to decide how to manage situations. There are many different methods of assessment of intercultural competence and Deardorff (2012: 56) points to interviews, observation, portfolio, professor evaluation, pre-post-test and self-report. Self-assessment frameworks have been used by van der Werf (2012) (International Competencies Matrix) and Campinha-Bacote (2002) (Inventory for Assessing the Process of Cultural Competence among Healthcare Professionals – Revised) and each sets out the constructs of competence and how each is measured. There are varying interpretations and usages of competence, as well as the many different elements associated with cultural effectiveness (Stone, 2006). Some may use them as quantifiable groups of attributes necessary for working, whereas others may use them as a way of assuring and managing quality in the workplace. Consequently, competence is contingent on the context and the situation.

Activity design would take account of the variable nature of the competency goals and which services and social environment need to be created to facilitate communication and development of the requisite knowledge and skills. Stone (2006: 345, Figure 1), in his model of intercultural effectiveness, outlines that ‘emotional intelligence, motivation, openness, reflectiveness and sensitivity are specifically related to intercultural effectiveness’. It is also important to establish a firm understanding of ‘the interconnectedness of society, politics, history, economics, the environment, and related topics’ (Hunter, 2006: 279). Hunter’s (2006) study used a Delphi method to develop an instrument to survey the knowledge, skills, attitudes and experiences that were deemed necessary to be globally competent. For Hunter (2006: 279), the most critical step is ‘for a person to develop a keen understanding of his or her own cultural norms and expectations’, followed by ‘exploration of cultural, social and linguistic diversity’, either through direct or indirect experience, to understand others. Making

intercultural and international dimensions appropriate and applicable to different subjects, particularly professionally based ones, means that while the application of competencies may be desirable it may be neither realistic nor achievable by all people.

Particularly in healthcare education, the ability of the person to reflect on the impact of international or cultural difference on their own behaviour, understanding, professional practice requirements and communication skills reflection is the key to enhancing their employability skills. Perhaps the ability to reflect may be more measurable than competence and could provide a frame of reference that can then be used to further develop an individual's skills. It also affords the flexibility to work across different subject disciplines and the opportunity of delivering it at different levels, yet not make the assumption that there is the same rate of achievement. Unfortunately, few benchmarks appear to have been developed either with other institutions in the UK or internationally, so there is no single answer to what is delivered. It could be argued that the process of learning, including the services supplied by the university, is often more important than the actual knowledge.

From an individual's internal perspective, the need to develop skills and abilities for cross-cultural communication, intercultural knowledge and raised international awareness (Leggott and Stapleford, 2007: 129) has already been mentioned. With greater mobility of people through globalisation, exploring the ways students study international practices, practice delivery and developing answers to global challenges (especially in healthcare) and seeing the relationships between themselves and global practices become increasingly relevant and important. McKim and McLean (2011) identify the key issues in developing the global health practitioner as transformation of education through a global health curriculum, 'promoting global health while meeting local needs' and 'collaboration and networks' to the benefit of a healthcare service that is directed to the welfare of others. Elkin et al.'s (2005: 321) definition of internationalisation in section 2.2.2 succinctly expresses several of the above outcomes as the development of 'global perspectives, international and cultural and ethical sensitivity and useful knowledge, skills and attitudes for the globalised marketplace'. Such outcomes would also be appropriate for HE staff (Knight, 2004: 14) and institutions. If people and organisations are to work cross-borders and cross-culturally, they require both skills for mobility and effective collaboration with global partners. While the values, attitudes and behaviours are fundamental, as previously mentioned, the level of outcome needed should not be neglected. The difficulty is that there are little comparable data, or explicit standards, for the attainment of knowledge and skills. Some authors, like Deardorff (2006: 242) and Soderqvist (2002: 29),

suggest there should be a requirement for a level of intercultural 'competence', yet there are issues with their views that would have to be resolved.

Deardorff's (2006: 254) three-stage Delphi study with 23 intercultural scholars and administrators suggests that there is a pyramid of intercultural competence up which people progress. Deardorff (2006) finds that, although there is agreement that competence should be judged, there is a breadth of opinion on what constitutes competence and wide variation between the understandings of professional groupings of scholars and administrators. The underpinning notion, while promoting an equality of understanding, assumes that cultural competence is an essential rather than a desirable attribute and that it is attainable. The problems this raises is how suitable levels or benchmarks for 'competence' are determined and set, which would subsequently influence the design of suitable 'interventions' to address them fully, and the assumption is that all individuals should attain a level of competence with no room for choice. It should be possible to define a level of awareness or understanding of one's own and other's worldview and cultural practices, recognising where there is conflict with personal or cultural values, but attaining competence is more than this. Competence requires not only a breadth and depth of knowledge and understanding but expresses the need for effective behaviours based on one's knowledge, skills and attitude and goals (Deardorff, 2006). Attaining competence is challenging within one cultural setting, let alone in different settings as applicable to healthcare professionals who deal with people from many different backgrounds. Because of the individual nature of goals, assessment of competence would be variable, subjective and less measurable.

The challenges of measuring and assessing internationalisation, and the individual nature of goals, are outlined by the IMPI project (Indicators for Mapping and Profiling Internationalisation). Hudzik and Stohl (2009) propose three categories for measurement: input, output and outcomes (reflecting Deardorff's 2006 model). But within each category there are numerous indicators that could be used and Beerkens et al. (2010) point to their continuing growth. The IMPI project aimed to put together a set of tools and indicators for self-evaluation. However benchmarking would require agreement about what is measured. If outcomes are personal, then input and output will be limited through being personalised. The consequences for internationalisation are that the indicators would only show a limited part of reality (Beerkens et al., 2010) for the institution and a common understanding of what internationalisation entails will continue to be contested.

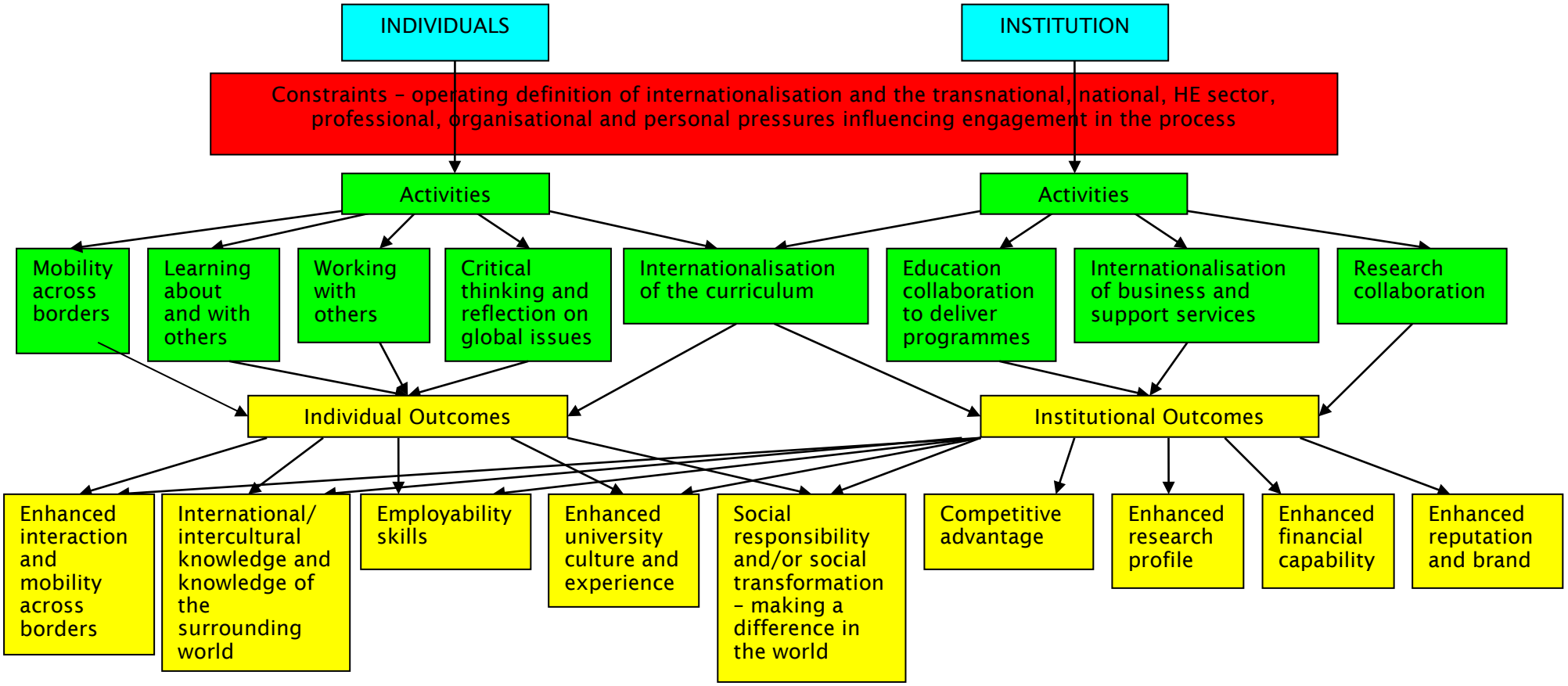
2.4 Summary

Where globalisation presents a large scale view of the changes in the world, with policy changes or pressures flowing trans-nationally, internationalisation represents the specific practical responses to globalisation at national, sector, university and individual level. Within the definitions in previous sections, internationalisation responses are multifaceted yet have the following commonalities:

- Facilitating people in becoming critical members of global society;
- Adopting an international perspective – interaction, knowledge, understanding;
- Adopting an intercultural perspective – interaction, knowledge, understanding;
- The two-way process – cooperation, collaboration and partnership; and
- Cross-border mobility.

Accordingly, an amalgamated view of internationalisation could be the embedding of an international and intercultural dimension to learning, research and university services to foster cooperation and collaboration with others across borders and cultures, and the development of awareness of the knowledge, skills, attitudes and behaviours of staff and students needed to do so. From a university perspective, it is the determination of how much of the above commonalities are incorporated through policy and infrastructure (including culture, research and support services) and educational process (including content, activities, and delivery) changes. A summary of the various aspects of internationalisation covered in the literature review and how they link together is seen in Figure 2.2.

Figure 2.2 Summary diagram linking the various aspects of internationalisation covered in the literature review



Internationalisation can be socially transformative for the participants, but there are limitations posed by the pressures brought to bear at different levels on the process (transnational, national, sector, professional, organisational and personal). In addition, people and institutions have differing priorities, operational definitions for internationalisation and differing attitudes to the knowledge, teaching, research and business functions so there will be differing levels of engagement and ways of engaging with internationalisation. To be a part of the process and the changes that emerge, staff, students and institutions must first define what internationalisation means to them. The definition forms the starting point for understanding the needs, the relevance to the goals they want to achieve, the input and resources to be committed to internationalisation and how they engage with the process. For institutions it also helps to guide how evaluation between schools and faculties can take place and to facilitate further comparisons at national and international levels.

Balancing the internal and external needs and pressures that internationalisation embodies is challenging for institutions. Section 2.2.3 gives an outline of how an international perspective, intercultural awareness, skills to work abroad and international partnerships have become major ideas, but it must be considered how these perspectives are compatible with the shared values of the institution. Section 2.3 gives an indication of the needs, outcomes and activities undertaken at a local level and how the requisite building blocks may be assembled to provide sufficient capacity and capability. As mentioned in section 2.3, there are many political, economic, social and technical tensions at institutional and individual levels that influence perceptions about these different aspects of university life.

This leaves a number of unanswered questions: ‘What are the conceptions of internationalisation used in the Faculty of Health Sciences?’; ‘What are the constituents of internationalisation?’; and ‘What are the implications for delivery of the internationalisation process?’. Therefore, the research aim is to understand staff members’ conceptions of internationalisation, its constituents and the implications for its delivery within the Faculty. This may be seen in terms of the skills, knowledge, attitudes and activities needed to address it and to gain an appreciation of how the process and outcome link together. Canvassing the views of staff members may be a way of answering these questions and developing a means of understanding it.

3. Research Design

The aim of the research is to explore staff members' conceptions of internationalisation, its constituents and the implications for its delivery within the Faculty as they have the responsibility to implement internationalisation. The research questions for staff are 'What are the staff's conceptions of internationalisation within the Faculty of Health Sciences?'; 'How do staff conceive the constituents of internationalisation?'; and 'What are the implications for delivery of the internationalisation process within the Faculty of Health Sciences?'.

3.1 Theory of Knowledge and Methodological Rationale

3.1.1 Researcher Background

The researcher's background is in physiotherapy, a profession allied to Medicine with foundations embedded in a model of scientific thinking and a psychosocial perspective at its core. The researcher utilises multiple thinking strategies in his professional reasoning approach to diagnosing a client's signs and symptoms, born from a 'hypothetico-deductive model' (Loftus and Smith, 2008: 206) and Schön's (1983) reflective practitioner. The researcher's 'lifeworld' (Ashworth, 2003) in healthcare has two different aspects. The first is an empirico-analytic paradigm where the assessment of physical problems is derived from direct observational knowledge and measurements. The second derives knowledge from narrative reasoning and understanding the patient's unique perspectives of their lived experience and the reality of their problems through their story. This involves a complex mix of cognitions, attitudes, behaviours and actions that results from interactions within and outside of the clinical environment. The researcher uses both these approaches together to gain a holistic picture as they are contextually bound by focussing on how something appears in a certain environment, for example in this instance a client's wellbeing relates to the physical, emotional and social experiences of their condition. Some authors (Dahlberg et al., 2009: 265; Galvin and Todres, 2011: 1) even refer to a healthcare approach that is 'lifeworld led'. Gaining the holistic picture involves gathering a large amount of confusing data and experiences (Atkinson, 2005) so the hypothetico-deductive model employs both deductive and inductive reasoning approaches to make sense of the information presented. Reflection and metacognition are used to guard against errors in hypothesis generation and testing.

3.1.2 The Researcher's Stance

As previously mentioned, the researcher's professional background relates to both quantitative and qualitative views regarding the people, objects and phenomena within his background. Physical data and observations such as physical dimensions, quantity and frequency are seen as lending themselves to more scientifically based inquiry and analysis. Consequently, predictions or generalisations may be proffered and these may facilitate construction of factual and verifiable statements such that rules or principles might be abstracted from them. However, there are also things to be described when measurement is problematic and may be discovered through alternative means such as experiences, perceptions and interaction. These reflect the different ways in which people experience, engage with, interpret and react with the professional world inhabitants, objects, phenomena and processes around them. Their subsequent cognitions and inferences on the natural and social world evidence are reflected in the choices made and the messiness inherent in 'real life'. Qualitative methods are more appropriate for revealing information from experience and social engagement, or whether there is a particular sequence of actions in internationalisation. However, it must be recognised that in using qualitative methods it is possible only to generate tentative hypotheses, not draw generalisable conclusions from any patterns uncovered.

Due to the researcher's background (in 3.1.1), he considers that no single inquiry approach has the capacity to reveal all the answers. Both quantitative and qualitative approaches have utility as complementary modes of data collection and interpretation as they facilitate the assembly of different perspectives, whether contradictory or complementary, and provide a more complete picture of an issue.

The study uses a variety of methods in an interpretive approach, including some quantitative and qualitative analysis, to assemble a picture of staff views and conceptions that is described as fully as possible. There are some authors such as Denzin et al. (2006: 774) who are scathing of a 'mixed-methods approach' and accuse it of 'ignoring ontological, epistemological and axiomatic differences' and 'ways of knowing'. They view it as an attempt to apply quasi-scientific principles to data whose characteristics are unsuited and they suggest that it gives only 'simulacra of the truth' (Denzin, 2009: 46) that appear to have the right characteristics but essentially do not. The researcher considers that the current study's approach has the capacity to explore and present different, yet complementary, ways of knowing. The intention of using different methods is to add breadth and depth by better illustrating the dimensions of an issue and outlining its boundaries than possible when taking a single approach. Some quantitative principles allow initial numeric description of the data to give a

frame of reference of the issues under study by weighing, as Barbour (1999: 40) suggests, 'the prominence attached to a particular perspective'. Contrary to Denzin et al.'s (2006) assertions, the aim in this instance is not to achieve statistical significance or use quantitative data to verify qualitative data, but to supply a complementary way of knowing. The use of qualitative methods is intended to capture and reveal the thoughts, rationale and reasoning that underpin the issues, actions and behaviours around internationalisation. By continually comparing and contrasting the data from each respondent, patterns and commonalities in the results are uncovered and the present understanding and explanation for the beliefs, attitudes, behaviours and actions observed within that particular population can be presented in a way that offers a contribution to coherent truth (Bridges, 1999). As long as the research interpretations are presented in a way that acknowledges the above-mentioned dimensions, limitations and applications, they may address Denzin et al.'s (2006) concerns.

Interpretations are socially constructed by the individual, or through mutuality when interacting with others, and may be applied and framed in different ways according to the context, setting, time or assigned importance. The researcher considers this as situated knowledge and an approximation of the truth at that time, with reality being the structure that is constructed around respondents' interpretations of the milieu of actions, lifestyle choices and activities. Comparing several sets of data may hint at an underlying thread of truth at the core of respondents' experience. Thus interview responses present, as far as they allow, a consistent and coherent picture of beliefs through:

- taking codes from the data to crystallise the experiences more clearly;
- providing a chain of analysis to allow readers to derive their own interpretations;
- checking data analysis for accuracy through respondent validation;
- identifying quotes as having meaning/significance through consensus by being mentioned other respondents; and
- having meaning for the researcher as conclusions are inferred, and patterns of events abstracted, from the data through a consistent reasoning approach.

While there may be some justification for coherence, it is doubtful whether Bridges' (1999: 607) 'warranted truth' (the exercise of judgement about truth dependent on its ability to stand up to critical scrutiny and checks against 'internal consistency and external evidence') can be achieved due to the lack of testing against external evidence

or re-testing. A further discussion of the mixed methods chosen can be seen in section 3.1.4.

3.1.3 Method Selection in the Interpretive Paradigm

Considering the aims of this study on internationalisation, there were many approaches within the interpretive research paradigm that could be employed – symbolic interactionism, phenomenology and hermeneutics (Crotty, 1998: 71), grounded theory or phenomenography. While aspects such as the meanings of actions, the characteristics of language or culture could be the subject of investigation, the current study sought to explore the direct and indirect experiences of internationalisation, its concepts and implications for how it was enacted. For the researcher a phenomenological philosophical view was familiar as it formed an indirect part of professional practice, so adopting a phenomenological methodology was felt to be appropriate for the purposes of this study.

Phenomenology explores how people approach, interact and react with the world around them through direct or indirect experience, and the way they get closer to the world (van Manen, 1997). Moustakas (1994: 59) uses the term of intentionality as part of this. It is a reference to how people make a conscious representation of their experiences or represent them subconsciously through their reactions to their surroundings and environment. The latter implies that the person may not be aware until they either discover it or have it pointed out to them. A further complexity is that norms, practice and beliefs are constantly being refined and adapted as a result of experience, empirical evidence and layers of meaning imparted by different people and groups, at different levels of the process. A phenomenological inquiry therefore means to 'understand the meaning of events and its processes through description of participants' lived experiences' (Tesch, 1990: 68) and discovering how environment, culture and processes impact on the development of the meaning, both individually (constructivism) and collectively (constructionism). Any commonalities may indicate the underlying essence of the experience and to achieve this requires objectivity. In this context, objectivity means orienting oneself to the object of inquiry (van Manen, 1997: 20) by showing, describing and interpreting. This mimics the humanistic values healthcare professionals hold, commensurate with being professionals, and how they approach and reflect on their experiences (Finlay, 1999).

Adopting a phenomenological approach for the current study presented challenges. Historically, the focus of inquiry within phenomenology has differed depending on the author's philosophy and theory. Husserl's concept of transcendental phenomenology

focussed on 'self' and believes that the enaction of consciousness is demonstrable through description. As a consequence it implies that interpretation lies outside its scope. In contrast, the approach adopted by existential phenomenology proposes that the 'nature of being' should form the focus of study and consciousness is considered as 'only one aspect of an encompassing structure of existence' (Gorman, 1977: 144). This view is less limiting. It implies that the fundamental essences of the nature of being and how sense is made of actions (subconsciously and consciously) could be revealed through reflection, analysis and description. Social phenomenologists broaden the focus by considering that it should be on the ways people sense and interpret their experiences of social phenomena within themselves and around them. Yet despite alternative foci, the commonalities between all groups are the beliefs in the 'primacy of immediate experience', that 'valid knowledge must be subjectively verified' and 'reveal essential structures of reality' (Gorman, 1977: 145). For the researcher, the challenges revolve around the absence of a standard approach and that methods are adjusted according to the situation, with few explanations given about how the research principles are applied. It is not simply the philosophical justification of its legitimacy as a social science research method, but deciding how these principles are applied to actual research practice.

The lived experience is taken as how a person exists and operates within the environments or contexts they inhabit, and takes account of sociological, contextual and structural factors. The intention of the current study was to look at the experience of putting internationalisation into practice, from the perspective of people who are operationalising it, and the background of HE and healthcare that supplies those sociological and contextual factors through an organisational development lens. The researcher chose a more sociological based, empirical phenomenological approach based on the views of Alfred Schutz (1976). This was considered appropriate because a case study is 'not a name for a standard methodological package'; it 'uses a variety of techniques that are sociological in nature' (Adelman et al., 1984: 98) and the empirical phenomenology approach is similar to the researcher's professional background (see 3.1.1). This meant being open to all the dimensions of the situation under study to gain a holistic view of internationalisation in the Faculty by making connections with respondents' everyday reality in a similar manner to gain a holistic view of the researcher's clients.

The breadth of the branches of phenomenology, and their flexibility, have led to imprecision in how phenomenology is conceived, yet empirical phenomenology retains the uniqueness of the person and the meaning of experience at the heart of the phenomenological approach. Illustrating the complexity of a socially constructed and

sustained experience cannot be studied by empirical methods alone and Sixsmith and Sixsmith (1987: 313) argue that 'phenomenological and empirical approaches are not antithetical'. Sixsmith and Sixsmith (1987: 314) adopt Sardello's (1978) view that empirical means adopting a 'way of looking' and, as Fischer (1978, cited in Tesch, 1990: 34) describes, being open to all a phenomenon's dimensions. Empirical phenomenology provides a systematic framework for focussing an enquiry and structuring the experiential analysis to avoid more 'open ended methods that end up with vast amounts of unstructured data, some of which is irrelevant or ambiguous' (Sixsmith and Sixsmith, 1987: 316). As well as providing a meaning structure, because respondents present the phenomenon as a set of interrelated concepts there may also be some potential for using responses to provide some degree of explanation.

While the intention of the study is to view responses non-judgementally, understanding a participant's lifeworld experiences as they were lived raises some issues. The first consideration is that, although an overview of the potential emerging issues can be gleaned from existing research literature, the researcher could not predict what other issues might emerge or how individuals abstracted and expressed their version of the experiences. So Aspers (2009: 5), in his 'seven steps of empirical phenomenology', suggests conducting a 'preliminary study' to get to grips with the field. Research participants were also deemed to be 'agents who interpret their experiences and who actively create an order to their existence' (Denscombe, 2007: 78). However, the researcher's relationship with them will have potentially influenced responses through invoking a Hawthorne or Pygmalion effect (Borg and Gall, 1983). It brought into question whether evidence given by participants reflected their own 'being', or 'self', or was a facsimile due to the nature of the study and what they perceived the researcher wanted to know.

Secondly, it was considered that different groups of people may construct the world in which they live and work in different ways. People's interpretation of their world may have been altered if new information and conceptions arose, either directly or indirectly, from within or external to that individual's experiences. The resultant values, attributes and behaviour patterns could have been created not only by the individual but sanctioned socially and professionally by groups. What this situation generated was the capacity and potential for multiple realities, so it could not be assumed that there was only one 'right' reality. However, there may have been a shared experience common to all with a mutually understood meaning at its core. This represents what phenomenologists term 'essence'.

The final challenge was the researcher's own interpretations, as part of the Faculty, and how these interpretations were put aside so as to view the experiences from others' eyes. To do this the researcher first had to become aware of their influence and then hold this in suspension, termed 'bracketing off' (Moustakas, 1994). The researcher used a continual sequence of open, non-judgemental examination and, having tried to set aside personal influences, could understand people's different frames of reference, perspectives, and positions. This enabled the researcher to gain a structural description of the experience, the participants' intentionality and to synthesise the essences of meaning from them. However, Gorman (1977) comments that obtaining an objective view of subjective information, experiences and meaning, referred to as a 'dual vision', may not be entirely possible. Bracketing assumes the researcher will retain an impartial view of the data, but it could be argued that interpretations are inevitably rooted in the researcher's own background.

In the current study the questionnaire and the interviews complement each other because the questionnaire stage was a preliminary stage to scan the field for the breadth of issues to be used as 'frame of reference' (Aspers, 2004: 10), to guide the dialogue and design of the semi-structured interviews. This explains why the interview questions were framed in the way they were, however the actual heart of the study was the interview stage to capture respondents' experiences.

Ashworth (2003: 146) suggests a phenomenological approach is the 'interrogation of the phenomenon in its appearing which allows us to recognise, maybe for the first time, to verbalise, the taken for granted'. The framing of the core questions encompassed this and gained what Finlay (2009:9) refers to when discussing Giorgi's (2008) work on phenomenology as 'an explication of the phenomenon as a whole'. While the core questions only partially captured the other features of identity, agency, feelings, temporality and spatiality, relationships, activities and the discourse they employ to describe their situation, the prompt questions provided more focus on the lifeworld or data narrative. The analytic process retained the foundations of intentionality, reduction and epoché, as suggested by Giorgi (1989), and results provided a reflective, contextual and practical focus on the identity, relationships, activities, agency, experience of operationalising internationalisation, and the 'in-vivo' coding reflected the discourse the discipline employed so that it could be translated into meaning and a shared essence.

A phenomenological approach was appropriate for this small-scale design as it allowed sufficient flexibility to adjust focus on issues as they arose in such complex, real life situations. The emergent data thus represented combinations of articulated facts,

situated knowledge and some individual interpretation and the research study was designed to address concerns about trustworthiness and rigour (section 3.3.1).

The researcher will use description of the different perspectives held to give context to the essences and highlight the meanings and significance in a particular context. Although Van Manen (1997) asserts these are not generalisations, and could not be used to solve problems, the responses provide an informed basis for further decision making and led to the development of more suitable and effective interventions or adaptation of practices and actions. Responses may also reflect both the appetite for enacting internationalisation within the Faculty and the influence exerted on the process, therefore the views should be taken seriously.

3.1.4 Methods Available within an Interpretive Approach and Purpose of the Study

Qualitative data may be applied and framed in different ways according to context, setting, time, importance assigned to it and whether data are constructed through individual or group consensus. By comparing and contrasting this data from different standpoints and using quantitative data, a more comprehensive explanation of participant responses could be constructed by the researcher. Within the interpretive approach a variety of methods are available including questionnaires, focus groups and interviews. Hicks (2004) comments that questionnaires are economical for surveying large numbers but that other techniques, such as focus groups or interviews, gain more depth of information. Each has advantages and disadvantages.

In questionnaires the questions may be posed in different styles. Likert-style questions may be used to provide a numeric and verbal description of the dimensions of a single aspect of information. In contrast, open questions allow participants to expand on a single aspect of information through asking about their views, perceptions and experiences. What this did was to supply a broad-brush context of attitudes and degree of feeling. The limitations were that questionnaires tended to gain more superficial information about a person's thoughts at that moment in time, and proved insufficient to explain how that person thought.

Focus groups generate discussion between a number of participants to reveal both understanding of the issues and complexity of those issues (Flick, 2002). They are highly efficient at collecting high quality data (Patton, 1990), but some participants may be reticent about contributing via this format or not engage at all. It was thought that using individual interviews also gained a depth of information and allowed the

individual to express what they wished without the influence of others. In addition, interviews provided the opportunity to probe participant views for further explanation about their thinking. The disadvantage was that interviews were time consuming.

Phenomenological studies are not experimental studies, therefore questionnaires do not traditionally form part of a phenomenological study. Van Manen (1997) suggests that no indication of the extent of a phenomenon or its quantification is possible, but in this study the questionnaire was justifiable as its purpose was as a 'frame of reference' (Aspers, 2004: 10) of contextual issues surrounding internationalisation. This meant that no reply was unsatisfactory and the intention was to establish a basis of information for probing in depth at an interview, using themes deemed significant for being areas of similarity or strong differences. Considering the different styles of interview approach available, semi-structured was felt appropriate as this gave a consistent basic set of questions yet had the capacity for adaptation or probing/prompting for further information. It was felt this allowed more scope for expanded responses (Oppenheim, 1992) than the rigid direction of a structured approach or the spontaneously generated questions of an unstructured approach that may not fully capture key ideas from a range of perspectives.

3.2 Implications for the Research Design

3.2.1 The Nature of the Case Study

Nisbett and Watt's (1984: 74) short definition of a case study is a 'systematic investigation of a specific instance'. Cohen et al. (2000: 181) further expand on this and consider it as exploring 'the complex dynamic and unfolding interactions or events, human relationships and other factors in a unique instance'. Case studies are therefore appropriate for exploring how the context of a situation may have a high degree of impact on how ideas and theories are enacted by people from a well-defined population in a real situation. Irrespective of whether the case is about an individual, a body of people or an organisation, it is essential to set well-defined boundaries to capture sufficiently the 'uniqueness' that characterises the case. It 'gains credibility by thoroughly triangulating descriptions and interpretations, not just in a single step but continuously throughout the period of study' (Stake, 2005: 443).

Case studies offer several strengths (Nisbett and Watt, 1984) because they can be understood by a wider number of readers, beyond those in the research community, and may help guide the 'intelligent interpretation for other similar cases'. The

flexibility of cases also allows accommodation of changes of course, by unanticipated new information and their effects, as there is no pressure on the researcher to impose controls (Denscombe, 2007). Results from cases supply context and illustrate how results can be applied to actual practice. Because case studies possess a diverse range of participants with different characteristics, as Denscombe suggests (2007) they are able to deal with subtleties and intricacies of complex social situations. Because of this it is argued that case studies have a greater relevance, or external validity. Cohen et al. (2000) further suggest that cases can have the potential to suggest cause and effect. This may be true up to a point, but there are drawbacks. While there is less interference in the decision-making processes and cases may generate new hypotheses for further study, the scale of the study and specificity of context and temporal nature of data raise doubts on whether actual causal inferences can be made. In addition, because of the single or small number of instances contained within case studies, results are not easily generalisable unless the comparison is with similar cases (Nisbett and Watt, 1984). There is also a susceptibility to selection and measurement bias and the 'observer effect' (Denscombe, 2007) due to being less amenable to the checks associated with much larger studies.

The study took advantage of the strengths described above. It viewed the Faculty as the case study and is unique because it is a single system within the University. The Faculty unit is a mix of a large number of staff performing a variety of roles (academic, research, managerial and administrative) from different professional groupings, hence its constitution is diverse and its culture even more so. Culture can be considered a 'collective programming of the mind' (Hofstede, 1994: 4) and it distinguishes one group of people from another, and influences how they approach life events. The different professional groups each have their own communities of practice, frames of understanding, ways of thinking and mores which are 'powerful forces in the articulation, maintenance and reproduction of the perspectives, values and beliefs embedded in their cultures' (Dahlgren and Dahlgren, 2002: 125). Because of its diverse participants and complexity the Faculty provides a rich source of data about 'real people in real situations' (Cohen et al., 2000: 181). It is natural to assume that the Faculty culture is a blend of the background cultures from: the different healthcare professional groups that constitute it (Healthcare Scientists, Nursing, Midwifery, Occupational Therapy, Physiotherapy, and Podiatry); the University's own academic, research and social culture; and the individual's own culture. The milieu of interactions between staff members and their engagement with information in verbal and text formats made any influences on the socialisation and functioning of the Faculty and its business all the more intricate.

Fundamentally, the case study design was chosen in terms of the phenomenon to be examined and because it was instrumental (Stake, 2005) in providing insight into internationalisation and had the capacity to be explanatory (Yin, 1984). It investigated and clarified the frames of meaning staff create around their relationships with the outside world the implications for instituting and enacting internationalisation and the applicability of Deardorff's (2006) model. The boundaries of the case study are that it is only representative of an academic healthcare staff group and it was envisaged that the results also contain elements of professional community agreement and individualised interpretations.

The case study is viewed through an organisational development lens, so relates to the theory of change and also organisational learning (Argyris and Schön, 1978). Lewin's (1951) change model (unfreezing, moving and refreezing) has foundations in gestalt theory, and provides a simple way of viewing planned change. Establishing a rationale for change (unfreezing) allows change, or moving, to commence then change is embedded, consolidated and evaluated in the refreezing stage, but the process can be affected by individual and relational mechanisms (Schein, 1994) and changes in behaviours, attitudes and values. The study reflects the 'reality experienced by those undertaking change' (Grieves, 2010: 91) by exploring how respondents understand the change rationale, through their conceptions of internationalisation, and how the 'moving' stage is 'shaped by people's interpretations and actions' (Boddy, 2000: 284), through the constituents and process of internationalisation.

Organisations are complex systems (Argyris, 1964) and Romanelli and Tushman (1994: 1141) refer to 'organisations undergoing punctuated equilibrium where the organisation passes through phases of relative stability and uncertainty'. It is uncertainty that causes strategic direction to be reviewed and Senge et al. (1999: 32) outline five essential practices to enable organisations to learn: 'personal mastery', 'mental models', 'shared vision', 'team learning' and 'systems thinking', based on both individual and organisational knowledge. Tsoukas and Vladimirou (2004: 368) define knowledge as 'the individual ability to draw distinctions within a collective domain of action, based on an appreciation of context or theory, or both'. The context allows the individual the 'capacity to exercise judgement' (Tsoukas and Vladimirou, 2004: 369), and when these actions and behaviours recur or become a collective understanding they form organisational knowledge.

Argyris and Schon's (1978) model of organisational learning proposes that individuals use a mental map to guides their actions. These 'maps' are thought to represent individuals' accumulated experience and knowledge. It was assumed that the 'maps'

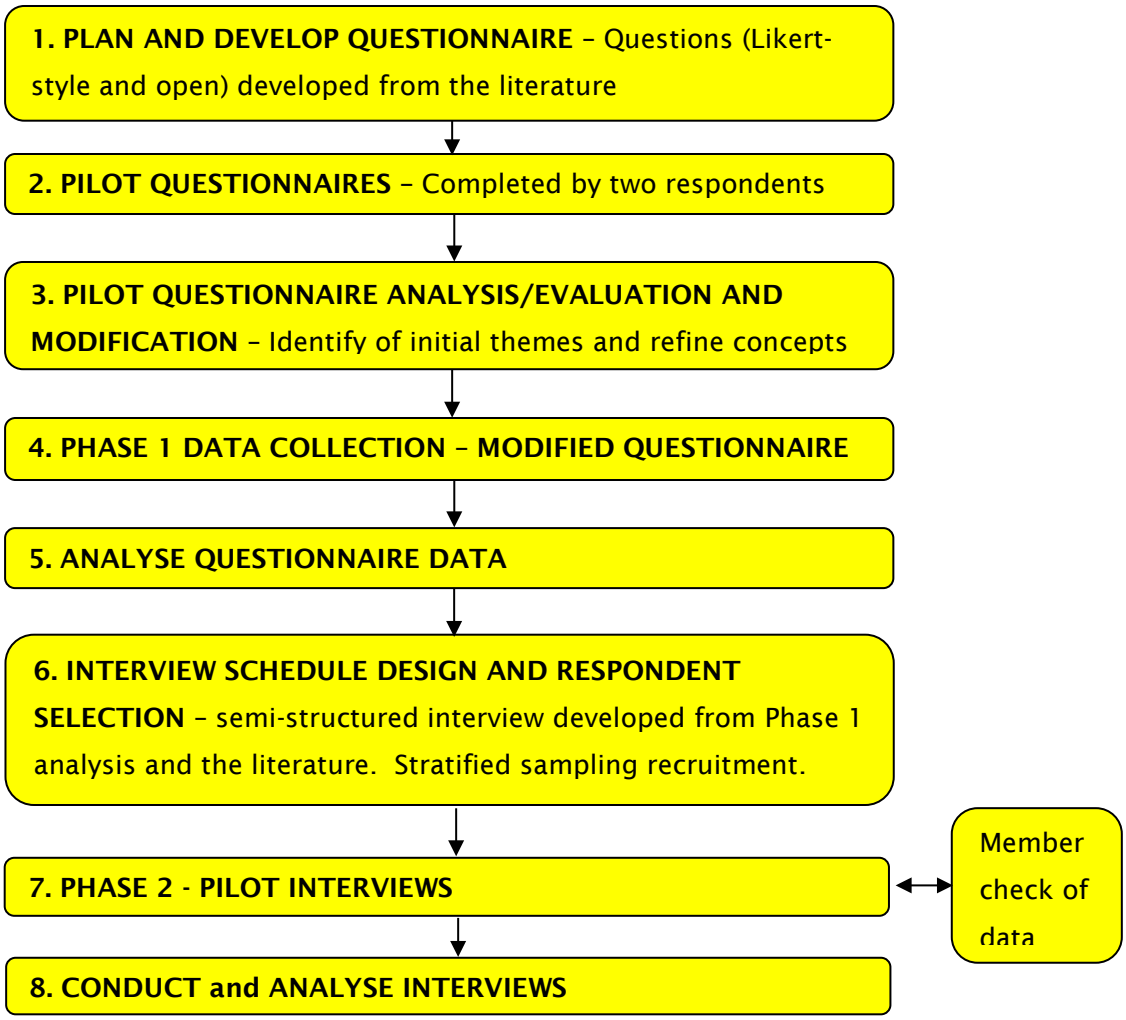
can be used both to indicate problem areas in the organisation and to offer ideas for potential solutions. Organisational transformation may then be achieved through using people's knowledge maps as guides for resolving difficulties and restructuring organisational norms. Vera et al. (2011: 168) suggest that it is not just the capacity and capability to use the knowledge but the way that knowledge is managed. Vera et al.'s (2011: 174) conclusions point out that 'learning and accumulation of knowledge only leads to better performance when they support and align with the firm's strategy'. The current study seeks to connect the individual to the organisation by paying attention to the internationalisation activities, changes and contexts that are happening (Pettigrew et al., 2002) and consider the perceived change needs on different levels. The study explores respondents' accumulated experience, knowledge, sociological and contextual factors and structural factors (Grieves, 2010) and amalgamates this into concept maps to illustrate the breadth of internationalisation issues and the links between them. Comparing respondent interview data may reveal some of the detail of how internationalisation may be put in practice and the issues that influence the process and the people who are enacting it.

3.2.2 Study Plan and Data Collection

A flow chart summary of the study is illustrated in Figure 3.1, overleaf.

In Phase 1 (Figure 3.1, steps 1-5), a pilot questionnaire (n=2) was administered to identify any problems with wording and whether questions solicited sufficient detail. The pilot analysis of the questionnaire and feedback from pilot respondents showed that no modification of the questionnaire was necessary. The questionnaire (Appendix 2) was sent to all Faculty academic and research staff (n=180) to complete Phase 1. The data analysis was used to design a semi-structured interview schedule for Phase 2.

Figure 3.1 Summary of Internationalisation Study Plan



Phase 2 (Figure 3.1 steps 6–9) involved an initial pilot (n=1) to check on interview technique. A consent form was signed before commencement of the interviews (Appendix 5). The pilot participant was asked to comment on the interview to ascertain the appropriateness of the semi-structured schedule, the sequencing of questions and whether it elicited the required information. This contributed to content validity and the interviews were adjusted according to the feedback. A preamble script was used for each interview to explain the interview procedure (Appendix 3). After the pilot there were minor changes to some of the wording in the interview. The interview schedule (Appendix 4) was subsequently administered to selected staff (n=8) to complete Phase 2 data collection. These were transcribed verbatim onto a computer using a Phillips 725 dictation system.

Eight interviews were chosen because Guest et al. (2006) suggest that data saturation can be achieved with between six and twelve interviews. A quiet, comfortable room was chosen, trying not to interfere with University business and to be at the participant's convenience, so the experience would be perceived as non-threatening and would put the interviewee at ease. A Phillips Voice Tracer 283 audio recorder and conference microphone were used to record the interviews. A verbal explanation of the study, format of interview and the transcription and storage procedure was given and interviewees were then asked to sign the consent form prior to the interview. Any significant response patterns were noted. Bogdan and Taylor (1975) suggest follow-up interviews after transcription, but it was decided to use Lincoln and Guba's (1985: 314) alternative suggestion of 'member checks'. This involved feeding back to each respondent the preliminary analysis of the interview to ascertain the reliability and develop the emerging themes (and to establish the credibility of the interpretations).

3.2.3 Questionnaire Design

There have been previous questionnaires covering internationalisation from an institutional perspective (International Association of Universities, 2005), metrics for internationality and internationalisation (Brandenburg and Federkeil, 2007) or audits (Stella and Liston, 2008). These have concentrated on a top to bottom perspective so that they can be used at institutional, programme or individual levels. The main aim of this study was to investigate the issues around staff conceptions of internationalisation and the implications for its delivery in higher education, so it adopted an individual's perspective. Questions for the questionnaire were derived from and refined by reading the literature. The intention was to explore staff views of some of the implications of internationalisation in HE and its delivery from a healthcare perspective through the category sequence of input, activities, output and outcomes, a described by Deardorff (2006). Each question of the questionnaire asked about people's attitudes to each of the components identified in the definitions (2.2.2), needs (2.3.1) and outcomes (2.3.5) sections of the literature review. These included collaborations across borders, mutual exchange of ideas, mobility, intercultural and international dimensions, employability skills and the difference between internationalised and international. The questionnaire (see Appendix 2) had four sections (A–D).

Section A of the questionnaire provided demographic information to demonstrate that the study spanned a spectrum of age and professional background and to highlight differences, or commonalities, in Phase 1. It also helped to inform the stratified selection procedure for Phase 2.

Section B was intended to frame how individuals perceived their own and the University's relationship with healthcare issues, the constituents of internationalisation and global practices in terms of needs (2.3.1) and outcomes (2.3.5). A Likert style of questioning was adopted to allow expression of the spread of responses and depth to which individuals felt the constituents of internationalisation related to their personal outcomes, responsibility for achieving them and their incorporation within the business of the programmes, research and the Faculty. This established a frame of reference regarding individual needs and collective Faculty needs and the input and outcome focus in terms of international versus national. Differences or commonalities in views and practice were used to develop the interviews to explore issues further.

Section C related to how internationalisation was conceived. A Likert scale was used to explore verbally how participants aligned themselves with the elements of internationalisation included in section 2.2.2, 2.3.1 and 2.3.5. Some elements and dimensions were purposefully broad, for example 'international' or 'intercultural', whereas others were more specific and contained detail related to the constituents and delivery aspects of internationalisation. It was felt that using the separate components in the questionnaire was more helpful than stating the entire definition. Accuracy was important and statements were sharpened to capture subtleties in wording. For example, distinguishing between 'understanding about different cultures' and 'being able to work with different cultures', or between 'international exchange of ideas' and 'participating in international events and conferences' which, to some, might mean the same thing. In addition, concepts might be thought of differently so, rather than 'international', which could be interpreted as people from different nationalities who reside in the same country, the researcher widened it by using 'diverse or from many countries'. Questions initially related to the broad terms then became narrower to probe about individual components. The intention was to explore how individuals viewed the importance of each of these components, to indicate a baseline level of their engagement and guide how an outcome could be agreed and defined. These were meant to generate themes that were important to question and Section D gave space to elaborate more fully.

Section D contained a series of open questions focussing on the HE experience. Questions asked, in broad terms, about policies or practice issues that could impact on the internationalisation process, the activities, resources and ensuing implications for operationalisation and delivery within educational programmes, and provide an indication of what should be valued. This encompassed input, activities, output and perceived constraints. An opportunity for participants was provided to add anything they wished about study, work and life associated with being at university, otherwise

interpreted as the 'HE experience'. This was intended to gain an idea of the extent of feeling for what, and whether, they should be incorporated within the business of the programmes, research and the Faculty and be explored further in the interviews. Open questions scanned, in broad terms, the skills and knowledge required for the internationalisation process and how to work in changing global and HE circumstances. Questions were worded in a way that was not leading and the researcher had no preconceived expectations from the questionnaire. The intention was to gain only a superficial baseline scan of issues around internationalisation. The issues around internationalisation and globalisation were depicted by two concept maps to achieve an overview. This facilitated categorisation into underpinning motivations and relationship with internationalisation, the constituents of internationalisation definitions, associated activities, the supportive infrastructure and policies that influenced it.

3.2.4 Interview Design

Issues emerging from the questionnaire were presented as a concept map and the lowest common integers derived from the questionnaire data and a range of topics from reading the literature were used as a frame of reference to construct the semi-structured interview schedule (Appendix 4). Eight interview questions were constructed to answer the study research questions of 'What are the staff members' conceptions of internationalisation within the Faculty of Health Sciences?', 'How do staff conceive the constituents of internationalisation?' and 'What are the implications for delivery of the internationalisation process within the Faculty of Health Sciences?'. Prompt question topics to supplement each of the following interview questions were derived from areas identified in questionnaire.

- Question 1 related to understanding of meaning of internationalisation, because of the contested understanding of internationalisation in the literature and what it meant to respondent's practices.
- Question 2 related to Deardorff's (2006; also see section 2.3) activities stage, the different aspects of university business contained in Knight's (1993) definition and respondents' experiences of activities. Specific aspects were addressed by prompts.
- Question 3 related to issues influencing respondents' experiences of implementing internationalisation such as Leask's (2013a) 'blockers and enablers' and the implications of external (supranational, national and professional) and internal (institution) policy drivers and tensions (section 2.3).

- Question 4 arose from respondents' conceptions of the constituents of internationalisation and how they contributed to an institutional profile.
- Question 5 and 6 related what was felt should be the intended outcomes (a Deardorff, 2006, process stage), at different levels of individual and institution to be compared with those found in the literature.
- Question 7 was about the experience of evaluating internationalisation.
- Question 8 related to the Deardorff process (2006) and how the sequence was experienced.

It could be argued that because issues were already known from the questionnaire and literature this predetermined the interview topics and biased how they might be analysed. However, it was the researcher's opinion that issues emerging from the questionnaire should be used for formulating probing questions for the interview, rather than forming the main questions. It also gave perspective and context to the analyses rather than predetermining the coding and themes.

The design of the interview was intended to be minimally directive to seek opinions and allow participants some flexibility to describe their thoughts about internationalisation and its consequences but avoid judgements. Grbich (1999) and Hicks (1995) suggest that, in this way, much more information can be obtained to identify and access key issues. Prompts and issues for probing were included to help the researcher to keep track of ideas, for clarification, elaboration or establishing meanings or reasons (Holloway and Wheeler, 1996). Prompts helped with rephrasing questions if interviewees showed signs of a lack of understanding. As Bogdan and Taylor (1975) suggest, any notes, observations and impressions were recorded on the interview schedule to 'make note of emerging themes, subjective feelings and your own behaviour'.

3.2.5 Sampling

In Phase 1 of the study the questionnaire survey was distributed to the whole population of teaching and research staff (180 in total) in the Faculty. Administration and ancillary staff were not included as they are not directly involved in formulating and instituting Faculty internationalisation strategy. A standard recruitment letter (Appendix 8) and information sheet (Appendix 6) were sent, informing them of the aims, design of the study and inviting their participation in both phases of the study, along with a questionnaire and a response sheet for participation in Phase 2. Return of the questionnaire was taken as consent to participate in this part of the study. The

demographic information would show if responses were sourced from across the professional groups, genders and a broad range of age bands. A response rate of about 50 per cent was expected. Although distributing the questionnaire to all teaching and research staff in the Faculty minimised the effect of selective inclusion and exclusion criteria, the researcher considers the 42 per cent response rate achieved to be low and represents a limitation to the study's Phase 1. The level of what is acceptable is contested in the literature. Baruch's (1999) suggested average level of 55.6 per cent with one standard deviation of 19.7 in academic studies is deemed acceptable to confer some validity. The rate of the current study was within one standard deviation of Baruch's (1999) average, yet despite exceeding this lower threshold the low response rate would not permit a reflection of the range of views held by those in the Faculty. Equally, the small numbers from each professional group cannot reflect the view for each professional group.

The response sheet at the end of the questionnaire invited participants to supply contact details to the researcher if they wished to participate in the interview part of the study. These were detached and collated for Phase 2. Sampling for the interview stages in Phase 2 was through a stratified procedure (Patton, 1987) using the professional groupings within the Faculty. A stratification process was used to select eight interviews from those who volunteered to participate, comprising a range of professional groups and genders. As two regulatory bodies, the Health Professions Council and Nursing and Midwifery Council, covered most of the staff within the Faculty it was decided to use as the main criterion for grouping the response to Phase 2 as Allied Health Professionals (AHP's – Occupational Therapy, Physiotherapy and Podiatry) and those from Nursing and Midwifery. The numbers were 18 AHPs and 13 Nurses/Midwives. Each group included both males and females, but there was unequal representation by each of the professional subgroups and no other stratification criterion was used. Questionnaire respondents who wished to participate in Phase 2 were listed in order of their questionnaire number in each of the AHP and Nursing/Midwifery groups so that the researcher was unaware of the names of the respondents being selected. Selection proceeded based on number sequence 2, 4, 2, 4. This meant that the 2nd then 6th, then 8th, then 12th were selected in each group. The group selected was then checked to ensure it contained at least one member of each gender and each professional subgroup, to capture diversity within the sample. This also avoided the possible identification of participants associated with particular professions.

3.2.6 Data Analysis and Synthesis

For the Phase 1 questionnaires, descriptive statistics were used for both the demographic data and Likert-style questions. For the Phase 1 open questions thematic analysis was used. Themes, and their interdependencies, are depicted in the form of a concept map (Figure 4.5).

There are a number of different phenomenological ways to analyse Phase 2 interviews. All follow similar analysis formats. The differences are the steps and how data are organised. The researcher favoured the seven steps below, similar to those used by empirical phenomenologists in the Duquesne studies (Giorgi et. al., 1971) described by Colaizzi (1978):

1) Transcripts reviewed to obtain a sense of understanding and gain ideas;
2) Line by line analysis and extraction of statements deemed significant with reference to the research questions;
3) Formulation of units of meanings from what the person wanted to convey;
4) Amalgamation and clustering into broad themes through repetition of meaning units. This was developed through a process of hierarchical arrangement of comments contained in these broad superordinate themes, subthemes and categories were determined which outlined the structure of the phenomenon. The arrangement of hierarchies ceased when no further subthemes could be identified;
5) Exhaustive description of themes; and
6) Reduce to a statement identifying the structure of the phenomenon.

The use of analytical software was rejected because the low numbers of interviews meant the organisation of themes was manageable. After transcription, each transcript was reviewed individually and, during analysis, memos used as a mechanism for keeping track of the common ideas and interconnections, and a reference for insights or hunches (Grbich, 1999).

Coding of the interviews, that is, 'tags for assigning units of meaning' (Miles and Huberman, 1994: 56), presented some difficulties during analysis. Coding frames for steps 1-4 of the analysis described above could have been predetermined, dependent on the aim and sub-questions within the research protocol, but the researcher felt that because the experiences of the participants were fundamental to the study it was important to be open to what emerged from the interviews. Initially, descriptive coding was used, choosing words to describe the issues seen, but this proved unsatisfactory.

One problem with this coding process was that in selecting words it was possible that the researcher drew on his own experiences and professional knowledge unless care was taken to minimise it. Changing to an in-vivo coding process (drawing upon words from the transcripts themselves) was found to help crystallise the issues much better. There was also potential that the subsequent process of data reduction, expansion and re-reduction, could open the analysis to an imposition of the researcher's own views and biases.

Saldana (2013: 91) suggests that this might also be termed 'literal coding' or 'verbatim coding'. The in-vivo coding process 'refers to a word or short phrase from the actual language found in the qualitative data record' (Saldana, 2013: 91), so focus was placed on the respondent's voice and retaining the literal meaning of the responses expressed. In-vivo codes were utilised for both cycles of analysis. Because of their literal nature and application, the codes were carefully reviewed to ensure a consistency when categorising into key clusters. Where possible the in-vivo wording was retained for key cluster and theme titles. Table 4.2 shows the key categories, themes and their occurrences in the eight interviews and Appendices 10 and 11 explain the development of the hierarchical arrangement of codes, key categories, themes and superordinate themes.

As the process involved extracting significant statements, formulating meanings, clustering of themes, exhaustive description, and then reduction to a statement which identified the structure of the phenomenon there was potential for adjustments to enter at each stage. It was recognised that the statements extracted could have reflected only those that the researcher thought were significant, hence his own agenda, in explicating the essence of what was happening.

For each transcript, significant statements were extracted to allow the topics, or ideas, the statement contained to be presented in their entirety along with the researcher's questions to provide a contextual point of reference for the response. On reading the data the meaning of the experience appeared to be transmitted on two levels. The first level of analysis gave an inventory and description of the constituents of the concept of internationalisation and what was contained in the stages of the internationalisation process. The second level supplied the context for the level one description by outlining the issues or views about how constituents were perceived. The two cycles of analysis used the following process. The first cycle of analysis was content-focussed, where statements were broken down to give an inventory of their constituent parts. The second cycle focussed on context to illustrate the circumstances and frames of meaning that participants used within their sphere of life and work. Significant

statements were represented by paragraphs that linked subject topics or ideas together, sentences or part sentences where focus was on a single topic or idea (unit of meaning). For each analytic cycle the topics and ideas were then clustered to form preliminary categories, and labelled through an in-vivo coding process (Saldana, 2013: 91) or the first segment of data that could be described as explicit. In-vivo codes are those that use phrases or words from the actual language of the qualitative data, and are synonymous with labels such as literal, verbatim and inductive coding that might be used in other methods (Saldana, 2013: 91). Initial themes and meaning units were returned to participants for review with an accompanying letter (Appendix 7), to supply and to elicit further information and validation of the interview content and patterns of themes and meaning unit structure emerging from analysis. The additional data was intended further to elucidate themes and depth of data (Bogdan and Taylor, 1975). For Cycle 1, the constituents of the categories were further compared and reduced to reform and re-organise categories and their in vivo labels, if necessary, and similar ones were grouped to form themes. The analyses from both cycles were then amalgamated and patterns of commonalities were identified to develop into overarching themes, to bring them together as higher level constructs, and provide a coherent unified meaning to the themes and categories they contained. In the analytic process the participant transcripts were compared with each other to obtain what Moustakas (1994) describes as a 'composite description of the meanings and essences of the experience'. Descriptions were supported by direct quotes in the results in Chapter 4.

Appendix 10 illustrates how sample statements extracted from a single interview were allocated codes, along with notes to explain the researcher's thoughts at the time, and how the shortened statements and their codes were then linked with the refined key categories, themes and the superordinate themes. Statements were collected into clusters. Statements and codes were tabulated with those from other interviews. Codes and clusters were reviewed with the notes to help refine them further.

The 'understanding needs and their implications' cluster is an example for illustration as it has several dimensions. Clusters within the interview extracts were compared with those of other interviews and so the needs cluster (includes codes of the 'impact of need' and 'managing need') helped to develop the key category of 'recognising need and gaps and meeting needs'. The cluster of 'seeing the bigger picture' (codes impact of contexts, making links to the wider world) helped develop the key category of 'awareness of the bigger picture and ability to explain and do things in a global perspective and working together' (coming together, sharing knowledge, collaboration, social awareness), and another key category of 'civic and social engagement with local

communities'. Comparing all interview key categories facilitated the development of the themes above them.

Appendix 11 illustrates how sample quotes from several interviews contributed to the development of the superordinate theme 'understanding needs and their implications'. The two sample quotes from each code are used to show how codes were developed and put together to form a key category. For example, the codes of 'see the whole picture' and the separate aspects of 'awareness within the big picture' helped formulate the key category of 'awareness of the bigger picture and ability to explain and do things within global issues and perspective'. The words in the key category are in-vivo (those used within the quotes themselves). Within the superordinate theme several key categories were brought together in a sub-theme. In this example of 'awareness of the bigger picture', the 'ability to see the world differently and broaden thinking' and 'working and learning with others to enable knowledge transfer' were brought together under the theme of 'programme design, content and learning opportunities'.

3.3 Ethics

Permission to approach staff was gained through the Dean of the Faculty. The study was peer reviewed by a member of the Faculty of Health Sciences' Peer Review Panel and a member of Southampton Education School. Ethical permission was sought through the Faculty of Education ethics processes at the University of Southampton and ethical approval was given through the University of Southampton's Research Governance Office.

3.3.1 Ethical Considerations

The Researcher

The researcher's previous experience may potentially impinge on the construction of questions and selection of significant themes taken from the questionnaires. His position as an insider within the staff group and one of the links between academics and management within a professional group may potentially alter or temper participant responses, however the intention of the researcher was to remain as open to the data as possible to reduce the potential for bias. Reassurances were given to participants that the research was being conducted outside of the researcher's role and that data that might relate to an individual's name, profession or role would be

omitted in an attempt to prevent identification. Participants were advised that if the study was to be published, as the research was conducted within a single Faculty it would be challenging to have complete anonymity. For external readers it might be possible, but despite being a very large Faculty with a large number of staff, internally it may not be possible to ensure anonymity of interview responses. The words and phrases used may allude to the participant's profession and role within the Faculty and, as Walford (2005) suggests, potentially be recognised.

Confidentiality and Storage

Confidentiality of Phase 1 data was preserved as far as possible by using numbered questionnaires. Although participants were asked to supply contact details if they were willing to participate in the interview stage, these were detached from the questionnaires and kept in a separate lockable facility. Each interview had a numeric code and was transcribed verbatim onto a computer by the researcher to maintain confidentiality and facilitate familiarity with the data. Any interview data that could be identifiable was anonymised on transcription and care was taken when writing up responses. Participants were warned of the possibility that responses would be recognised as attributable to certain people by internal staff. To maintain confidentiality of interview data the code of each interviewee was kept in a separate lockable facility. At the end of the study the questionnaires and recordings were retained and these will be stored for a period of 15 years, in line with University guidelines.

Procedures

Where possible the data collection was conducted at a time to minimise impact on Faculty programmes and research projects. Interviews were conducted in negotiation with participants to make sure that the time was convenient, did not impinge on University business, and the chosen location prevented identification by others at the University. When this involved one-to-one interviews they were conducted in the University buildings during the day, when support would be available if needed.

Rigour and Trustworthiness

One of the issues of qualitative research is the issue of quality control (Yardley, 2000). Ensuring the integrity and authenticity of the research being undertaken was considered fundamental, however qualitative studies cannot be judged as valid and reliable in the same way as quantitative studies. The difficulty is that, in general,

qualitative research allows for creativity and is less bound by rigid adherence to procedures, yet it was important that measures were taken to ensure the integrity of the research and that the theories proffered by the researcher were authentic. Whittemore et al. (2001) refer to this as the tension between rigour and creativity. Yardley (2000: 219) outlines the characteristics of good research under the topics of: 'sensitivity to context; commitment and rigour; transparency and coherence; impact and importance'. In Yardley's (2000) study the characteristics she refers to are captured under the collective terms of rigour and trustworthiness. Rigour is made up of legitimacy and reflexivity (Grbich, 1999) and is addressed through sampling, validity and reflexivity. Trustworthiness has four categories: credibility, transferability, dependability and confirmability (Highlen and Finley, 1996: 179). Many different methods have been put forward to address the issues of credibility, transferability, dependability and confirmability, however it has been questioned whether these are mere synonyms for quantitative methods (Appleton, 1995). Several methods were included in this study:

- Credibility (confidence in the accuracy of the interpretation – might be termed internal validity) – was accomplished through triangulation and member checks. Once transcribed, the initial themes using participants' own words, accompanied by brief supporting comments, were submitted to the respondents by mail as a means of cross-checking the emerging themes (Burnard, 1991). It also allowed the respondents to verify the themes to avoid distortion or bias and to add more data if necessary.
- Transferability (allowing readers to derive their own interpretations and generalisability – external validity) – use of a comprehensive description permitted readers to derive interpretations and provided an audit trail for coding and themes. Results were set out in such a way as to be coherent and to enable the reader to verify the categories themselves, and an audit trail of decision making is provided (see Appendix 12 – sample statements with coding analysis; Appendix 13 an example of development of a theme). This demonstrated one aspect of the trustworthiness of the data and the validity of the category system used (Burnard, 1991).
- Dependability (reliability) – This was accomplished through using overlapping methods of questionnaire and interview. Several methods were also used to enhance the uniformity of data collection and to reduce the influence of bias. Using a single researcher for interviews, with appropriate experience, and a semi-structured format for interviews ensured some consistency in the processes. While the general framework was adhered to for each interview it

was recognised that, at times, some issues would need exploring in more depth. Interviews took place in a private room to avoid external influence.

- Confirmability (objectivity) – this was accomplished by the use of notes, memos and personal notes to help verify the coding and categories (Grbich, 1999). This was intended to show the generation of ideas and that they were transparent and traceable. On the completion of the analysis, the researcher chose two random themes and was able to trace back the derivation of themes to when data themes arose in the original transcripts.

For the member checks, the letter accompanying the returned themes (Appendix 7) stated that if participants did not return the themes it would be taken as tacit agreement with the themes that emerged and that there were no comments. Five respondents chose not to return the themes, but the remaining three returned the initial themes. The latter agreed with the themes and also gave a small amount of additional information.

Because the experiences of the respondents were fundamental to the study, it was important to be open to what emerged from the interviews, so a number of stages were involved to underpin the integrity. The first stage concerned achieving self-awareness and an understanding of how the researcher's personal experiences and beliefs impact on the interaction and interpretation in the research setting (Grbich, 1999). The second stage is what Moustakas (1994) refers to as 'bracketing from the data'. In this stage the researcher used the knowledge gained from Moustakas' (1994) Stage 1 to help him maintain neutrality when analysing the data. This minimised any contamination that might arise through the researcher's previous knowledge or perceptions and allow him to recognise any ambiguities in data interpretation. The third stage was immersion in the data. It could be argued that it is impossible for researchers to stay objective without letting their own views impact on it when immersed in the data. The researcher disagrees and believes that immersion and objectivity are not mutually exclusive and that a researcher is more of one and less of the other. It is argued that it is possible both to suspend one's own beliefs and still be immersed in the data. This is not as a result of researcher training, but by virtue of skills gained through healthcare professional training. When interviewing patients in the healthcare setting, it is current practice for the professional to adopt a client-centred and non-judgemental approach. This is used to develop rapport, help elicit the appropriate information from the client and be able to view the account from another's perspective. Only at the termination of the interview situation do professionals allow their own observations and comments to contribute to the coding process. The researcher used this as a consistent approach throughout the study interviews.

To help guard against imposing the researcher's own views and to establish whether there was consistency in the responses, the researcher used triangulation methods suggested by Cutcliffe and McKenna (1999). These were:

1) Using constant comparison and finding repeated labels – accomplished through the data analysis protocol in Section 3.3.3;
2) Using a variety of data collection methods – questionnaire and interview; and
3) Using a variety of participants – accomplished through the sampling process. Cutcliffe and McKenna (1999: 379)

The researcher used versions of all three options. During the analysis the researcher initially compared the transcripts using an in-vivo coding process. Coding was refined into categories and themes to construct a master table of superordinate themes, themes, categories and occurrences (Table 4.2). It was taken that a greater number of occurrences and agreement amongst respondents conferred more credibility. Triangulation of methods was performed by comparing the responses from the questionnaire Likert questions and open responses with the Phase 2 interview data.

Sampling

The third of Cutcliffe and McKenna's (1999) points is accomplished by using a stratified sampling process to give a spread of participants through the professions represented, to enable exploration of the different sources of knowledge and to maximise the relevant categories within this area of study. While this might appear to confer more credibility on the results, the researcher feels that this is not so because of the low numbers they represent. The total of eight interviews might go some way towards achieving theoretical saturation and be suitable for comparison to be made for the group in its entirety. The range of participants enabled exploration of specific sources of knowledge, from both delivery and strategy perspectives, and to maximise the relevant categories within this area of study. However, from a positivist's non-probabilistic view, sampling for each group represented in the interviews was very small and did not achieve saturation. Therefore the results were for the group as a whole rather than subsets of the main group.

Validity

A number of design aspects contributed to validity. Face validity and content validity of questions formed the basis of the questionnaire, and for interview was achieved through developing questions from literature and through feedback by pilot

participants to ensure questions were appropriate. Phase 2 participants were asked to comment on the interview schedule to ascertain its appropriateness. Some internal validity of the category system used (Burnard, 1991) was achieved through several techniques in the interview analysis. Verification of coding was done by integration of notes, and comments in relation to the key categories (Grbich, 1999) to give a clearer understanding of the emerging themes and show that categories are traceable back to the data that gave rise to them. This maintains the integrity of the interpretations through being a responsible process. Another check on validity, suggested by Marshall and Rossman (1995), is that the researcher searches for evidence to contradict as well as to support themes.

Reflexivity

Reflexivity involves a process of critical reflection and self-awareness. It allows researchers to understand how their personal experiences and beliefs impact on the interaction and interpretation in the research setting (Grbich, 1999). Through this process a researcher will minimise contamination of the data, empower the researched and recognise any ambiguities in data interpretation. A section on reflexivity is contained in the discussion.

Other Reflections

The researcher considered that the reality and meaning for individuals was reflected through the study results, which exemplified the thoughts, words and assumed actions of the participants in an HE context at that moment in time. However, a number of issues regarding aspects of the research design and how it was carried out warrant further consideration.

The responses were presumed to be truthful, but there are limitations here and it is acknowledged that data collection itself is 'an inescapably selective process' (Miles and Huberman, 1994: 55). The questions posed in both the questionnaire and the interview schedule were selective in order to gain responses to answer the research questions. It could also be argued that the data were co-constructed and responses couched in a way that is a blend of what respondents wanted to say and what they think the researcher wanted them to say. This is what Borg and Gall (1983) refer to as the Pygmalion effect, where changes in the respondents' behaviour and responses are influenced by the researcher's expectations. Cues about research were available to respondents by virtue of them completing the Phase 1 questionnaire so this, too, might have influenced responses. This may actually be perceived as having a negative

effect, due to indirect cues about researcher's expectations, or a positive effect by virtue of giving the respondents the time and opportunity to think about the internationalisation process to further crystallise and to refine their thoughts.

A further consideration is that responses might not have been entirely truthful and were a result of impression management. The study considered the area of identity within the results; this might also be applied to the process of the study itself. Although no advantages were to be gained from participation in the study, it could be argued that responses were adjusted to correspond to the impression that the person wanted to convey of themselves to the researcher. In this way that person was gaining what they perceived to be some advantage or benefit.

3.4 Conclusion

The research design chapter has outlined the rationale behind method selection, the study plan and data collection and the subsequent data analysis and synthesis. Detail is provided on the activities in each of the stages of the study to allow the reader to make their own assessment of the rigour and trustworthiness of the process and the data the study contained.

4. Results and Discussion

This chapter will describe and discuss the results of the study to understand staff views and conceptions of internationalisation, its constituents and the implications for its delivery within the Faculty. The research questions were 'What are the staff's conceptions of internationalisation within the Faculty of Health Sciences?'; 'How do staff conceive the constituents of internationalisation?'; and 'What are the implications for delivery of the internationalisation process within the Faculty of Health Sciences?'. The results chapter will begin with a summary of the Phase 1 questionnaire ratings and open question responses. This is followed by a description of the prominent themes emerging from the Phase 2 interviews supported by quotes from the interviews.

4.1 Analysis of Phase 1 Questionnaire

The purpose of the questionnaire was to gain staff views and explore the implications of internationalisation for the Faculty of Health Sciences. In total, 191 questionnaires were administered. Eleven were returned due to staff no longer being with the Faculty, leaving a total of 180. Seventy-five questionnaires were returned to give a response rate of 42 per cent, however four questionnaires could not be used due to incomplete data and so were unable to be assigned to a professional group. The group proportions were Midwifery = 7 (10%), Nursing = 29 (41%), Occupational Therapy = 7 (10%), Physiotherapy = 10 (14%), Podiatry = 7 (10%) and Other Professionals = 11 (15%).

4.1.1 Questionnaire Likert Questions

Likert-type five-point scales were used to gauge respondents' views about various aspects of operating in, developing skills in, and awareness of international and intercultural issues; the University's role in developing these aspects; and understanding of internationalisation (the five points being: very important, important, unimportant, irrelevant, and don't know). Within the set of responses for each question, the modal point (that which featured most often) was taken as the prime indicator of strength of feeling about the question topics. Table 4.1 gives the Likert modal values, by group, for all the questionnaire questions.

From Table 4.1, all questions apart from two received a modal rating of either 'very important' (26/35) or 'important' (9/35). The impact of different cultures and international

contexts was seen as very important. In comparison, the question regarding an individual's actions and decisions being influenced by international issues was felt to be 'important' and gave a greater spread of modal opinions between the different healthcare groups represented. The spread of opinion was found to be most marked within responses of the 'Other' (non-healthcare professional) group. The healthcare and non-healthcare groups work in different contexts, one with clients and one without. Because healthcare is highly client-centred, the responses by healthcare professionals may reflect how they operate.

Respondents from the healthcare education professions have dual perspectives; they not only have professional experience in clinical settings but are HE professionals. The views they expressed may reflect how participants blended these two perspectives. The remaining group members were a small number of people who were HE professionals, but not healthcare professionals, and perhaps were not influenced by healthcare mores. The questionnaire responses for respective groups are presented in Table 4.1. There was some variability in responses between groups, but more certainty and agreement was expressed amongst all groups' responses regarding the responsibility on the institution, rather than the individual, to provide the support for the different aspects of internationalisation.

Table 4.1 Likert modal values by group (M=Midwifery, N=Nursing, OR= Other groups not allied to health, OT=Occupational Therapy, Pod= Podiatry, PT= Physiotherapy)

In your work situation, how important is it that you (as an individual)	**Very important**	**Important**	**Unimportant**
operate within a *local/national* healthcare context and identity?	All groups		
operate within an *international* healthcare context and identity?	M,OT,PT, Pod	N,OR	
develop skills to be used in *national* practice?	All groups		
develop skills to be used in *international* practice?	M,PT,Pod	N,OT,OR	
have *an understanding of* different cultures?	All groups		
develop *abilities to work with* different cultures?	M,N,OT,PT, Pod	OR	
actions/decision making are influenced by inter*national* issues?	PT,Pod	M,N,OT,OR	
actions/decision making are influenced by inter*cultural* issues?	PT,OT,Pod	M,N	OR
develop your awareness of inter*national* issues?	PT,Pod	M,N,OT,OR	
become more aware of inter*cultural* issues?	N,OT	M,PT,Pod,OR	
It is very important that the University…			
develops inter*national* issues/perspectives in some *teaching* programmes?	All groups		
develops people's inter*cultural* awareness in some *teaching* programmes?	All groups		
develops inter*national* issues/perspectives in its *research* training?	All groups		
develops people's inter*cultural* awareness in its *research* training?	All groups		
develops people's skills/abilities for working *in the UK*?	All groups		
develops people's skills/abilities for working *outside the UK*?	M, OT, Pod	N, PT, OR	
develops *support services* for students/staff from different countries?	All groups		
develops *support services* for students/staff from different cultures?	All groups		
contributes to debates about *national* healthcare issues	All groups		
contributes to debates about *international* healthcare issues	All groups		

How important are each of these in your understanding of internationalisation?	**Very important**	**Important**	**Unimportant**
developing research collaborations across UK borders and internationally	All groups		
developing business collaborations across UK borders and internationally	N,M,OT,PT, Pod	OR	
exchanging good practice ideas in education on an international basis	All groups		
undertaking work exchanges and placements overseas for staff and/or students	N,OT,Pod	M,PT,OR	
participating in international HE events or conferences	All groups		
helping to develop skills for working and practice in different countries	Pod	M,N,OT,PT,OR	
learning to work across social and cultural differences within own country	All groups		
a presence of students from different countries of origin on campus	N,OT,PT	M,Pod,OR	
promoting a 'feeling of belonging' to the University for diverse students and staff	All groups		
increasing support for diverse students/staff	N,M,OT,Pod	PT,OR	
including an inter*cultural* dimension to university teaching and services	N,M,OT,PT, Pod	OR	
including an inter*national* dimension to university teaching and services	N,M,OT,PT, Pod	OR	
opportunities for students/staff to learn about inter*national* issues/contexts	M,OT,PT,Pod, OR	N	
people consider themselves as having 'European' or 'Global' citizenship		N,M,PT,OT,OR	Pod
internationalisation is an opportunity for additional source of income	N,M,PT,Pod	OT, OR	

In understanding internationalisation, a number of issues were common across professional groups and deemed very important by respondents. These were:

- Developing research collaborations across UK borders and internationally;
- Exchanging good practice ideas in education on an international basis;
- Participating in international HE events or conferences;
- Learning to work across social and cultural differences within one's own country;
- Promoting a 'feeling of belonging' to the University for diverse students and staff; and
- Promoting working and communicating together.

Throughout, the responses from Nursing, Midwifery, Occupational Therapy, Physiotherapy and Podiatry groups showed similar modal profiles of being very important or important. The 'Other' group (non-healthcare professionals) showed a similar modal response but with greater variation of responses that may suggest differences in conceptualisation between healthcare related and non-health-related professionals, or a different emphasis on the required skill bases. In the whole dataset, modal scales were generally very important or important, with four areas around understanding of internationalisation exhibiting the most variability.

Figure 4.1 The importance of actions/decision making influenced by international issues (numbers of respondents in each of the five-point scales)

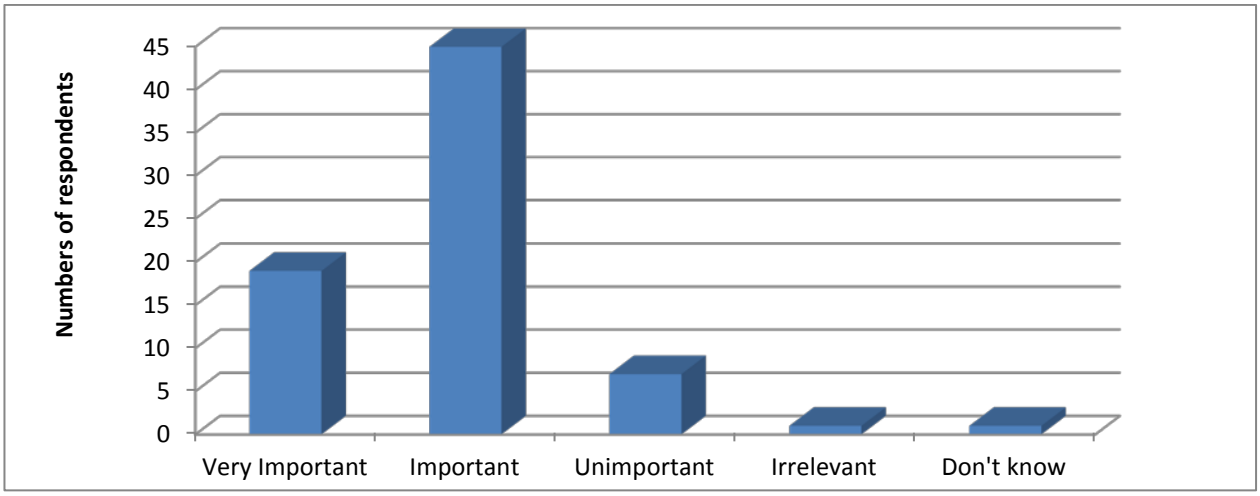
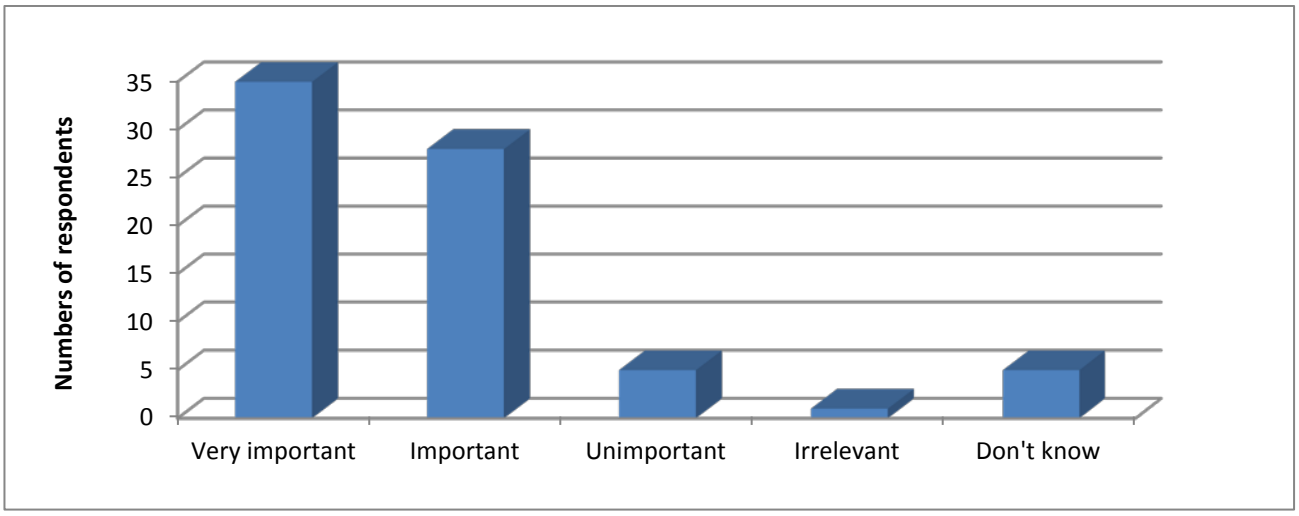


Figure 4.2 The importance of actions/decision making influenced by intercultural issues (numbers of respondents in each of the five-point scales)

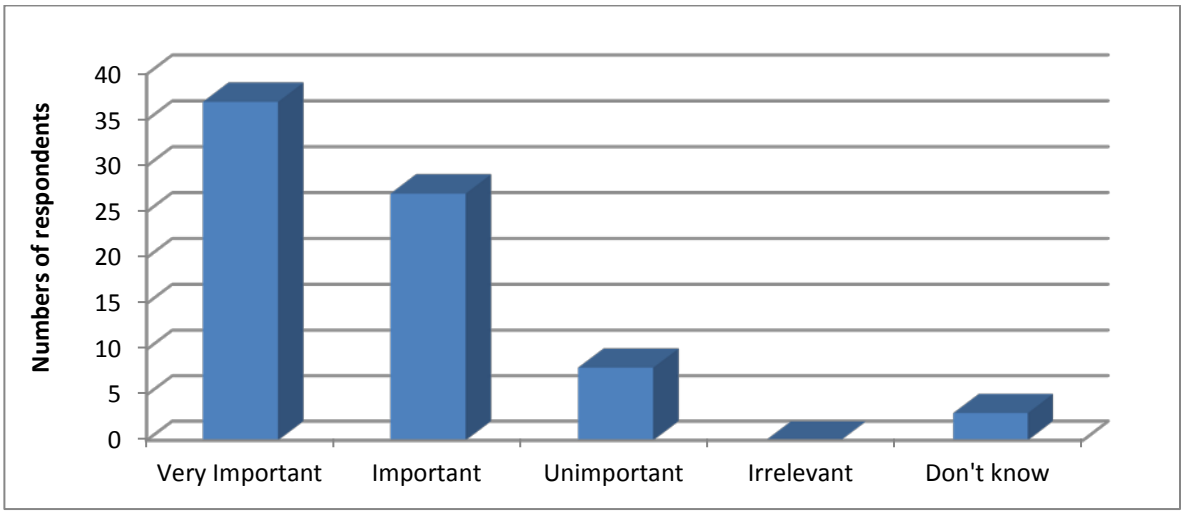


Perhaps the health-oriented professionals' emphasis on international or intercultural issues being important, or very important, in influencing decision making may be explained by their close interaction with patients and colleagues from different nationalities and cultures. These types of services require the ability to communicate closely and directly with others in order to manage their illness recovery, or rehabilitation process, so sensitivity to those people's backgrounds and circumstances would be advantageous. This may not be the case for the

'other' group, whose respondents and work background may not be a service sector and hence of less relevance and importance.

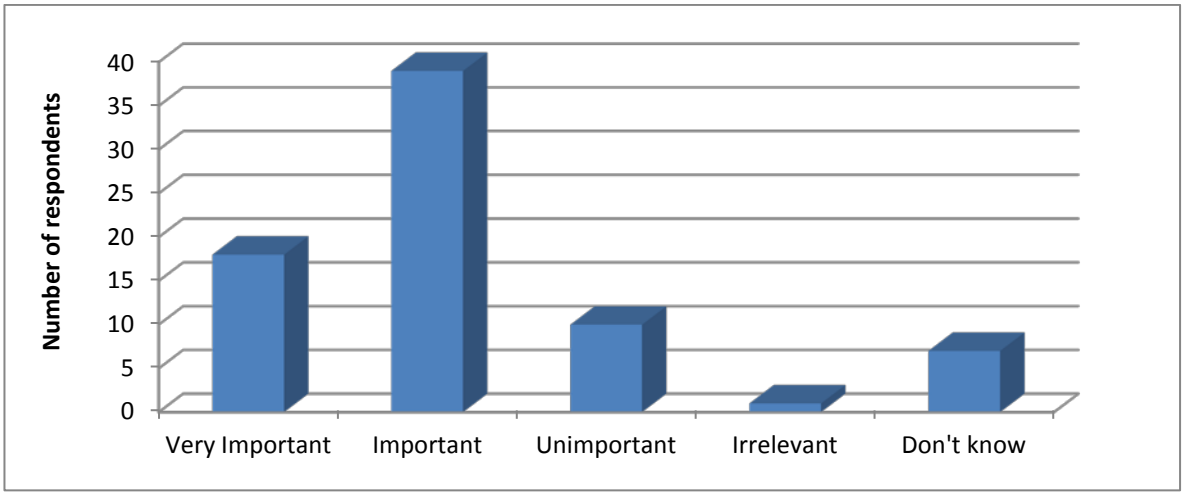
A spread was also seen in the importance afforded to the development of business collaborations across UK borders and internationally as a contribution to the understanding of internationalisation.

Figure 4.3 Importance of developing business collaborations across UK borders and internationally (numbers of respondents in each of the five-point scales)



The last area to show a variation in views was the importance of considering oneself as having a 'European' or 'global' identity in formulating that person's understanding of internationalisation.

Figure 4.4 Importance of people considering themselves as 'European' or 'Global' citizens (numbers of respondents in each of the five-point scales)



It is interesting to speculate why this facet of identity reflected a difference of views. The Oxfam (1997) concept of global citizenry assumes a sense of shared values, vision and action for the betterment of all that goes beyond national level. This is a rather normative idea and has connotations of rights, obligations and social justice/injustice.

Within healthcare, Hanson (2008) promotes the need for culturally sensitive professional and clinical practice and goes on to argue that healthcare curricula should integrate global health and global citizenry so that these promote action against the social determinants of health and health inequalities. To be able to appreciate this requires the individual to acquire familiarity with the circumstances that lead to health and health inequalities, the values of healthcare and clinical practices and therefore skills and employability within their own country. By doing so they can make comparisons with other countries and explore how healthcare practices are influenced by the specific profiles of social and healthcare environments and circumstances. Consequently, students can start to appreciate the tensions of balancing their primary focus on national healthcare practices, values and visions for moving forward with their existence in local, national and international contexts and the necessity to acquire skills for both national and international employment. This is a quite pragmatic and instrumental approach to acquiring global citizenry skills. Participants' responses had parallels with Marginson and Rhoades' (2002) paper on a 'glonacal agency heuristic' for comparing organisations. 'Glonacal' is a conceptual term coined to denote the flows of activity from global to local and vice versa. Marginson and Rhoades (2002: 281) suggest the concept has 'three intersecting planes of existence' and represents the

'simultaneous significance of global, national and local dimensions and forces'. As explained above, in some respects the situation of intersecting planes of identity is similar for the individual in that they have to see themselves in local (university), HE and healthcare sector, plus national and international situations. Accordingly, the question on how respondents see themselves in relation to a global identity formed one of the questions in Phase 2 interviews.

The distinction between 'very important' and 'important' is worth exploring to explain the context behind some of the responses. The fact that groups hardly used the 'unimportant' or 'irrelevant' classifications is quite telling. As mentioned above, the strong sense of support for clients and students felt by the health professions, indicated by respondents, may help to explain why respondents took a blanket approach and encompassed all they could as 'important'. The effect could also be due to methodology. It could be argued that the gradation of the scale was not fine enough to allow for a middle option that distinguished between 'unimportant' and 'important', and that this might have allowed further differences to be seen. Alternatively, it might be the way the questions were posed. Definitions found in the literature were deconstructed into their separate elements and questions used these separate elements, which may have led participants into agreeing that all aspects were of importance.

4.1.2 Open Question Responses

The open questions were intended to give the respondents an opportunity to highlight themes of interest and to elaborate on their responses to the rating questions. Analysis was by general thematic analysis to gain an overview of the issues respondents might raise in relation to internationalisation. Those themes that were frequently mentioned supplied ideas for prompting questions for the interview schedule. The most prominent themes are described here, accompanied by example comments. It was interesting to note how the questionnaire's open responses focussed on the practicalities of internationalisation, on the steps and activities needed to deliver what the participants believed to be the outcomes of internationalisation and the organisational barriers that might thwart them.

The first issue to be mentioned was the need for curricula to take into account differences in professional regulation and statutory requirements, as health professional practice is governed by national bodies in each country. To be registered in different countries often requires satisfying benchmarks for education and practice set by their professions. Individuals also need to be mindful of variations in the scope of professional practice of

healthcare professionals. Evetts (1998) points out that the structure and functions of professional healthcare associations vary between different countries, so professional regulation can take different forms. Individuals would need to be aware of the overarching influence of national and European Union policies and supranational healthcare directives.

> *For professional practice, a full understanding of the health environment internationally and the associated regulatory frameworks for health professionals will be required. (Q25)*

> *However, thought needed to be given to which policies were most appropriate, as the list could be endless – WHO, UNICEF, UN, EU, WMF and more if I thought about it. (Q100)*

It was felt that advantages would be gained through acquiring an understanding of the impact of cultural difference, learning about world health issues and gaining experience via overseas placements/exchanges. Providing a strong foundation of knowledge, employability skills and citizenry skills could open up opportunities for working internationally.

> *Incorporation of learning outcomes related to intercultural competence and cross-cultural capability (mandatory in all (healthcare) programmes); including international examples in the multicultural environment; induct all students to the importance of conceptualising global perspectives to enhance social mobility and career development; student and staff exchanges. (Q60)*

Responses to the questionnaire's open questions had their limitations. In an effort to be brief, they often appeared as a list. Because participants did not expand on their comments it was not possible to tell what was understood by intercultural competence and cross-cultural capability and whether they were different. What was apparent was the importance assigned to the development of a foundation of skills necessary for increased employability and social mobility. One participant commented on how a global perspective might enhance social mobility. Associating knowledge of a global perspective with career development was thought instrumental in opening additional doors to further career and status. This proposes that participants' intended outcomes were pragmatic, such as getting jobs or better jobs, in contrast to involvement in the value-based enrichment associated with outcomes of social responsibility. There was insufficient questionnaire data to allow elaboration on the social mobility aspect.

In addition to the benefits, responses also identified constraints and acknowledged their impact. Language skills barriers were one constraint:

> *Breaking language barriers will be difficult. (Q69)*

This observation concurs with the findings of Hellsten and Prescott (2004), and concerns not just the language students are learning in, or being taught in, as respondents indicated that this represents the 'tip of the iceberg'. For international students coming into healthcare courses from a different country, there is not only a different language to learn – the language in which students are learning may not be their first language or native tongue – as the vocabulary of HE may not be the same as in their home country. Moreover, they are learning the vocabularies of healthcare and their own professional discipline. Because of the different models of healthcare operation, the words used in one country may not mean the same thing in another.

Other constraints identified were organisational pressures, time and funding, together with the necessity for adequate resources such as staffing, time, training, language support and robust information technology to support activities:

> *Time pressures and workloads, more cannot keep being put into already packed curricula…. (Q65)*

> *Time, money, staff development, access to language laboratories, flexible staffing procedures or use of hourly paid staff. (Q27)*

Resolving these constraints will depend on the organisation reviewing the resources available and allocating them in the most effective and efficient way:

> *Need to ensure services are in place to support this. Need more discussion about how to integrate/develop learning packages, criteria etc. Brings up issues of academic ability, equivalence, relevance, research ethics – standards of practice and the like. I have only mentioned the tip of the iceberg. (Q183)*

This encompasses Marshall et al.'s (2004) and Hall et al.'s (2004) suggestions about content, to understand cultural issues, misinterpretations and differences in healthcare delivery, but

also implies a much more complex situation. Hence there is a need for discussion to achieve clarity and ensure all aspects are taken into consideration:

> *I am unsure of how it is developed; it is not clear what definition/philosophy of internationalisation is used, if any. (Q114)*

This last quote reflects an uncertainty regarding the definition and aims of internationalisation that was not uncommon. Taylor (2004), in a study of four universities, pointed to how a lack of clarity of aims exposed them to interpretation in a variety of ways. Defining how internationalisation is to proceed is fundamental to the development of strategy. Participants expressed other concerns about the impact of adopting a narrow view of internationalisation, such as counting student numbers and emphasising the financial impact. Respondents did not want to forget the individual in the process, but to maintain a balance between institutional and individual needs when designing and implementing subsequent activities. Figure 4.5 provides a concept map of the themes and links emerging from the questionnaire.

To summarise, the open question responses outlined that curricula and study need to consider differences in professional regulation and statutory requirements and professional benchmarks for education and practice. In doing so, advantages would be secured through understanding the impact of professional differences and world health issues. This was suggested to help establish a foundation of knowledge, employability skills and citizenry skills that facilitate employability in different countries and different environments. The challenges encountered are due to differences in language and vocabularies, organisational pressures, time, and funding. Concerns were also expressed that a narrow perspective of internationalisation should not be adopted and the imperative of not disregarding the needs of the individual. There are limitations, as the questionnaire gave only superficial information and respondents were unable to expand on their comments.

4.2 Analysis of Phase 2 Interviews

Interviews were conducted in a private room and recordings were, on average, 45 minutes in length. The group of eight interview respondents contained a mix of professions and represented both genders. Through an in-vivo coding process (see section 3.2.6), repeated meaning units were clustered to form categories, or the first segment of data that could be described as explicit. Categories were then compared and similar ones grouped to form

themes. Themes were compared and grouped into four overarching, or superordinate, themes that formed higher level constructs aligned with the respective research aims of the conception and process of internationalisation and implications for delivery. The hierarchy of superordinate themes, themes and categories that outlines the structure of the phenomenon is presented in Table 4.2, made up of those mentioned by three or more respondents.

FIGURE 4.5 - CONCEPT MAP OF THEMES AND LINKS EMERGING FROM QUESTIONNAIRES

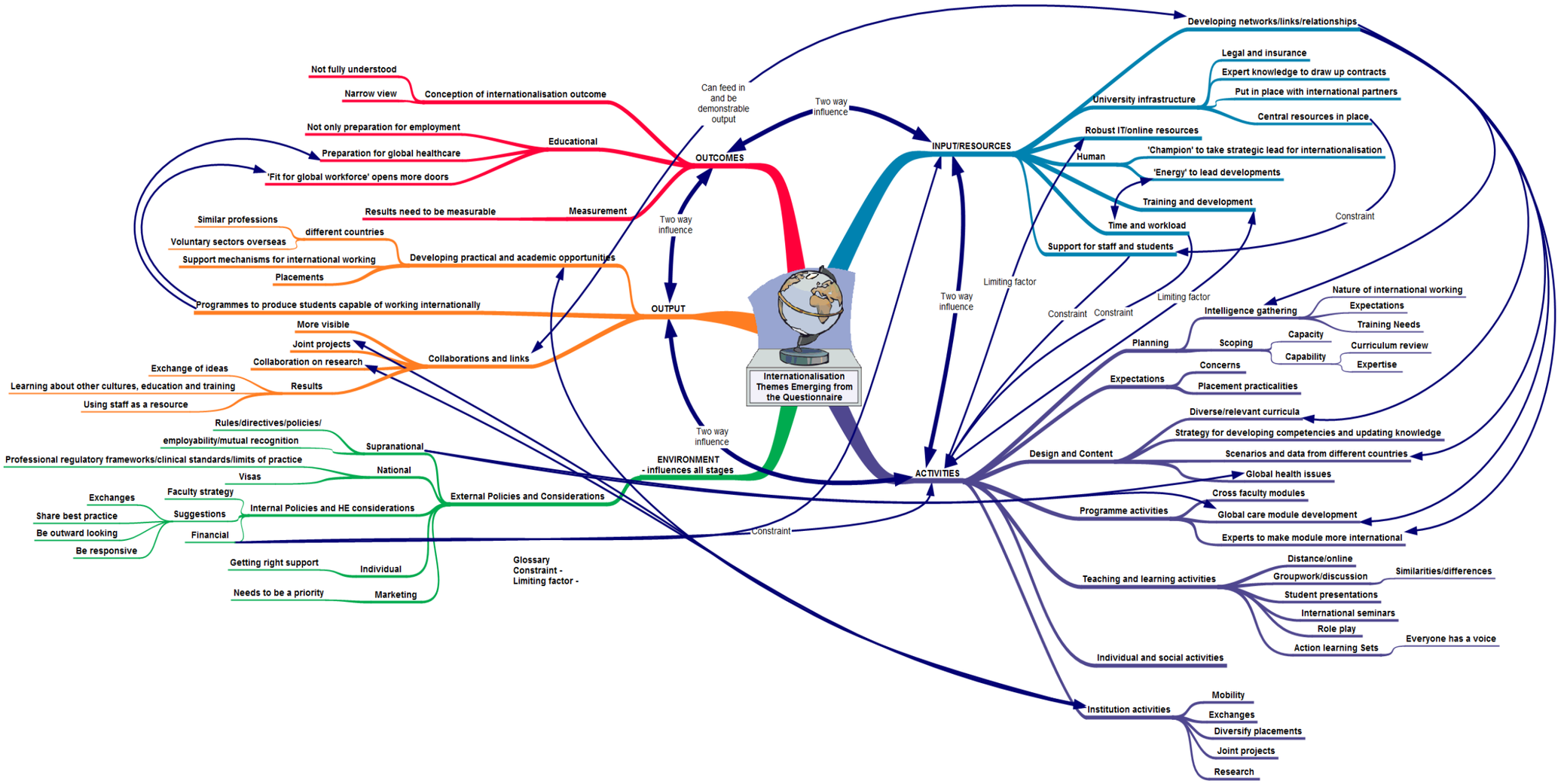


Table 4.2 Superordinate themes, themes, categories and occurrence in interviews (Y= Yes, N=No)

Superordinate Theme –WHAT IS INTERNATIONALISATION – PARTICIPANT CONCEPTIONS		**Interview Occurrence**							
Theme	Key Category	1	2	3	4	5	6	7	8
Integration	Seamless integration in the community/feel part of a team	Y	N	Y	N	N	Y	Y	N
Knowledge for employability	Awareness of international issues and their implications	N	N	Y	Y	Y	Y	Y	N
	Awareness of intercultural issues and their implications	Y	Y	N	Y	Y	Y	Y	Y
Way of being	Different ways of being/part of being	Y	N	N	Y	Y	N	N	N

Superordinate Theme – UNDERSTANDING THE NEEDS AND THEIR IMPLICATIONS		**Interview Occurrence**							
Recognising need	Recognising needs and gaps and meeting needs	Y	N	Y	N	N	Y	Y	Y
Programme design, content and learning opportunities	Awareness of the bigger picture with the ability to explain and do things within global issues and perspective	Y	Y	N	Y	Y	Y	Y	Y
	The ability to see the world differently to help broaden thinking/problem solving	N	Y	N	Y	Y	N	N	Y
	Using working and learning with others to enable knowledge transfer	Y	Y	Y	N	Y	Y	Y	N
	Cultural competency with a defined set of competencies	Y	N	Y	Y	N	Y	Y	N
	Understanding people's stories, needs, differences	Y	N	Y	Y	Y	Y	Y	Y
	Experience of being able to practice abroad	N	Y	N	N	Y	N	Y	N
Creating a supportive environment	Using networks to develop stronger links with different parts of the world/sphere of influence	Y	N	Y	Y	Y	Y	Y	N
	Collaborative work with other universities	Y	Y	Y	N	N	Y	Y	N
	Establishing a robust system of reciprocal relationships to inspire, build a momentum and to learn from each other	N	Y	Y	Y	Y	N	Y	Y
	Civic and social engagement with the local communities	N	N	Y	Y	N	Y	N	N

	Good, clear, accessible, responsive networks for support	Y	Y	N	N	N	N	Y	Y
	Need for translation/language skills and language support	Y	Y	Y	Y	N	N	N	Y
	Training is crucial	N	N	N	N	N	Y	Y	Y
People	Select appropriate staff to lead and guide the process	N	N	N	Y	Y	Y	N	N
	Identity	Y	Y	Y	N	N	N	N	N
Evaluation	Results of the students on the programme	Y	N	Y	N	N	N	Y	N
	Reputation is an indicator	N	Y	N	N	Y	N	N	Y

Superordinate Theme – UNDERSTANDING WHAT OUTCOMES AND BENEFITS ARE GAINED		**Interview Occurrence**							
Enhancing skills to work with others	Using skills appropriately in healthcare environments	Y	Y	Y	N	N	Y	Y	Y
	Making a difference and success beyond university	N	N	Y	Y	N	Y	N	Y
	Cultural understanding/awareness for working together	Y	N	N	Y	Y	N	Y	N
	Able to live and work in a variety of settings	Y	N	Y	Y	N	N	N	Y
Personal Growth	Personal growth and become enriched	N	N	Y	Y	Y	N	Y	N

Superordinate Theme – THE PROCESS OF PUTTING IT TOGETHER		**Interview Occurrence**							
Rationale	Think about and establish why do we want to do it	N	N	N	N	Y	N	Y	Y
Intent	Being forward and outward looking	Y	N	N	N	Y	N	Y	N
Vision	Creating a sense of purpose through the different layers	Y	N	N	Y	N	N	Y	N
Numbers	Increase global share of international students	Y	Y	N	N	Y	N	N	Y
	High student enrolment	Y	Y	N	Y	Y	Y	Y	N
	Students from different nations and cultures present								
Sequencing	Start with the end in mind	N	Y	N	N	Y	Y	N	Y

	Work backwards	N	Y	N	N	Y	N	N	Y

Superordinate themes spanned the areas of what was internationalisation, the needs of internationalisation and the implications they raise, the outcomes and benefits gained and the process of putting internationalisation together. The use of quotes illustrates what mattered to respondents and is also compared to findings in the literature. In the following sections the respondent quotations are distinguished by the numbers in brackets. The initial number was allocated to each respondent to distinguish them. The page number and line indicate where the quote is to be found in the transcription of the interview.

Because of the roles of the academic of lecturer, researcher and administrator, respondent comments encompassed the differing perspectives of these roles. It was therefore not possible to distinguish between the views of researchers as a group, as opposed to the lecturer group, however comments appeared to emphasise the teaching role and delivery to students. Some respondents took an active role in teaching intercultural studies:

> *I think it's probably come about more for me in terms of discussion points when we talk about the socio-economic issues as well that are affecting the global kind of perspective and the impact that has on healthcare generally. (6: page 1: line 61–63)*

In contrast to an active role and feeling part of the process, comments made by others regarding internationalisation might reflect a feeling of disconnection with the process and that internationalisation was just another part of the curriculum to be delivered.

4.2.1 What is Internationalisation? – Respondent Conceptions

For the superordinate theme of what is internationalisation, respondents did not express a universal understanding and responses covered three main areas. The first area was what respondents thought internationalisation was, and two respondents suggested internationalisation was about the ability to see and think about the relevance of the bigger picture (issues that were above local level). The second area was that this enabled people to be able to work with others, particularly those from different cultural backgrounds. The third area, mentioned by the majority of respondents, referred to the skills and knowledge necessary to build capability for internationalisation. One respondent said:

> *It's a nice little word, big concept. (5: page 1: line 44)*

This quote alludes to the scope that internationalisation, as a response to the pressures, changes and policy trends that happen in the world (Dodds, 2008), is expected to encompass. In this study, the respondents perceived internationalisation as a process in instrumental terms in considering only the outcome and resultant benefit gained. The outcome as seen by individuals and organisations, as perceived by four respondents, was integration and being better able to situate themselves in the 'bigger picture', or wider world, and students gaining knowledge, attributes and capabilities for employment:

> *The dividends are enormous in having a broader perspective – not just how I might work therapeutically with somebody [another culture], it influences the way that I work with people who are UK nationals. (5: page 2: line 68–70)*

In agreement with Knight, one respondent in the current study viewed it as an enabling process. Knight (2013: 5) suggested that 'one of the leading rationales… is to develop graduates who are more internationally knowledgeable and interculturally skilled, and prepared to live and work in more culturally diverse communities'. Respondents in the study perceived the benefits of being more aware of wider issues and differences as helping them to enable their patients in a multicultural UK, rather than living and working abroad. The responses in the study were directed at both individual and institutional levels and related to the building blocks that facilitated internationalisation (see section 4.2.2) and were intended to enable individuals, and institutions, to think and act appropriately wherever they may be:

> *a little bit of purpose and experience with empirical knowledge and aesthetic knowledge put all together to build into a bigger picture and being able to use that appropriately in your daily life. (1: page 3: line 4–6)*

Respondents pointed to how the building blocks fitted together in a healthcare context where the fundamental aspect was to gain an overview of the different areas (HE and healthcare) in which the individual was situated and worked, and the environmental contexts and factors that influenced the way they worked. For the individual, the basic sphere of thinking, functioning and working professionally would be local. However, individuals were not bound by this and respondents commented that it was important to appreciate and understand the ways local thinking was influenced by national or international spheres of thinking and functioning. The intention was to achieve individual sensitivity to the environment and how individuals, particularly students, chose to engage and act in a critical and reflective way:

> *[students] not only appreciate health and social care from the perspective of their experiences, and their programme practice experiences and what they are going out to, but what is happening in the wider world as well. Being the impact of economy, the impact of a change of environment, the impact of disability and race, the impact of different approaches and belief systems. (6: page 5: line 4-7)*

Respondents commented on dimensions that relate to the bigger picture and spheres of thinking and actions of gaining knowledge and skills. With regard to specialised knowledge and skills, the study respondents, as health professionals, considered knowledge about health approaches, beliefs, economy, environment and social attitudes as inseparable when they impact on the individual. One respondent appeared to distinguish between what was termed 'general internationalisation' (2: page 1; line 35) relating to University business, for instance increasing student numbers, and more specific aspects of internationalisation such as the acquisition of specialised knowledge and skills. Respondents suggested that it was gaining understanding and being able to apply and use this information in an appropriate way. This is similar to the views of Altbach and Knight (2007) and Hyland et al. (2008), in that internationalisation is everyone's concern and relates to developing and refining the skill sets and abilities to adapt to a changing world. Respondents also highlighted the need to encourage reciprocity:

- The importance of understanding international and intercultural perspectives

> *So they are getting a really good taste of a different system of doing things... you know its steering them to take in, to trying to soak up and absorb the cultural experience. (4: page 2: line 14-16)*

- Becoming critical and reflective about fitting or locating themselves within a broader and wider world (see section 2 – Recognising needs)

> *And getting them to open their minds to the reasons why our national and local Departments of Health if you like operate in the way they do because of what they are looking at globally. (6: page 1: line 55-56)*

Qiang (2003) comments that definitions of internationalisation seem to be categorised into dimensions or actions, depending on the author's perspective, so in this study the dimensions identified are only from the respondents' perspectives. The literature highlights

some other dimensions or actions that influence the interpretations of internationalisation as increasing economic interdependence (Luitjen-Lub et al., 2005); the degree of harmonisation of values, knowledge, technology and behaviours (Cheng, 2003); gaining a mutuality of understanding of intercultural aspects such as appropriate attitudes and behaviours (Yang, 2002); and gaining an international perspective (Leggott and Stapleford, 2007; Elkin et al., 2005) (section 2.3.2).

From the comments above, internationalisation is both a process and strategy where activity and output is directed to developing knowledge and skills through working with others and being open to new ways of doing things. Consequently, the outcome gained by the individual, or the organisation, is the ability to situate themselves in local, national and global contexts and develop the international and intercultural perspectives, knowledge and skills necessary to be able to work with, and learn new ways from, others in a changing world. This may not satisfy Qiang's (2003: 249) view of 'embracing the entire functioning of higher education', but does express values that are applicable across HE. From a healthcare perspective, respondents' pointed to a need to gain skills to operate successfully in an environment that is constantly changing and an ability to translate global issues into local health contexts and vice versa:

> *Because I wonder if actually looking at what's going on in an international basis helps inform what's going on locally. I don't see them as mutually exclusive. (5: page 4: line 39–40)*

The quote above may reflect the respondent's mindfulness of regulation and statutory requirements and policy statements, and so it appears they are thinking in terms of the wider aspects of health and social care and implications for healthcare professional management approaches. The quote also alludes to the ever-broadening scope and changing landscape of internationalisation. This is similar to Briggs' model of professional practice (2007: 482) where gaining an understanding of one's own personal values, profession and expertise, the surrounding environment, other people, their values and behaviours, and the college system is crucial to understanding of one's professional role. This also reflects the four key conclusions about internationalisation reached by Leask and Bridge (2013: 96–97) of the complexity of the process, the multiple allegiances of staff (in this study seen as their networks and identities) at different levels, working with other disciplines, and the impact of the interaction of external factors on the process.

As the internationalisation process has developed and changed, definitions have altered and now have to incorporate so many different facets and emphases at the different level of HE (Yang, 2002) that it defies any all-encompassing definition. The challenge of so many different definitions is navigating a way forward amongst all the expectations that it presents. Authors utilise what they feel are the building blocks of internationalisation (constituents that meet the needs), what is gained (outcomes and benefits) and how the building blocks of internationalisation are put in place to help the individual, or organisation, configure and operationalise their response. Respondents conceptualised internationalisation as needs, outcomes and operational issues.

In summary, the benefits of internationalisation, for individuals, are being able to think about and situate themselves in a wider world with a perceived outcome of integration and being able to work with different cultures. The building blocks are the embedding of international and intercultural perspectives into the university experience (learning, working and living in the university), having a broad yet critical approach to the development of the knowledge and skills, and the ability to cooperate and collaborate with others. The result of the perspectives above is the ability to see what others do, how it compares and to see how global issues translate into local practices and vice versa. This is done in a reciprocal way by gaining a mutual understanding, or awareness, of the culture of others to enable people to make decisions on how they behave and act in different situations and create the best environment to work in.

4.2.2 Understanding Needs, Outcomes, Benefits and Their Implications

The responses from the participants in the study were stated in a variety of ways. They identified needs and resources and activities to be put into the process. These were contained within the superordinate themes of the needs and their implications, and the links between them are reflected in Table 4.3 overleaf. The following section is based on the implications raised – understanding needs, managing knowledge and skills, creating a supportive environment, people and evaluation.

Understanding needs

In this study, needs are what the person wants; the outcomes are the consequence, or net result, of putting interventions in place to address the needs and the benefits represent the advantage, reward or profit accrued as a consequence of the outcome. As pointed out in

section 2.3.1, while identifying the needs may be essential there are ensuing implications, as Table 4.3 illustrates.

Table 4.3 The needs of students, staff and institution and their implications

NEEDS		IMPLICATIONS
STUDENTS AND STAFF	**INSTITUTION**	
Recognise and understand others' needs	Recognising and understanding needs	Establishing mechanisms to gain information and understanding of needs
Understand the impact of global issues and cultural issues See your position in the bigger picture Opportunities for mobility Using skills appropriately in daily life and making a difference	Develop opportunities for mobility	Managing knowledge and skills acquisition through: Reciprocity – learning from others Creating a rationale – Increase employability and skills to work in a variety of settings Developing the mind-set, citizenship and responsibility Critical thinking and reflection to problem solve, see the world differently, translating global influences into local contexts and actions
Feeling part of the HE community Feeling and being supported Variety of learning experiences and working with others	Sense of purpose across university networks and partnerships A suitable environment for teaching and learning	Creating a supportive environment by: Developing networks for resources and support Promote working with and learning from others An effective community – using skills appropriately
	A champion and a team to support preparing staff and students	People – Changing roles, identity and requirements
	Develop for measurement and evaluation systems Income/global share of students	Evaluating the activities associated with internationalisation Determining what and how evaluation is carried out Recruitment and marketing

Reviewing stakeholder needs is important to understanding and helping plan the way the building blocks of internationalisation come together. It could be argued that internationalisation is used as a strategic label to raise the prominence, or importance, of a specific set of issues and to highlight the requirement of designing a sustainable process to meet them. Ng (2012: 448) suggests that the university curriculum is driven by market demands and higher education institutions need to adapt. However, there are tensions here in finding the balance between the different stakeholder needs and priorities.

The needs mentioned by respondents in Table 4.3 centred on the ability to recognise and understand others' needs, managing knowledge and skill acquisition, creating a supportive environment and evaluation of the activities associated with the internationalisations process. The needs were difficult to relate to a specific stakeholder, hence Table 4.3 outlines those that can be associated with individuals (staff and students) in general and the organisation. Although the needs are stated by respondents, it is difficult to determine whether these are a priority and perceived as essential, or are a statement of their wishes and desires. One example of this was recognising the practical need to prepare students for work in their various communities:

> *so it's understanding the nuances (language need, cultural need, religious need) and not compromising the students. (3: page 4: line 58)*

The quote implies that it was important to be aware of the different sets of vocabularies used (the language that we speak, the vocabulary of HE, the healthcare professions and different cultures) and to help students to appreciate the intercultural elements of living and studying and the context of where they will be working. However, it is uncertain whether these are essential needs and should be a priority. What is clearer are the links to the other implications identified in Table 4.3 to manage knowledge and skills, creating a supportive learning environment that acknowledges changing roles and identities and engendering a collaborative feel and promoting working and learning from each other.

Managing knowledge and skills

Many comments were given by respondents about the rationale for gaining knowledge, the type of knowledge that was important and suggestions for modes of learning. The rationale was outlined:

> *It's about recognising that there are different ways of being in the world, and that's OK, it's different, there's not necessarily one way of being in the world which is better than the other. (5: page 1: line 49–51)*

The academic and practical dimensions of the concepts were frequently cited by respondents. Respondents perceived a need for knowledge development of both 'international' and 'intercultural perspectives' and that the process of developing knowledge also aided development of self-awareness, attitudes and behaviours and benefits of interacting with others:

> *[referring to self -awareness amongst people who you are not familiar with] In the sense of culture, in the sense of behaviour, in sense of what one society finds acceptable and another society may not. It's mindfulness. (3: page 3: line 48–50)*

Blum and Bourn (2013) used evidence from a range of projects carried out in UK and Ireland to discuss how global perspectives need to be both relevant to the students' professional development and relate to disciplinary knowledge, in their case engineering and health. Acquiring a global perspective was stated in different ways:

- Understanding our situation in a wider context;
- Making connections between local and global events;
- Developing skills and knowledge to interpret events affecting our lives;
- Learning from experiences elsewhere in the world; and
- Identifying common interests and exploring wider horizons. (Blum and Bourn, 2013: 44)

This would be accomplished by working and learning with and from each other. The outcome is, essentially, developing the ability to understand other people's needs, differences and translating global issues into local and personal implications. Blum and Bourn (2013) suggest that problem-based learning strategies should relate to the core knowledge of the discipline. By giving and searching for more information, learning about the circumstances surrounding the differences and being reflective and critical helps the individual to become aware of the ways of being and the challenges faced. This was similar to Caruana's (2010: 36) suggestion of finding out about cultural differences in knowledge construction. Although Caruana and Spurling (2007) suggest there is a shift in thinking and attitudes, whether this will lead to a transformation of identity is uncertain. It may help merely to reinforce personal identity

through students' sense of self, and who they are, and not provide sufficient social and cultural capital or additional skills for managing social situations that a more direct experience may provide. It could also be argued that adjustments to the curriculum in this way may mean that the curriculum loses its national distinctiveness (Jackson et al., 2012). However Jackson et al.'s (2012) thoughts relate to generic international modules and the label that genericism confers. Jackson et al. (2012: 41-42) point to students having a lack of awareness of the potential for an internationalised curriculum, and it was also found that, on explanation of the intentions, students were enthusiastic about internationalisation.

In the current study, five respondents suggested that integration of an international perspective within curricula was needed and six mentioned the requirement for an intercultural perspective. From the respondents' perspective, development of knowledge and skills for engaging with others happens through direct contact in the classroom or engaging with the community. This also helped prevent the negative effects of not engaging with people from other cultures:

> *It [academic group work] provides opportunities for interaction, the learning with, from and about, sharing perspectives on different issues, political, economic, health-related issues. So I think it's definitely the way forward and encourages scaffolding of learning within a group setting. (7: page 2: line 7-9)*

The premise was to utilise international practices as a context for situating national practice, thereby giving internationalisation more relevance. It was argued that having international and intercultural perspectives places people in a more advantageous position for mobility, should they choose. Thus, engagement with different individuals and communities both within and outside the University was prized, and one respondent believed that everyone could benefit:

> *I think to perhaps really appreciate another culture, another way of viewing the world, or being in the world, you kind of need that emotional connection, that personal connection with it rather than it being an academic piece of work which distances you. (5: page 2: line 24-26)*

The reference to being personal seems to imply that development and acquisition of knowledge would be done in an individualised way, a point made by Brooks and Waters (2010) when they suggest that mobility is very much tailored to the individual. Respondents

in this study suggested that not only could working collaboratively aid sharing and exchange of knowledge, learning transfer and development of important citizenry skills in a two-way process, but that advantages and benefits may be appreciated in patient interactions in healthcare settings:

> *No lecturer could hold every country's foundations of healthcare. So it's them [students] bringing to the table how it is they practice, what tiers of practice they have, what models they use for practice, and then actually getting them to apply the principles that have come across to their particular area. (3: page 3: line 3–6)*

But this presupposes that students know how healthcare works in their own country, particularly if they are new to the profession. It may be something that can be developed as a result of the students' continuing development as professionals and subsequent ability to translate experiences from their own country.

Respondents considered that there were dual effects to be gained from having people from different nations and cultures all around. From a University perspective, the visual effect of student and staff diversity was considered important for how others saw the University and was thought to confer more 'kudos' to facilitate development of collaborations:

> *[staffing profile] that would, for me, talk to me a bit about what is then reflected globally actually in our educational environments. And it would give us a lot more kudos for collaboration and it would enhance our ability to move in that direction more easily. (6: page 4: line 46)*

From an individual perspective there was also the learning effect. One respondent pointed to the potential outcome of diversity of staff and students as contributing to University activities and the development of knowledge:

> *I guess it will attract people to work, to come to [named university] or the fact that it is an international hub. You know, there is a buzz and a sort of uhm.. feeling that if you came here you would find it a comfortable place to work in. People would be keen to hear what you have to say and people would be encouraged to share that with students. Yes, a knowledge exchange maybe. (4: page 5: line 50–54)*

This could relate to the 'capital' that staff bring with them and their input into the programme activities. The benefits that respondents thought to ensue may also be through the way staff can incorporate students' views so that others may benefit from a different perspective. Respondents indicated the need to consider a broader perspective than national or local, and the benefits to be gained from utilising their knowledge in work and daily life and imparting that knowledge and experience.

> *I think it's [internationalisation] about outlook, perspective, curriculum, opportunities, and maybe it's about visiting lecturers as well. And where staff go out, where they go to, what they do and what they bring back and that cascading of knowledge and information and sharing and building. (5: page 3: line 67-69)*

However, the interaction between diversity and knowledge exchange depends on reciprocity and is difficult to tease out. The success of this contribution has been questioned by Knight (2011: 14). What perhaps underpins this is where the locus of responsibility lies and whether there is a shift from the institution to the individual. For one respondent, the locus of responsibility for personal growth was firmly with the individual:

> *We all have personal responsibility to grow ourselves, we can't expect somebody else to come and grow us. (5: 4, line 49-50)*

> *Internationalisation is not something that, you know, that you do when you go on holiday. (4: page 1: line 66-67)*

The intimation of the comments from these two respondents was that the onus was on the individual to grasp the responsibility to learn from others, recognising others' needs, and integrate into the community so as to access, share and exchange knowledge to develop both the individual and others. It was apparent that the intent of programme design was based around the third mission of HE (Soeiro, n.d.) of civic and social engagement within a local, national and wider level. In essence it was perceived by one respondent (3: page 6: line 9) as an empowering and enabling process so that knowledge could be used appropriately.

> *Having the knowledge and understanding of being able to put those [intercultural knowledge and skills] together to be able to use it appropriately in the right settings and the right context. (1: page 2: line 45-47)*

To do this required an understanding of where and how the individual is located in society. Seven respondents mentioned that both students and staff need awareness of the bigger picture, understand there are other ways of doing things and how the influences of global perspectives on health issues, politics and economics translated into local, daily, working life.

> *I suppose the UK healthcare is just one way of doing something and likewise with education that if you broaden the student experience then its gives them an understanding of how it all fits within a big, you know, within a global perspective. (4: page 1: line 40-42)*

> *They [students] are learning about ideas and ways of doing and what is a different way of being that other students from different countries have. (4: page 1: line 54-55)*

This has parallels with Briggs' (2007) comments on professional identity and leadership, where there is a need to understand the environment and people from different angles to appreciate fully the complexity of the interactions taking place. Practically speaking, this might encompass differences in culture and practice, tiers of practice, models of practice and how principles are applied to their particular environment.

In this section so far, managing knowledge is indicated by respondents to be about formulating the constituents and the way these are put together towards an intended outcome. The constituents are the incorporation of international and intercultural perspectives and the rationale is to appreciate the views of others so that individuals and institutions can work together and knowledge is used appropriately. This is underpinned by reciprocity, with the onus on individuals to accrue the benefits of knowledge and experiences. The intended outcomes are an awareness of their location in society and an ability to analyse how they fit into the bigger picture. Part of this is being critical and reflective, achieving an ability to analyse the merits and faults of what is going on around them and make a contribution as a member of that environment:

> *That it's not just about learning, you know, the fundamentals of the discipline that they are studying, or the practice they are going to be going into, it's about broadening horizons, perspectives, understanding and developing that more rounded citizen and, you know, the global citizenship is the buzz word of the moment. (5: page 1: line 52-55)*

It is not just acquiring the requisite knowledge to underpin skills that makes the world more accessible, and two other important aspects emerge from the quote above: critical thinking and global citizenship. In simple terms, being critical in a healthcare context could mean merely being able to analyse the merits and faults of particular healthcare approaches, while citizenship is membership of a community (Dower, 2008: 42) and all this entails. Both have connotations for self-awareness about identity and an awareness of their global, national and local environment, but citizenship is also about taking an active role in development of that identity (Davies, 2006: 8).

Criticality, which Elkin et al. (2005) link with being a global citizen, in a healthcare context is taken to mean the ability to synthesise a set of information and then forming an opinion on how the individual and the client fit into this context, finally analysing how the situation can be used to best advantage. Becoming what Elkin et al. (2005) suggest are critical members of global society is a reflection on how a broader and wider world impacts on individuals, but their views will be both influenced by and have an influence on their experiences as healthcare professionals and as citizens in that community.

Rhoads and Szelenyi's (2011) framework for understanding the typology of citizenship considers it as two intersecting axes, one axis forming a spectrum from individualist to collectivist, while the other spans the spectrum from locally informed to globally informed. Yet what must be considered is that individuals operate with multiple identities at personal, professional and societal levels. Rhoads and Szelenyi (2011: 19) conceptualise citizenry as the rights and responsibilities that fall within three dimensions of society: the sociocultural, the politico-civic and the economic-occupational. They also suggest that globalisation allows new ways of conceiving citizenship that now goes 'beyond traditional boundaries of society and nation-state' (Rhoads and Szelenyi, 2011: 26). Furthermore, it is possible to nurture a form of citizenship that incorporates both local and national awareness with a sense of interconnectedness at a global level (Rhoads and Szelenyi, 2011: 26). This is what Caruana and Spurling (2007: 38) refer to as the relationship between local actions and global consequences.

The challenge for the healthcare student and academic is that their practices are embedded in a national framework, which then has local interpretations, but there can also be differences between national and global practices. The healthcare framework is, by its nature, collectivist but it is not clear whether the framework, being nationally oriented, necessarily means that the thinking behind it is parochial in practice. Professionals engage with people

from different backgrounds and cultures every day. In HE, individuals' thinking (students and staff members) has to span the breadth of local, national and international dimensions, so they are locally, nationally and internationally informed, yet they will also be influenced by other aspects of the programme. The implication for healthcare education is the balance to be found between adherence to national and local healthcare practice and thinking and influencing individuals' motivation and decisions to benefit from a wider knowledge base and to engage or not engage with internationalisation.

During students' courses of study they will be exposed to the individualist nature of acquiring knowledge and skills and assessment performance, the translation of healthcare practice at a local level, and working with and leading other healthcare workers within the institutional culture. As mentioned previously there may be an individualised approach to knowledge and skill acquisition and attitudes to mobility. Understanding how people may assign different levels of importance to citizenry skills, the way they address them and the level at which they address them could be a challenge. Perhaps internationalisation, in a healthcare context, is determined by an attitude of mind that influences the purpose and mode of how interactions, engagements and relationships are conducted with the others in the sphere in which they operate.

The interpretation of internationalisation chosen by individuals and institutions will indicate much about their level of intention, the extent of engagement in the process and their identity. Therefore, much thought needs to be given to this by both the individual and the organisation as not only does it reflect the way in which they wish to operate or function but how others see/perceive them and their attitude towards internationalisation. Dower (2008: 41) suggests that, as a global citizen, all human beings have a moral responsibility to each other, although it is arguable whether it is necessary to take an active role. Six respondents interpreted internationalisation as a reciprocal process of working and learning with and from others for the benefit of all, which is also the central imperative behind the way in which the UK healthcare community operates:

> *On a very pragmatic and practical front it would hopefully ensure that they [students] are more culturally aware and appropriate with patients and able to function in a variety of different settings, should they choose to work overseas. That they have self-awareness and adaptability. (4: page 5: line 37–40)*

The respondent's quote above hints at Veuglers' (2007: 106) three clusters of objectives associated with citizenship. These are 'adapting and discipline', 'autonomy and critical thinking' and 'social awareness' and consequently Veuglers (2007: 107) proposes that there are three types of citizenship: adapting, individualistic and critical-democratic. The way in which these types happen in HE and healthcare deserves consideration. In education the adapting citizen is to do with value transfer and norms, 'individualistic' with choice and one's own responsibility, whereas 'critical-democratic' is associated with cooperative learning, active research and reflection (Veuglers, 2007). In a healthcare education context, it is known that healthcare practice is in a constant state of change and is being continually reconfigured, therefore healthcare professionals must continually adapt their practices accordingly. Those that work in HE have an additional set of challenges as the HE sector is also subject to change. Although the health professional is being empowered through increasing choice and control over individual direction, more awareness is needed to be able to work with others. More critique and reflection is also needed, due to the reformulation and convergence of values through the globalisation process. But in the face of continual reconstruction and expansion of spheres of influence, while the values that healthcare holds across borders may be similar to the norms, they may not be. It brings into question what is valued, so programme design needs to be cognisant of the applicability of different types of citizenship. It could be argued that the apparent separation between the three areas is actually not separable, as Veuglers suggests. The current study respondents emphasised the value of knowledge, community and realising their own potential, so it is proposed that there cannot be conformity to a single philosophy:

> *I wanted to say that my experience in working with international students is how much I've grown as a person. How much I've developed knowledge of individuals and how they approach different people with such courtesy and with such respect. (7: page 7: line 25–27)*

While the intention might be to develop one of the aspects of knowledge, community and personal engagement, there may be outcomes for all three with one or more being developed further. The form of engagement, the level of engagement, and how responsive participants are in the process will be dictated by the participants' (organisations and individuals) perception of the importance of those needs and their circumstances (influencing the choices they make), and their level of entry into the process. The assumption is that active engagement opportunities to learn about others as a human beings, where they have come

from, what life is like, understanding of a different culture, how are they able to practice, is personally enriching:

> *It's enriching beyond words and it should be something that all academics engage with. (7: page 7: line 40)*

Engaging with internationalisation activities and others was thought by respondents to broaden people's thinking, to help them to problem solve and interpret things in a different way and to see the world in a slightly different way:

> *It's almost like problem solving, interpreting things in a different way. (8: page 5: line 6*
>
> *You begin to see the world in a slightly different way. (8: page 5: line 8)*

By doing so they are able to work and operate in other environments:

> *I think we should be preparing us [staff and students] to work outside, to work in a more international agenda, to be able to go to different countries, to be able to practice in different (pause) to feel comfortable with some of the issues that working abroad will throw up, or leading services abroad. (8: page 5: lines 26–28)*

However, there are differences in philosophies, models of operation and emphases in different countries with great potential for clashes of priorities at global, national and professional levels. There is a variety of levels of seeing the world and diversity, so the perceived importance of needs could relate to the scope of an individual's sphere of thinking as a consequence of their personal and professional circumstances. For this reason there is a need to think critically about the lens through which the purpose of internationalisation is viewed. Individuals' spheres of thinking are being extended to encompass personal and professional issues at local, regional and national levels. For some it might link to international issues, so parallels might be drawn with Marginson and Rhoades' (2002: 281) theories for institutions of the 'three intersecting planes of existence' and 'simultaneous significance of global, national and local dimensions and forces'. However, for individuals in healthcare, thinking global would not be the same as acting global. Each may go through the same steps in the process of internationalisation, but the variations in intentions, emphases and goals can change the way in which internationalisation is interpreted and can influence

how that person approaches it and puts it into practice. Therefore their level of engagement may vary across the spectrum of being a consumer, participant, a spectator, a disinterested bystander or an ambivalent/diffident observer; what is unclear from this is what level would constitute citizenship.

Being critical is closely aligned to reflection. In programme design, activities could be arranged to allow people to self-reflect on their perceptions, experiences, the impact themselves and their outlook:

> *Much of what we do is international, but is it international enough? (4: page 7: line 36)*

One participant described the impact as that 'ah ha!' moment that helps students 'move from thinking to it becoming their being'. Being self-reflective is part of personal growth and moving forward and nobody can remain untouched by different cultural perspectives in what is now a smaller world. Gee (2001) comments that having the ability to talk about oneself, the actions and new knowledge gained also helps in the formation of academic identity. Lieff et al.'s study (2012: 214) shows that a multidisciplinary faculty development programme for health professional and health science educators has the potential to help participants both question and solidify their attitudes and beliefs. However, the effectiveness of the development programme was difficult to quantify because terms were ill-defined and moveable. Nonetheless, it raised questions about whether people could be internationalised enough.

Some authors, such as Soderqvist (2002) and Deardorff (2006), have suggested gaining competencies for the various aspects of internationalisation, like intercultural skills. This is a rather normative process but it must be recognised that skills have to cover a wide range of expectations:

> *About looking at experiences of students, enabling opportunities for them to learn with, and from, and invite each other to develop intercultural awareness and competence. To enable them to be more employable anywhere in the world. (7: page 1: line 39-40)*

While responsibility lies with the organisation to deliver a quality university experience and a programme that helps students to gain knowledge, participants suggest that the individual

must be ‘fit for purpose’ as deemed by the requirements or benchmarks of their respective organisations:

> *[success is] It’s about whether the students are fit for purpose. It’s about whether our curriculum is fit for purpose. (8: page 5: line 59-60)*

However, because of the diversity of expectations in different countries, competencies are unlikely to be configured in a way that fits or are appropriate for all people. The capacity for an individualistic approach needs consideration and it reinforces the theme in section 4.1 of individuals adopting a pragmatic and instrumental approach and the need to engage and make the most of opportunities and to participate in activities available both in the University and clinical settings:

> *It needs to be made clear, if we are going to look at internationalisation, what are the set of competencies that we feel are important. (6: page 5: line 16)*

It was acknowledged by respondents that it was difficult to define what constituted cultural competency and level required:

> *Competence is moveable. (6: page 5: line 26)*

or whether a measurement could be found that could deem whether someone was competent and so competencies may not present a consistent benchmark of attainment:

> *I don’t know if anyone ever is deemed competent. What are you going to measure them by? (3: page 3: line 70)*

Because of potential differences in interpretation of competency, respondents felt that this would:

> *Require collaboration with other universities to determine the competencies of internationalisation in HE. (6: page5: line 20)*

In summary, in the section on managing knowledge and skills, respondent views progressed from outlining the constituents to commenting on the way they were used to deliver the outcome of citizenry. Citizenry was felt to involve critical thinking and reflection to help

broaden thinking and transform problem solving through being able to see and interpret issues in a different way. Respondents pointed to the value in terms of personal development that resulted from it. Subsequently the issue of competency emerged and whether this was attainable due to the difficulties that ensue as a result of determination of a definition and characteristics to measure it. The implications were that to manage knowledge and skills, develop citizenry and resolve the issue of competency would involve creating a supportive environment to work together and nurturing a network of contacts to support the activities.

Creating a supportive environment for learning and working together

The concept of internationalisation encompasses many dimensions. Those with which people identify may influence the way they subsequently engage with both the people around them and the surrounding environment. Lieff et al. (2012) suggest that the environment influences the mind-set of students and their sense of belonging or being connected, but also they conceive the nature of that environment. Thus, the establishment of a positive, supportive environment for working and learning together has important implications for the organisation:

> *We need to make them feel supported, when they are on the programme, because we have to recognise that they are away from their families, their friends, familiar settings, (pause) and I think we need to recognise that those are real issues that we need to try and address and think ahead before they even get here. We need to provide those support mechanisms to facilitate that transition [to a new country]. (7: page 3: line 49–52)*

The intent was to facilitate integration of students and staff within the University community in such a way that differences are accommodated without them being made an issue.

> *People from other nations are integrated, and our nation is integrated with other nations, seamlessly without differences being evident. So there is a learning culture about each other but each other's needs are without them having to be made special cases. (1: page 6: line 27–29)*

Respondents suggested that internationalisation and integration involved everyone:

> *You are part of a community; you are not someone who is just visiting. (6: page 6: line 12)*

While this type of integration reinforces the feeling of being part of the community, learning together and working together, it does not address how individuals find their position within that environment. This is reflected in respondent comments about facilitating a sense of being connected with each other and the institution, and about creating some cohesion that helps build resilience against the negative effects of feeling disconnected:

> *One of the aspects that international students struggle with is feeling of isolation so need to have more social activities and support that integration within a community setting trying to develop a friendly, open, welcoming, supporting environment to international students to flourish really. (7: page 2: line 37–41)*

This raises implications for the way that students are encouraged to participate and how membership, or citizenry, within the HE community can be influenced:

> *It is having the patience and building into your core lecture time, your principal lecture time whatever, your facilitation, the ability for people to process and engage with what is being said to let them be part of the team. (3: page 3: line 22–24)*

The degree of engagement will also be influenced by what individuals value and whether the environment they are in is perceived as positive or a negative:

> *Pitching it [course content] right that you have engagement from the people. (3: page 3: line 63)*

> *Well I think it's important for both [home and international students], that we mix and that we have cross-pollinisation…. I think it is really important because it gives and much broader depth to their experience, depth and breadth to their experience here at the University. (2: page 1: line 59–61)*

Part of the process of engagement is about establishing a system of networks and reciprocal relationships, both individual and corporate, to help develop and support students, staff and the work of the institution. Maringe and Foskett (2010: 4) suggest that 'many universities are

reviewing their graduate attributes in line with globalisation imperatives'. Yet different sets of attributes could be expected by different universities, countries and professional organisations. However, in terms of healthcare, the presence of a number of normative drivers cannot be ignored. The nature of healthcare courses drives its students and staff to achieve a performance that satisfies the benchmarks of relevant national and professional bodies. This may be reflected in the normative tenor of some of the responses in the study, due the respondents' membership of these bodies, and the pragmatic and instrumental approach respondents take to attaining a level of performance. This approach may be rather at odds with some of the value-based conceptions adopted in the literature of harmonisation of values, behaviours and attitudes. There is also a tension to be resolved between the approaches adopted by healthcare organisations and that taken by HE institutions in the UK. Billot (2010: 709) has suggested that 'institutions transform in response to government driven policy and funding directives so academics have to respond', so the mind-set and outlook of the organisation can also be important. At an institutional level within HE, an operationalising strategy would tend to take precedence over any individual's perceived or expressed needs. In a healthcare context, there is the added influence of healthcare priorities, so for the Faculty there will be a balancing of the negotiated priorities and adaptation, if necessary. Moreover, designing programmes and associated experiences may require development of a long-term vision and people who are informed and specifically trained to guide the delivery of internationalisation. Respondents pointed out that the quality and sustainability of activities to develop experiences needs to be considered and that these activities might be developed through networks:

> *Probably aligning itself [the University] with one or two projects where you have an enduring relationship with it so that you can build on. (4: page 5: line 6-7)*

Six respondents suggested that having robust networks and development of stronger links with different parts of the world provided both opportunities and benefits. These were gaining knowledge by learning from other people who have experience in implementing internationalisation initiatives, creating and nurturing contacts with different people and as a system of support for both implementation and expansion of internationalisation:

> *I think there are so many areas where we are encouraged to broaden our knowledge and share our knowledge and get involved in collaborative work, and certainly collaborating with other universities, would be a really good starting point in terms of the internationalisation agenda. (6: page 2: line 68-69)*

Partnerships and collaborations are not only formed externally to the institution but within it. Creating and nurturing contacts and networks would help to determine the core attributes, knowledge and skills needed, and was felt by study respondents to extend an individual's sphere of influence. However, respondents felt that whichever guise networking took, it needed to be implemented in a way that was sustainable, measurable and achieved a tangible impact so that it could be viewed as an effective use of resources.

In summary, creating a positive, supportive environment required effort on behalf of the institution and students. Firstly it was about influencing individuals' degree of engagement with each other to engender a sense of belonging and integration so that needs and differences were accommodated without being an issue. Through integration, there could be a free exchange of knowledge and ideas. Respondents felt that networks for developing knowledge and support were very important to help this. Networks could be created both internally, between people and groups within the institution, and externally with community groups outside the institution and other universities, both at home and abroad. It was felt that any partnerships and collaborations that were made need to be robust and effective, showing some tangible impact.

People

Warwick and Moogen (2013) suggest that a successful strategy is achieved by virtue of strong commitment that is visible at senior level. Foskett (2010) concurs and acknowledges that strategic leadership is needed at senior management level. However, respondents in the current study suggested that leaders closer to the implementation were needed for strategic leadership to function well. If leaders are not visible, the followers may feel that they lack close direction and become disengaged and demotivated as a result. Respondents identified that a suitable person would have the skills to lead the process of implementation and a team to support it:

> *Need a champion, somebody who is passionate about it and who is prepared to listen to all the reasons why we can't and why we shouldn't [implement initiatives] and challenge them and move people forward. (5: page 3: line 1–2)*

> *It's important to have the right group of people to do that job [directing and implementing internationalisation]. People who are able to have a nice sense of how different cultures like to communicate. (6: page 3: line 17–18)*

Finding and leading an appropriate way forward for internationalisation, respondents suggest, requires a review of the practices of students and staff, the pressures that impact on academics and how they identify with their roles:

> *Because our roles are multiple; but to do a really good job of something that is a bit of a new way of conceptualising the way we engage with others I think it requires a certain amount of people… depending on how you want to approach the first stage of any internationalisation. (6: page 3: line 37-38)*

A reconsideration of the different roles academics hold and the constraints surrounding them may help in understanding how internationalisation may be facilitated. Within HE and healthcare an individual has the occupational roles of teacher, researcher, administrator, clinician, leader and team worker, in addition to roles outside the institution. Quigley (2011: 25) outlines the various pressures under which academics work such as changes in funding, work and workload, an emphasis on teamwork, increased internal and external surveillance (leading to increasing scrutiny and micro-management) and administrative roles. These roles are inextricably linked to their sense of identity. Identity is shaped by pressures, culture and practice norms (Archer, 2008; Billot, 2010) and how the person makes sense of the workplace. Rew and Campbell (1999: 10) suggest that individuals have a number of identities, including personal and professional, and that 'a particular identity is situationally defined in the course of social interaction'. Rew and Campbell (1999: 11) recognise in addition that social interaction 'can also have the power to impose identity'. Understanding peoples' roles and identity is part of being able to understand the surrounding environment, the way others work within it and how to work with them. The continual change experienced in occupational or professional practice means that the roles individuals take on may be subject to change. To prevent disconnection it is essential that the individual undergoes a process of critical reflection to connect and reconcile their professional, personal and social identities (Trede et al., 2012), so they may be in a position to understand the identities, roles and behaviours of others. Yet Briggs' study of leaders (2007) suggests that, while leaders often understand their own roles, they rarely go beyond this to understand the roles of others fully. In a situation of change, it is important to understand how the changes impact on others and the effect they have on working relationships.

If individuals have to assume a role different from that which is familiar or expected, or social circumstances impose limits on their capacity to adapt, or manage, the way they are seen and portrayed may cause discomfort or conflict with their framework of identities. One example

was the imposition of the label 'international student', thought by one respondent to do a disservice to this group:

> *So I think sometimes labelling an aspect of our student body as international may sometimes do them a disservice. (3: page 5: line 14)*

International students will have an identity that is personal to them, but may go from a previously well-defined role in their own environment to the manufactured identity of an 'international student' superimposed in a different environment by the University, staff and other students. The implications of labelling an individual as an 'international student' may hinder rather than assist their full integration into the academic community. This is echoed by Turner and Robson (2008: 109), who suggest that labelling 'might be discriminatory and can encourage active divisions between groups because of their perceived differences':

> *A value university would be one who could observe a student as part of the student body rather than sometimes… as something very special that may prevent them actually truly integrating with the whole student body. (3: page 5: line 19–21)*

Rew and Campbell (1999) suggest that identity is multiple and may be manifested in different ways. If the HE society and environment shapes how identity, or identities, are used, then sometimes society and the environment may give rise to a negative reaction when there is a clash or disconnect with the identity of self. The drive to be international and to incorporate an international outlook in the University strategy imposes yet further complexity and change in their familiar roles, so the notion of academic identity is not fixed: it adapts to the environment. This is very much along the lines of a functionalist approach (Eraut, 1994) and provides challenges for both staff and students. For staff, this is recognised by Billot (2010) who describes a disconnection between the requirements imposed on the academic in the roles of teaching, administration and research, and what academics may perceive as their professional identity (the internalisation of occupational values and norms (Archer, 2008). One example is the potential clash of self-identity with the identity of an international student, if imposed by those within the institution. This can be true of any staff subjected to the same circumstances and was outlined by one respondent's suggestion that:

> *Well I think it's important that we view ourselves as international. If that's what the University wants us to do, which it clearly does, then that's the mind-set that we need to adopt. (2: page 5: line 34-36)*

The driver was that the:

> *Way of the future is integration with every plane trip the world is a smaller place….to stay national is very small-minded. (1: page 6: line 35-36)*

The intimation of each of these above comments is that it is not only important to act international but to think international. Respondents suggested that training (for staff to support students, and students to support their activities) is the key to help people through these changes:

> *You know it's how we get the right people to go about it… but the training is crucial. You cannot move forward without that I think. (6: page 3: line 54-55)*

In professional healthcare practice, changes to the healthcare professional requirements may be a source of discomfort to the individual as they are forced to adapt further and to transform their framework of identity. Identity may then reflect the mixture of HE and healthcare organisational cultures and communities of practice within them and highlight the need to look outside. As has been suggested previously, it requires understanding of oneself, thoughts and actions and ability to cope with change. Realising one's personal potential or self-actualisation, according to Giddens (1991: 78), is based on being true to oneself and personal growth is dependent on the ability to shed the constraints that stop us from understanding ourselves and making the most of the opportunities available. The external image of personal and relational identities thus becomes constructed, shaped and adjusted according to that person's needs and wants so that it gives the patina of authenticity and legitimacy.

In summary, respondents identified that a 'champion' was needed and a group of people to support the internationalisation process. Perhaps successfully navigating the pressures posed by HE and healthcare requires reconsideration of roles and identities as the changing needs and expectations impact on how the individuals sees themselves, and others. Individuals are adopting identities contingent on the situation, and the challenge is to manage multiple identities.

Evaluation

The respondent comments suggest that evaluation includes both quantitative and qualitative elements. A quantitative element to evaluation of the process is inevitably included in terms of the ranking, collaborations, numbers of students, their results and achievements to enhance the reputation of the Faculty:

> *So our reputation and numbers of international students will increase. You know, we move up the league table, basically. (2: page 5: line 51-52)*

In contrast, the qualitative measures that respondents mentioned were to increase reputation and profile, and give a better sense of values, forward and outward looking approaches, investment and seriousness:

> *If we come back to the marketisation of the sector then I think it is reputation, its standing, its influence. You know there are lots of possibilities for really enhancing that impact factor in terms of being able to see where we should be taking our research and the way that we can have a positive influence of what's going on not just locally or nationally but internationally as well. (5: page 5: line 15-18)*

> *On a micro level, anything that individual students have learnt from our programmes that they can actually demonstrate to us how they have used that within their country of origin to enhance their healthcare delivery, or indeed their management of their services. (6: page 6: line 24-26)*

While students' achievements beyond graduation contribute to their own and their institution's reputation, it is challenging to evaluate whether the achievements are directly or indirectly attributable to institutional, staff or student learning activities. Study respondents have previously mentioned topics such as where staff members travel (countries), what they do and the knowledge, information and values shared with students and staff, but these are difficult to quantify. Further suggestions were to look for indicators to scope the University's affiliations, established links, collaborations, sphere of influence outside the UK and evaluating projects where they have sustainable enduring relationships that are built upon and show some tangible impact. The IMPI project (Beerkens et al., 2010) put together a set of tools and indicators used across the world for self-evaluation and benchmarking yet, as they

point out, this shows only a limited part of reality. The IMPI project stresses the importance of a personalised approach to collating data and its interpretation, and so a common understanding of the consequences of internationalisation will continue to be contested.

In summary, internationalisation as a process is seen to be about ensuring alignment of all parts of the process. The alignment is made more explicit through recognising needs and benefits and then configuring the important building blocks of managing knowledge and skills, a supportive environment, people and evaluation. The link to the definition of internationalisation is that this supplies an overarching statement of the institution's intentions and informs the way in which the needs and building blocks are put together to deliver the intended outcomes and benefits. However, what must be realised is that time, circumstances and pressures will affect what the needs are, what building blocks are used and in what way. Managing knowledge is about finding the appropriate formulation of international and intercultural perspectives so as to appreciate the views of others and facilitate working together. This is underpinned by reciprocity and the ability to be aware of locating oneself within the bigger picture. It is felt that this would help to broaden thinking, and transform problem solving through being able to see and interpret issues in a different way. A positive, supportive environment is needed to influence individuals' degree of engagement with each other to engender a sense of belonging and integration so that needs and differences are accommodated without being an issue, and networks for developing knowledge and support are considered vital.

4.2.3 The Process of Putting Internationalisation Together

The superordinate theme of putting internationalisation together encompasses the reasoning or intent behind the process and its mechanism. A rationale is considered important as this is a statement of how the institution discerns the needs of stakeholders and links them to the intended outcomes and benefits of internationalisation. The mechanism is concerned with putting in place a suitable process of internationalisation to deliver these outcomes through consideration of how the stages of the process flowed. Developing a rationale for the chosen approach is a starting point of the process:

> *Maybe there is something about just doing that horizon scanning, what are the opportunities, being open, being receptive and then doing a sit down and thinking about how realistic it is. (5: page 5: line 74 – page 6: line 1)*

Rationale and sense of purpose

The rationale behind the institution's internationalisation strategy articulates how the blend of outcomes and benefits suits the institution, the direction of internationalisation and methods for achieving it are converted into a clear, cohesive vision for moving forward:

> *So a vision would need to be quite clear and how that disseminates down through the different layers. (4: page 3: line 15-16)*

Three respondents felt that, to create a sense of purpose that is needed to permeate through the different layers to allow all to buy into the overall vision:

> *There has to be a clear strategy behind what you want to achieve. (4: page 3: line 13-14)*

Having an underpinning reasoning process and rationale was thought by three respondents to be crucial to communicating the way forward and embedding fundamental values:

> *It is a values thing so it would be embedding it in the fundamental values and principles in the way the faculty functions. (5: page 5: line 31-32)*

The challenge for the institution and the individual, in practical terms, is the compromise between deciding what is and what is not valued and how this is put into operation. Hence, as previously mentioned, an ability to recognise and understand stakeholders' needs from a variety of perspectives is required, mindful of the plurality of cultures (Otter, 2007) and the potential for value systems to be in conflict and competition. What was valued was the personal development benefits, for both staff and students, in terms of personal growth, enrichment and employability skills:

> *There a sense of satisfaction that no words can describe. So it is very much about enriching not just the curriculum but our lives. (7: page 7: line 46-47)*

As a result, as mentioned in section 4.2.2, students and staff would be enabled to problem solve and interpret the world differently and acquire the skills to work in a variety of settings. The natural progression would be that this way of thinking becomes part of that person's thought processes and allows them not only to step into a culture and use knowledge

appropriately in their daily life in a multitude of healthcare environments but ultimately to make a difference to society:

> *I think what the true outcome would be is a student who has come into this university, has been facilitated, empowered and enabled. To absorb the education that's offered to them, the facilitation processes that have been offered to them, that they been able to take that information and that they are actually able to make a difference wherever they go back to. (3: page 6: line 9-12)*

For the institution, the outcome was put in terms of throughput and output:

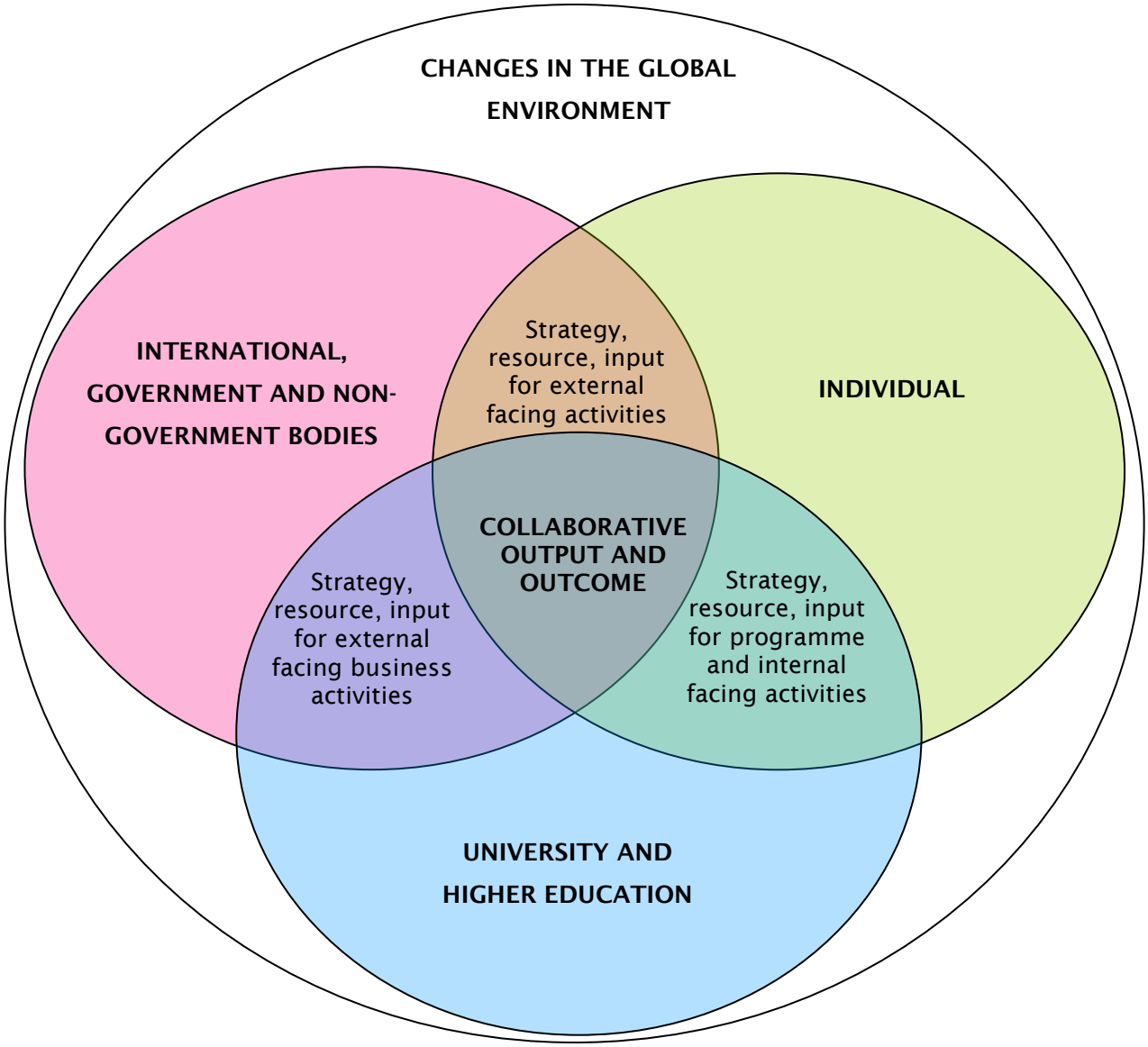
> *As a university we are measured by throughput and outcome, or we have 'x' amount of firsts, we have done this, that and the other. (3: page 7: line 50-51)*

This has further implications and informs decisions about what input, resources and activities are utilised.

How it is put together

Aligning and delivering the needs, the curriculum and activities requires communication between stakeholders and an understanding of the complex inter-relationships and influences at different levels of the process. This is depicted in Figure 4.6 as a Venn diagram model.

Figure 4.6 Stakeholder interactions in the internationalisation process



The diagram draws on the ideas of Deardorff (2006) and shows an outside ring encircling all the interactions that influence the HE community; these are represented by 'changes in the global environment' that exert pressure on the three inner interlocking main stakeholders. The level of input, resources, and activity shared between stakeholders is shown by where the stakeholder circles intersect and by how much they intersect. The central portion where

the three stakeholders overlap represents the output and outcome of internationalisation. When changes are made in one aspect of the model, because of the inter-relationships and influences there are tensions and adjustments created in other areas. If one or more of the stakeholders decides to engage to a lesser extent, then the intersecting portion (outcome) diminishes accordingly and internationalisation is not optimised.

This simplified view of the interaction between individual, university and national and international organisations has parallels with Marginson and Rhoades' (2002: 291) hexagon of organisational reciprocity within their '*glonacal agency heuristic'*. Government and non-government bodies are the dominant field and influence the direction of internationalisation strategy at university and HE sector level. The interaction between the university and the student reflects the operational and practical delivery of internationalisation. There is reciprocity, but the degree of intersection between each of the partnerships is dependent on the level of interaction, the strength of reciprocity (common activities and engagement) and alignment with each other's values and vision for moving forward.

Internationalisation involves change but, while small changes may not be noticed in HE and healthcare environments, other changes can be more significant and unpredictable (Trowler and Knight, 2000; Davies and Nutley, 2000). In such circumstances the strategy will often be reviewed (Romanelli and Tushman, 1994). In the current study, the way people interact and engage is influenced by the rationale for internationalisation, the way they view the bigger picture, the interplay of external and internal drivers and being involved in the process. Two respondents recognised that motivation to engage was subject to choice:

> *Creating some space and prioritising the space for actually looking up and seeing the world and the opportunities that are out there and actually stepping out into them. (6: page 6: line 21-22)*

> *Unless you find something that is pertinent to you that you can take on board and you can make work for yourself, you won't engage. (3: page 5: line 51-52)*

Working with others and the stakeholder interactions were built upon understanding the different needs (Table 4.3) and engaging and communicating, through networks with the wider world, to find out information:

> *We are not just talking about what goes on here in the UK but we are also making those links to the wider world. (6: page 4: line 19)*

The thought processes involved in understanding the changes that were happening in their wider picture used a loop process to make and review decisions:

> *It's not just students' perspectives that will change its staff perspectives, horizons, understanding and that you know becomes a feedback loop... because then we're more alert to issues. (5: page 4: line 22–23)*

> *As our knowledge and understanding develops we might change our minds and think actually we could have done [taken an alternative approach] (6: page 5: line 60–61)*

The comments appear to indicate that the thinking, decision making and actions have flexibility and that the process is repeated, or iterative, to account for the way people interpret and act on their own changing contexts or new information. This way of thinking is reflected in Leask's (2013a) process model for internationalisation of the curriculum and Boddy's (2000: 284) study of implementing IT systems that views 'major change as a non-linear, interactive process in which outcomes are shaped by the way people interpret and act on their contemporary and historical contexts'. In terms of organisational development, Grieves (2010: 91) suggests that 'the empirico-rational approaches seek a linear progression' in contrast to 'normative re-education approaches, typical of organisational development, [which] are cyclical'. Two respondents reinforced this view of discounting the linear process:

> *It's complex. I don't think it's a linear process. (8: page 6: line 4)*

> *It's like a cycle that makes more sense in the outcome. (6: page 7: line 60)*

This latter respondent indicated there was reference to ensuring that the intended outcome was met and also made reference to alignment of the different stages:

> *A very clear understanding of what internationalisation is would help the student at least be aware of it so that at different points that they can check that it is happening for them. And I think that's really important. (6: page 6: line 62–63)*

This comment also alluded to planning, the rationale and thinking about the different points of the process and how they linked together. As another respondent commented:

> *I'd be thinking about what is this possibility, where could that lead to, you know is there. Can you see a way to make that happen or can you at least see a sketch of something?' (6: page 5: line 73-74)*

Several references were made to the process, starting with the outcome to understand the rationale and working backwards between the stages to gain an overall picture and plan what was needed:

> *The outcome is almost the starting point for me. To know how we manage it and how we do it. We have to know what we are hoping to achieve from it. (8: page 6: line 26-27)*

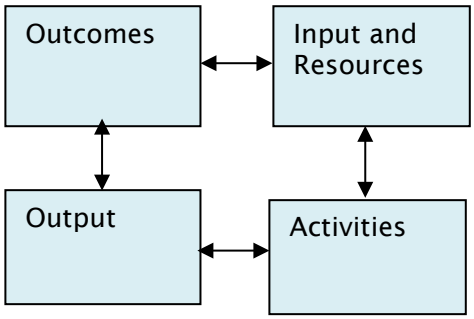
> *You know we work backwards from our end product to know what went into the mix. (8: page 6: line 41-42)*

Once this was done it allowed the process to move forward and to commence putting internationalisation in place:

> *Putting in the work to kind of go through the different steps necessary to start the work. (2: page 5: line 66)*

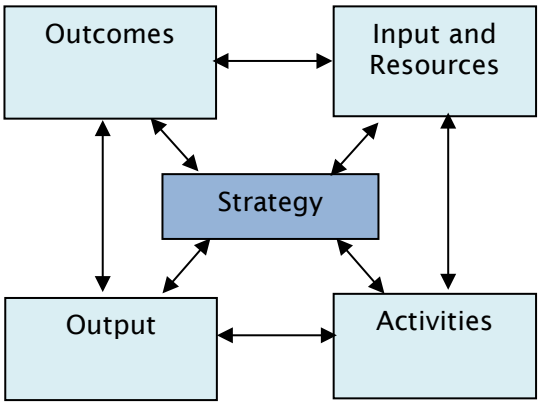
De Wit (2002) (see section 2.2.3) suggests re-examining the dimensions of internationalisation and this is done in terms of needs, requirements, outcomes and benefits and discussing the implications for the programmes and Faculty. One respondent suggested that internationalisation is conceived as an enabling process in a way that benefits everyone; as one participant put it, *'the process enriches the whole community'* in an approach where people not only work together but learn together. While reference was made to a cycle, there is insufficient data to justify this. Deardorff's (2006) stages offer a way of categorising the information and the components of internationalisation, but the current study indicates that the process is a complex set of stages that inform and influence each other (Figure 4.7).

Figure 4.7 The process suggested by interviews



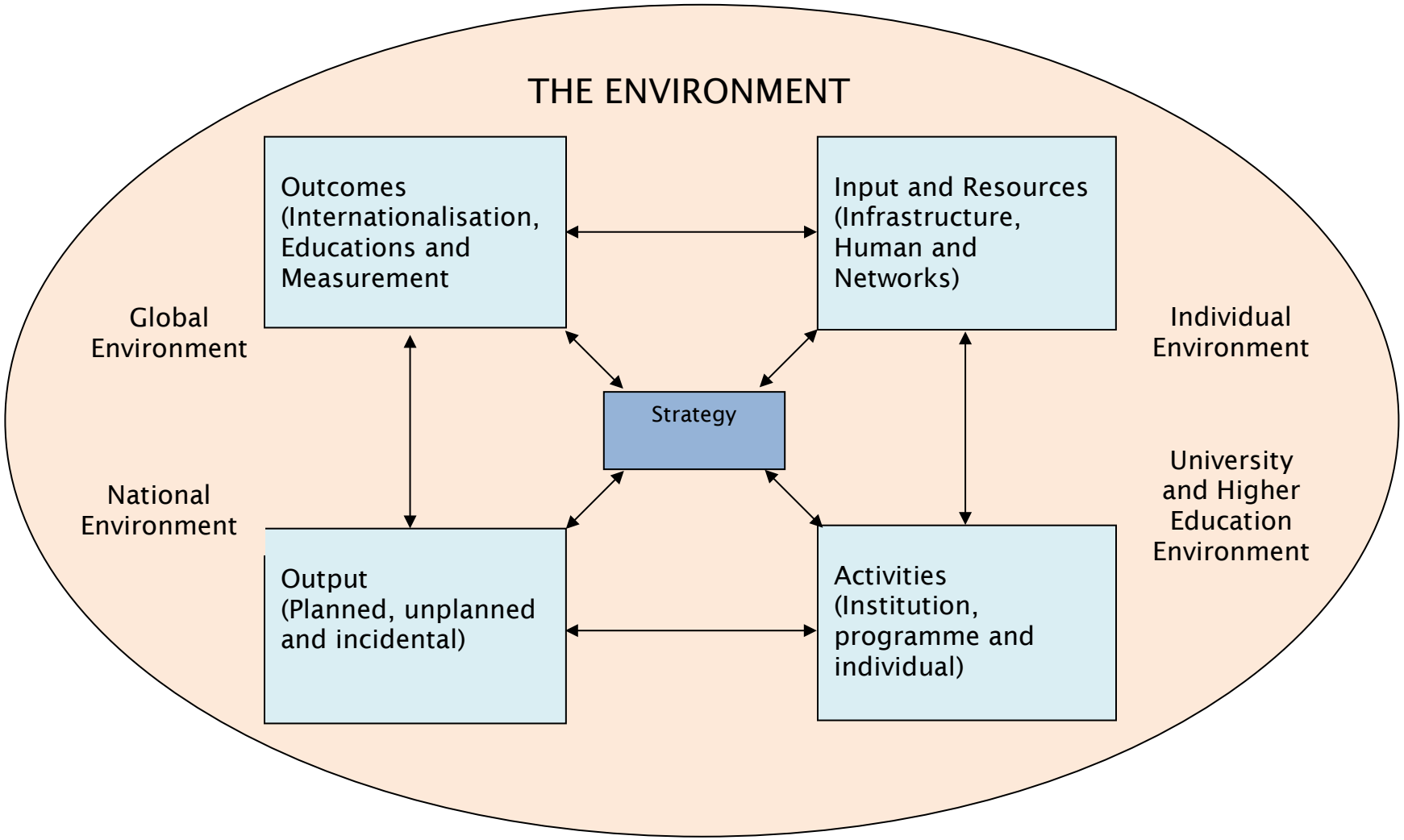
The framework stages are checkpoints in the process where respondents start with the outcome. The activities and output produced are then considered to determine whether they are compatible with the desired outcome. The activities themselves are dependent on the input and resources that are committed to them. If input and resources are constrained, this may influence the extent of activities that could take place, the output they produce and the level of outcome that can be expected. As well as the stages being interconnected, respondents' comments appeared to suggest that thinking takes place backwards between the four stages and continues until the most feasible and realistic balance, or compromise, is achieved and the decision is made to change or not change. Because of this the process is conceived as iterative and Figure 4.8 depicts how strategy is determined.

Figure 4.8 The process links with strategy



As two participants commented, the process is complex and needs to be fluid and adaptable. Because of the inter-relationships of the stages, the model allows the viewer to conceive how a compromise of balance, or configuration of components, can be achieved that satisfies the needs of the stakeholders and makes best use of the inter-relationships between the various components. This is depicted in Figure 4.9 overleaf.

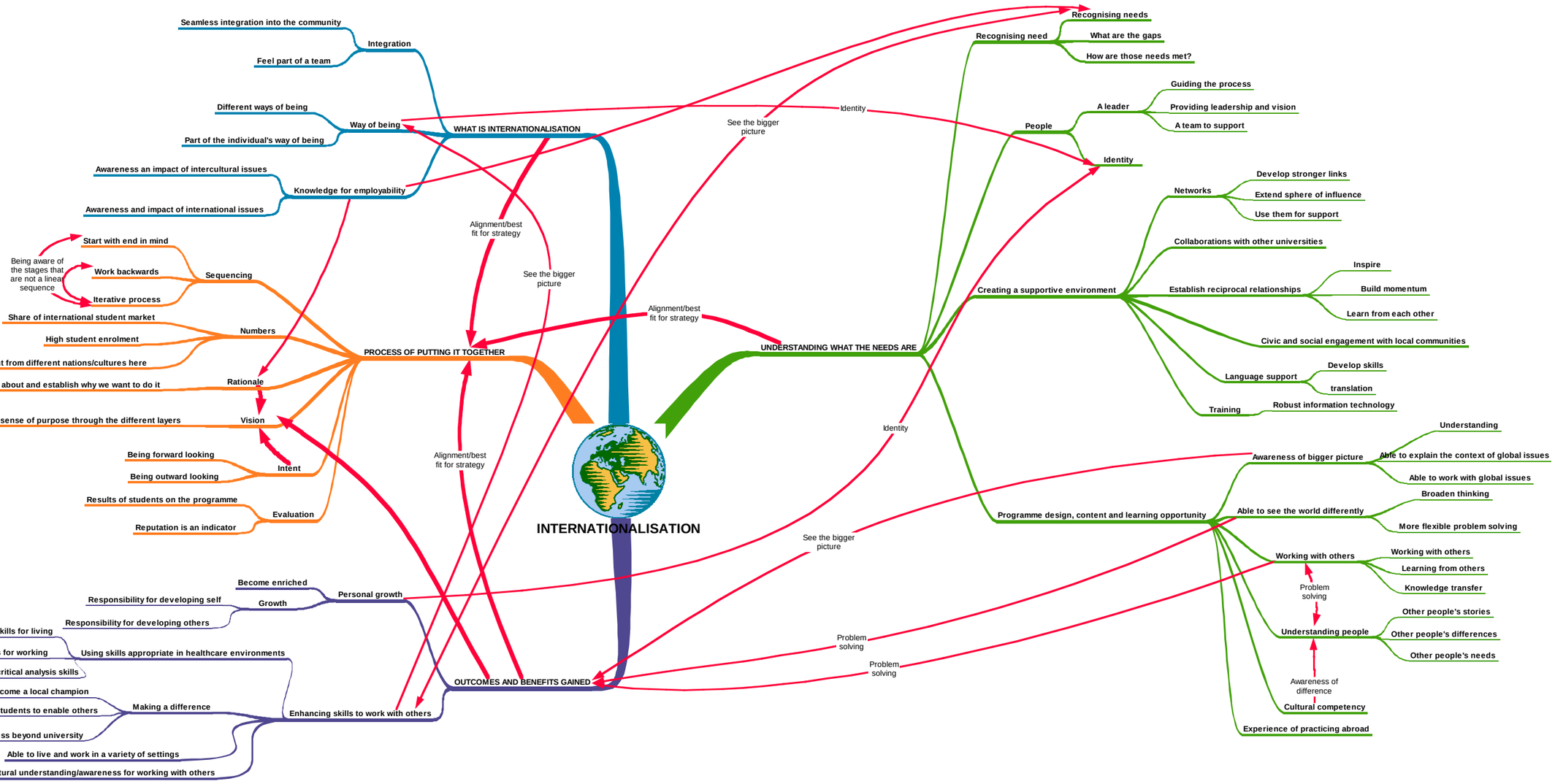
Figure 4.9 The model of internationalisation and its links with environmental factors



LEGEND

Red lines indicate interlinkages and where influence is exerted

FIGURE 4.10 - CONCEPT MAP OF THEMES AND LINKS EMERGING FROM INTERVIEWS



The interviews show that there are overarching issues at global, national, HE and individual levels that influence the process. Accordingly, the objectives of internationalisation may differ with their position at these levels, yet there is no template for interpretation. Foskett (2010) points to some institutions having a lack of a holistic strategy for internationalisation, with engagement being financially driven. This study points to the need for strategy being a well-considered process that takes account of each stage (input, activities, output and outcome). For the respondents, the controlling factors and drivers for the process are resources, access to finance and how the University responds to the surrounding environment and external influences, and how internationalisation is conceived. Warwick and Moogen (2013) point to a need to adapt resources to meet the international student requirements, however other stakeholders need to be considered. The strategy would affect each of the input, activities, output and outcome stages so it is central to the process of internationalisation and represents the most appropriate balance and alignment between outcome, input and what goes between. Warwick and Moogen (2013) recommend a systematic approach to formulating strategy and the ability to adapt to the changing external environment. Figure 4.9 outlines a dynamic model or framework of thinking that can be responsive to the changing influences of global, national, organisational and individual's circumstances or needs. It is designed to be iterative so that the quality of 'fit' of the central strategy, or what is feasible, realistic and valued by the organisation and other stakeholders, can be continually refined and adapted to prevent problems arising from any disconnect.

Archer's (1998: 375) morphogenesis model is applicable here. The model views the interplay between social structures and actions happening in three phases: structural conditioning (structures that influence behaviour), sociocultural interaction (interplay between structure and agency) and structural elaboration (the outcome of maintaining status [morphostasis] or transforming and changing [morphogenesis]). Like internationalisation, sociology operates on several levels from international to individual (Brante, 2001: 178–179) and the organisational changes associated with internationalisation are complicated by different structures and multiple contexts that are possible at any one time. Internationalisation is conceived in three ways in the current study: a structure that traverses levels, a set of actions and a process. Internationalisation is seen as a structure and 'pattern of aggregate behaviour' (Porpora, 1998: 339) through the incorporation of an international and intercultural perspective across the institution. It also forms a strategically determined set of intended actions designed to put this into operation. Figure 4.9 sits within Archer's (1998) interaction stage and links them all through being a process of agency.

Emirbayer and Mische (1998: 970) refer to agency as 'the temporal-relational contexts of action'. 'Agency is indeed continuous' (Maccarini, 2011: 100), and Emirbayer and Mische (1998: 970) suggest it reflects 'the interplay of habit, imagination and judgment' and is constituted of 'iteration, projectivity and practical evaluation'. Archer (2011: 64-65) refers to moving backwards when analysing the interaction stage to understand the 'motivation' and 'strategic action' taken and, having identified the key factors, reversing again. Because of the way respondents indicated that the stages were interconnected and influenced each other to bring about a balance between them, Figure 4.9 reflects the ongoing pattern of review and modification of thought involved in making sense of, and interpreting, the environment around them. This influences their decisions about whether change needed to be made (what Archer, 2003, refers to as stasis or genesis). Respondents did this by exploring the influences of different structures (policies, regulatory requirements or relationships) in the environment around them, imagining future opportunities and possibilities and determining appropriate actions, what engagement is required and how congruency may be achieved between the structures and the set of actions (strategy) necessary to deliver their desired outcomes. Archer (2003: 132) calls this the 'internal conversation' and the stages in Figure 4.9 reflect the complexity of the thought patterns, and internal conversation, referred to by respondents when analysing their situations. For study respondents, agency is embedded (Delbridge and Edwards, 2013) and it is up to the individual whether agency is used to perpetuate routines and practice, through pre-conditioned action, or fully exercises the individual's capacity for adaptation and unconditioned action. This goes some way towards explaining why some individuals are content with morphostasis and others seek change (Mutch et al., 2006).

The model in Figure 4.9 captures Leask and Bridge's (2013) four conclusions about internationalisation of the complexity of the process, the multiple allegiances, working with others and the interaction of external factors. In applying the model for the individual, the external factors are represented by the global and national environments that can place academic and professional pressures on the programmes. As individuals become more aware of the pressures, conditions and the effect of others in their environment, this may affect how they allocate their input/resources and how they engage and put energy into the outputs and outcomes. Being able to work with the constraints the environment may impose depends on the individual's ability to understand themselves fully, the influences of others within their surrounding environment, and the interaction and consequences of the conditions within their sphere of working and living. Heightened awareness means being better able to use conditions and others to the best advantage, hence being more creative in thinking and in formulating their strategies. It means using two-way processes to find a balance

between the input, activities, output and outcomes appropriate to them. The strategy for internationalisation then tracks back to the concept of internationalisation used.

4.2.4 Summary

A concept map of the themes and links emerging from the interviews is provided in Figure 4.10. The results of this study exemplify the thoughts, words and intended actions of the participants at that moment in time. They are described under the titles of conceptions of internationalisation, constituents of internationalisation and process of internationalisation. The process is then structured into a model of operation.

The essences of conceptions of internationalisation are:

- Integration;
- Having a broad international and intercultural perspective;
- Facilitating people becoming critical about how they fit within a broader and wider world, and why national/local departments of health operate in the way they do;
- Ability to use intercultural knowledge appropriately in daily life;
- Developing the skill sets and abilities to adapt to a changing world;
- Understanding the impact of local and global change, of different approaches and belief systems, of different ways of being, of international spheres of thinking and functioning;
- Absorbing cultural experience; and
- Enabling students to enable other people they come in contact with.

The constituents of internationalisation are:

- Understanding needs and developing a programme that incorporated an international and intercultural perspective that matched with their needs to be able to work in a variety of settings and that had appropriate activities to deliver it;
- Creating a supportive environment for working and learning together;
- Developing networks, internal and external to the University, to work and learn with and from others in an atmosphere of reciprocity;
- Having a lead person and team to guide the process;

- Helping develop a mind-set that considers and understands the environment, the wider picture, and others within it, and are able to use this to locate themselves in the sphere in which they operate; and
- Enhancing skills for working with others.

The essence of the process is that:

- Stages are interrelated;
- Direction of travel is cyclical and not linear; and
- Strategy balances the input and resources available, the activities they engage in, and the output and outcome within the pressures and tensions in their external and internal environments.

From the respondents' comments, the process is complex and a simple model is insufficient to describe all the internal processes that happen. The iterative model proposed in Figure 4.8 gives an overview of the cyclical process and the model is flexible to show that all the stages are interrelated and, by capturing all the elements that are mentioned in the study, help to account for tensions in the system.

5. Conclusion, Reflections and Implications

The aim of the research was to understand staff members' conceptions of internationalisation and the implications for its implementation within the Faculty to inform a programme of internationalisation and the changes this entailed. Research questions associated with this aim were: 'What are the staff's conceptions of internationalisation within the Faculty of Health Sciences?'; 'How do staff conceive the constituents of internationalisation?'; and 'What are the implications for delivery of the internationalisation process within the Faculty of Health Sciences?'. The results from the Phase 1 questionnaire and Phase 2 interviews exemplify the thoughts, words and intended actions of the participants at that moment in time.

5.1 What are the Staff's Conceptions of Internationalisation within the Faculty of Health Sciences?

Internationalisation, in a HE context, was considered both in terms of a process and an outcome and seen to be about learning to work across social and cultural differences, exchanging good practice ideas in education on an international basis and promoting a 'feeling of belonging' to the University. This required the ability to understand the surrounding environment, see different perspectives and translate global issues and practices into national and local situations. Consequently, citizenship was seen as being wider than national, but responses were divided over whether people considered themselves as 'European' or 'global'.

The final outcome, for individuals and organisations, was viewed by respondents as integration where people were able to situate themselves in the 'bigger picture'. To undertake the process, it was suggested that there was a need for an awareness and appreciation of culture, the impact of economy and the environment, embracing other ways of knowing and being, and cultivating a wider awareness of global health, international and social issues. Underpinning this was the requirement to develop skill sets and abilities for the changing world and the ability to be critical. This would enable students to enable others by being adept at translating how global issues impacted on national level healthcare policies and intentions and how they are cascaded down, interpreted and enacted at a local and individual level and using their skills appropriately in daily life.

5.2 How do Staff Conceive the Constituents of Internationalisation?

The intended outcomes of internationalisation were to prepare students for employment, within a bigger picture at home or abroad, and for staff members to become better teachers. The required building blocks were:

- Recognising and understanding the needs of others;
- Managing knowledge and skills and being able to situate oneself in the surrounding environment;
- Creating a supportive environment for teaching and learning and feeling part of the HE community; and
- Evaluating activities.

The label of internationalisation helped to give the process prominence.

For the institution it was about recognising stakeholders' changing needs and understanding the links to the ensuing outcomes, benefits and implications for the institution. Respondents thought having a sense of purpose across the University and putting support mechanisms in place was needed to help plan the way the building blocks of internationalisation were put together to create a good university experience (learning, working and living in the University), for working and learning together.

Internationalisation was seen as everybody's business and respondents were thinking in terms of the wider aspects of health and social care and the professional approaches adopted in client management. They considered that individuals adopted a pragmatic and instrumental approach focussing on developing skills for employment. This approach viewed how healthcare processes, beliefs, economy, environment and social attitudes are interwoven in their impact on the individual and healthcare services provided both nationally and locally. So self-awareness and reciprocity are considered important to underpin this through making the most of working with, and learning from, others and having a sense of culture and behaviour so that knowledge is used in the right context.

A supportive environment was needed for successful integration and to reinforce the feeling of being part of the HE community, but would not address how individuals situated themselves within that environment. The intent of the programme design was to manage knowledge through collaborative learning opportunities based around the

third mission of HE of civic and social engagement. Respondents considered that activities that promoted a sharing of perspectives on different international and intercultural issues, healthcare practices and structures of practice would help individuals develop a sense of culture, behaviour and location in their environment. To make this effective, individuals required the ability to think critically about the knowledge gained and how it was applied. Another requirement was that individuals developed a wider sense of citizenship through broadening their horizons, perspectives, and understanding. Helping people acquire the requisite knowledge to underpin their skill bases was felt by respondents to make the world more accessible.

It was also felt that attracting and developing a staff and student body with diversity influenced how others perceived the University. Respondent comments implied that by enhancing diversity within the institution more kudos would be conferred on the University and that this would facilitate development of collaborations. Respondents indicated that the process is reliant on the people involved, how they worked together as a team and how they developed wider reciprocal networks for learning and support. Robust reciprocal networks and stronger links with different parts of the world for collaboration were required to provide opportunities and benefits for learning from them, as well as a system of support. This would help create a mind-set in those people in the University who engendered not only a sense of belonging and being connected (Lieff et al., 2012) but a sense of personal responsibility to understand the wider picture, the environment in which individuals operate and others within that environment. It was identified that 'champions' were needed with the skill to lead the internationalisation process, with a group of people to support them.

Evaluation was considered important in two respects. The first involves measuring the status and reputation of the University. The second is measuring the societal effects of internationalisation through demonstrating, in a healthcare context, that wherever graduates go their learning is used to make a difference by enhancing healthcare delivery and service management. Other constituents of internationalisation are mostly associated with specific implications for pedagogy. These are finding ways of teaching and learning in the best way, how to create an international ethos, preparing students and staff sufficiently for an international work context and a changing environment. However, these constituents were only covered superficially by respondents. What were covered in more detail were the implications for delivery.

5.3 What are the Implications for Delivery of the Internationalisation Process within the Faculty of Health Sciences?

Internationalisation is seen as critical to University success, therefore what needs to be done and how it is done warrants thorough consideration through University processes (Leask, 2003). The process of internationalisation is complex. Although these activities already existed as part of overall University activity, assigning the label of internationalisation has helped to confer more status and gravitas to associated activities that otherwise may not have been given the time, thought and effort required. The present study has identified some implications for support and delivery in both these aspects.

Respondents anticipated difficulties in different levels of language, organisational pressures, time and funding. Other areas mentioned were that individuals needed to reflect an understanding of differences in professional regulation, statutory requirements and the professional benchmarks for education and practice as a basis for incorporating world health issues. Concerns were also expressed by respondents that a narrow perspective of internationalisation should not be adopted and that design of programmes ought not to forget the individual.

Fundamentally, the internationalisation strategy was about recognising needs, establishing a rationale and principles for what you want to achieve and being discriminating about what you do, and do not do, in addressing the identified needs. The challenge was to find a way of adapting to changing contexts while achieving an alignment of the various stages of the internationalisation process and accounting for the different layers of stakeholders and their needs (Figure 4.6), preventing any disconnection between them. Respondents in the study talked about how the building blocks of internationalisation were put together to form a process. Some were very specific to healthcare knowledge, skills and delivery, whereas others represented groupings of issues.

In Huisman and van der Wende's study (2005), they grouped internationalisation issues into the building blocks of structure, participants, goals and technologies. Concern was expressed by respondents about ensuring the quality of experience including the programme design, activities, learning opportunities and incorporating appropriate evaluation methods to monitor the activity in each of the stages. The difficulty was that

the model used by Huisman and van der Wende (2005) seeks to cover too much with each of the building blocks. Sometimes it is useful to categorise the components of the process more accurately and make the distinctions between them clearer, to allow the individual or organisation to see where they are in the process and to refine their approaches. More groupings could be considered to contribute to an underpinning rationale for the direction taken to address needs.

Institutions and individuals found the best fit and balance between the pressures and tensions in their external and internal environments, the input and resources they have at their disposal, activities they engage in, with an output and desired outcomes that are both realistic and feasible. The model of the process of internationalisation proposed by Deardorff (2006) (Figure 2.1) offered a succinct, structured way of categorising the information and the components of internationalisation. However, its linear nature was assumed to commence with the input and end with the outcome, which made it inflexible. The respondents suggested these stages were interrelated in the cyclic framework (Figure 4.7) proposed and, because the changing nature of the external and internal pressures affected each stage of the process, both strategy and the effects of the environment in which the HE institution operates (Figure 4.9) were incorporated. While there was an inevitable sequence, with points of entry and egress, the process forms an iterative cycle that moved in both directions. The modified model shown in Figure 4.9 captured the pressures, the conditions that surround it and the effect of others in their environment. The external environment was constituted of the overarching issues that influenced it at different levels (global, national, HE and individual). Conceiving the process as rolling and iterative meant that the influences on output and outcome may be further refined. The interrelationship of the process is a progression of Deardorff's model and means it is adaptable, to account for the needs at different layers and the impact of individuals and to allow for alignment between the various stages. The stages can also be used as signposts, to recognise a person's situation within the process and to assist in achieving a balance in strategy. Strategy is central to the process. It is a statement of an institution's reaction to internationalisation, how it recognises and understands the needs environment, from the individual to the international arena, underpinned by its concept of internationalisation. The result is a compromise position attained when the resources, input and activities are balanced against the tangible benefits and the profits accrued, and how the institution manages and develops the process further.

5.4 Implications for Practice

The outcomes and potential actions suggested by the current study are outlined in Table 5.1 and aligned with the stages of internationalisation.

Table 5.1 The outcomes for students, staff and institution and the potential actions related to other stages of internationalisation

OUTCOME		POTENTIAL ACTIONS		
		OUTPUT	**ACTIVITIES**	**INPUT AND RESOURCES**
PROGRAMME DESIGN	Situating oneself in the surrounding environment Understand the impact of global issues and cultural issues	Managing knowledge and skills Developing self-awareness	Developing opportunities for cultural and international experiences Developing opportunities for mobility and working with different local communities	Mechanisms for recognising others' needs Utilising the students' experiences Training programmes for preparing staff/ students
	Making a health impact by enabling students to enable others	Using skills appropriately in daily life Broadened understanding and recognising different ways of being	Develop activities and sustainable projects for gaining employability skills for a global world Problem solving and translating global influences into local contexts and actions Develop systems for evaluating impact of student learning	Creating a rationale for activities Creating global scenarios to develop reflection and critical thinking skills Building in time
FACULTY AND UNIVERSITY CULTURE	Create a supportive environment	Feeling part of the HE community Encouraging engagement Facilitating teaching and learning Creating an effective	Developing internal and external networks for resources and support Promote reciprocity Curricular opportunities to discuss and learn about different approaches Supporting people in their changing roles	Establishing mechanisms for gaining information regarding others' needs Establishing appropriate communication routes Facilitating the transition into a new environment

		community		
OUTCOME		**POTENTIAL ACTIONS**		
		OUTPUT	**ACTIVITIES**	**INPUT AND RESOURCES**
DEVELOP STRATEGY	Creating a sense of purpose	Embedding values and sense of purpose	Communicating the vision and strategy through the layers	Clear vision and strategy Recruiting a network of leaders/teams for support
	Networks and partnerships	Developing international research, teaching and learning experiences and support mechanisms	Research and teaching collaborations Developing sustainable community projects to produce an impact on society	Extending connections and linking with different local communities

The implications from Table 5.1 fall into three categories: programme design, Faculty and University culture and development of strategy.

Programme design will involve configuration of activities to develop a broad international and intercultural perspective, to situate oneself in the surrounding environment and gain skill sets for the changing world. The types of content and ways of facilitating learning were put forward by respondents, for instance using problem solving scenarios that translate global issues into local actions. The internationalisation process model in Figure 4.9 could help students to translate the impact of global issues by providing a framework for understanding situational contexts and decisions made. Developing robust networks with other institutions was suggested to be useful in further developing skills and experience, deciding on levels of attainment, providing support and extending the institution's sphere of influence. The study findings therefore have implications for developing networks, partnerships, mobility programmes and making project work with communities sustainable to both enhance the skill development of students and staff and with an enduring and measurable health and social impact.

The implication for Faculty and University culture is creating a supportive environment that underpins what is attempted in the programme design. Support is needed to facilitate the transition into a new environment and to enable people to absorb cultural experiences, and promotes a mind-set of working with and learning from others. Engagement and support of both staff and students is fundamental to making internationalisation work. The stakeholder interaction model (Figure 4.6) may help understand how communication, appropriate training and mechanisms for gaining information on different stakeholder needs may help engagement.

The process of internationalisation is a complex set of interconnected stages with strategy at its centre. The way strategy is developed will be guided by the chosen definition of internationalisation and the intended outcomes, the activities that are decided on and the resources that are committed. Internationalisation is not cost-neutral and is influenced by policies, processes and requirements at supranational, national, sector and university levels. Because of the iterative and interrelated nature of the stages, the outcomes may have to be modified as the input and resources at the Faculty's disposal are balanced against the available activities and the output. Planners may use Figure 4.9 to help understand how alignment may be achieved between the elements of strategy, the University's aims and objectives, and institutional capacity and capability. For the University, a clear definition and vision needs to be created that allows the Faculty to encompass any disciplinary nuances and values communicated

through the layers of the University. A network of leaders and support teams is needed to communicate the vision, to provide the energy and motivation necessary to take the internationalisation process forward and to support staff in developing programmes and outcomes that align the disciplinary and University aims and values. Leask (2013b) and Jones and Killick (2013) provide templates for achieving this.

The consequences for evaluation arise from the process being multifaceted and personalised to the institution. Evaluation cannot be undertaken by simple measures; it has to be seen as a whole and a series of measures is needed that considers all aspects such as those collected by the IMPI project (Beerkens et al., 2010) covering business profile, performance and value, but accepting that they show only a limited part of the real picture.

5.5 Limitations of the Work

The limitations of this study are that it deals with a single particular faculty in one particular university. The global reach of internationalisation is such that much more research would be needed to understand fully how internationalisation works. Further study would need to cover different disciplines and different nations.

It might be considered that respondents in the study's Phase 2 interviews were self-selecting, that is, they were those interested enough in internationalisation in some form that they offered themselves as candidates for interview. Therefore, the evidence presented is not a representative sample of healthcare professionals as a whole. It could be argued that respondents used a scattergun approach, mentioning all the elements they could think of to outline the breadth of what internationalisation is and how it is constituted. It could also mean that they perceived the research to be testing their knowledge in some way and so managing their impressions to the researcher. Study respondents could also be viewed as not having a particular standpoint and attempting to be 'all things to all people', or that they had not thought about it deeply. The researcher's interpretation is that it was the result of their healthcare professional backgrounds and wanting to do the best for all people, giving a useful outline of the key implications for the Faculty and healthcare programmes.

It must also be acknowledged that respondents' interview comments will be time limited and can only provide a snapshot of what they thought then. It was notable that each of the study interview respondents held similar views, however each projected a different emphasis in their responses by focussing on either an overview and strategy

implications or choosing to elucidate the practicalities and nuances of delivery. It could be speculated that this is due to their roles or experience, but it cannot be substantiated because details regarding the person's role or their previous internationalisation experience were not established. Future studies may examine whether those with more experience focussed on the nuances of delivery rather than an overview, or whether this could be attributed to respondents' strong sense of support and responsibility as part of their healthcare or education professional traits.

5.6 Claim to Originality

This thesis is genuinely the work of the researcher and builds on knowledge in the area of study. The claim to originality is mostly based on its empirical contribution and some contribution to theory. The empirical contribution rests on building more knowledge about the process of internationalisation and how the building blocks are put together. The study findings contribute to theory through a development of the existing model proposed by Deardorff (2006) and, within the limitations of the current study, providing a critical reflection on the rationale and impact of thinking about the process in this way. The work reflects on how the building blocks that underpin the process are interdependent and how they might be assembled to enable the process to be managed in an efficient and effective way.

5.7 Options for Future Research

There are some unanswered questions arising from this research that could form the topics of future study. The study pointed to recognising and understanding needs, but it is not known what they are or their consequences. The following lists several pieces of work that could contribute to this and move the internationalisation process forward for the institution:

- A core piece of work to explore institution, staff and students' needs, what influences and determines those needs, how needs change over time and what influences a change in needs. What would be interesting is to collaborate with another institution overseas to compare and contrast needs and experiences.
- Subsequent research could move the understanding of needs further by finding out what individuals value and how the needs translate into the 'pushes and pulls' that influence mobility and engagement in internationalisation.

- A separate piece of work, that is linked, is to examine the expectations of the institution, staff members and students, how expectations change over time and what factors lead to or influence these changes.
- Another piece of work would be to map the international and intercultural knowledge, skills and attitudes that students and tutors feel is necessary, what employers want and which are required by international professional bodies that accredit courses for recognition of qualifications. It would also be useful to undertake an international comparison.

This small study indicates internationalisation to be a cyclical process, but it is uncertain whether other faculties would view it in a similar way. One piece of work would be to understand what the building blocks comprise from the perspective of other faculties of the University and whether they consider that the process of internationalisation moves in the way this study suggests. There is also scope for moving outside the UK and considering the perspectives of other institutions in other countries.

5.8 Personal Reflection

The course of a doctorate is often described as a personal journey or discovery. This has been true both from a personal and academic perspective and many lessons have been learnt along the way. It was important to select a topic that could be sustained throughout this period, because I appreciated the amount of work and the challenges others had met in trying to complete research on a part-time basis. Consequently I was prepared for some frustration and disruption associated with competing claims on my time. However, contrary to what was anticipated, from the outset the research has been both enjoyable and stimulating and, because I had planned my topic ahead, it worked with my eventual work roles. I realised early on that, while the research was a major challenge, given sufficient planning it was only challenging if you allowed it to be. Planning produced its own lesson that the process was a series of compromises in getting the work done and achieving the best possible result. As an outcome my skills in critical thinking and designing a study are much improved and I now try not to be too ambitious and attempt too much. Unless care was taken in reviewing the work regularly, there was a great risk of adding areas of interest and being side-tracked.

The research itself has been a learning experience. It has made me question my views on how I conceive reality and truth and, consequently, has made me reconsider how I view current research and the way I approach the patient narratives and how they tell

their stories in the clinical situation. The route of the research did not change, but there were occasions when it was important to stop and review. One example was when analysing the first two interviews; I found that the initial analysis using a descriptive coding system did not make sense when the data was reduced and then expanded. It was decided to review the raw data and coding system. Reading more of the literature about coding, I found that an allied in-vivo coding system that drew upon the words in the transcripts was both appropriate and more flexible. On changing the coding system it became clear that there were other, different levels beyond the descriptions that were not apparent during the first iteration and the threads through the data became much more apparent, and then needed merely refining.

Given what has been learnt through this research process, there are several things that could have been done differently. The first relates to the design of the study and using a questionnaire as a frame of reference. Conducting a pre-study of selected interviews to supplement the reading of the literature surrounding the field of study and theories within could have revealed alternative research questions or methods for conducting the study. The second concerns the framing of the core research questions for the interview. The study used questions that were phrased in a way to capture the experiences of the external, or organisational, whole and the shared meaning regarding the wider dimensions of internationalisation in order to understand why, and how, the systems within the internationalisation interacted. An alternative would have been to phrase the questions to explore more of the internal, or individual, whole and the way the experience of internationalisation was lived so as to capture other features of agency, actions, relationships, and feelings as described by Ashworth (2003). The third area that could have had a different approach was the way research questions were used. Putting questions in a schedule in tabular form meant that the researcher was frequently referring to the schedule to keep track of questions and notes made about responses. This meant that attention was focussed on the schedule and structuring the notes, rather than on the interviewee, which may have been disconcerting for them. Aspers (2004) suggests that an alternative way is to put questions in the form of a map with gaps in between. The idea was that as topics arise they can be inserted into the gaps in the ‘map’ and this enables both the interviewer and the interviewee to see what had been covered, what will be covered and the connections that the researcher is making. This could also make the interviewee feel more part of the data collection process. There were other more practical considerations related to timing the study with periods of heavy workload and the time taken to conduct the various stages of the study. It would have been beneficial to explore what time-saving software could be used and how the appropriate coding systems could be determined.

Despite its limitations, this study has answered the research questions and brought to light some interesting issues about how the process works, how the building blocks of internationalisation are assembles and their implications for practice. Taking into account my reflections, what has been done and the criteria for validity, the results show a study that was undertaken consistently. The results are coherent and the appendices show the chain of evidence that underpins them. The results show sensitivity to the context in which they were gained and provide a reflection on their impact, as well as some options for progression of the work.

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Appendices

Appendix 1 – Email Response to Participants Chosen for Phase 2 Interviews Version 1 (16/03/2012)

Ethics Reference: 8238

For participants who have supplied email contact details for inclusion into the Phase 2 Interviews, the following content will be used:

Dear ……,

Re Internationalisation Study: An investigation into the issues around staff's conceptions and experiences of internationalisation and the implications for its delivery in higher education

Ethics number 8238

Some while ago when Phase 1 of the above study was being conducted you supplied your contact details for potential inclusion in the Phase 2 interviews. As a result of the sampling for this phase you have been selected for the interview stage. If you are still be willing to participate in this part of the study I would be very grateful it you could respond to this email so that we can arrange a convenient time to conduct the interview.

Yours sincerely

Steven Ryall
Research Study Lead

Appendix 2 – Phase 1 Questionnaire

This questionnaire seeks your views on Higher Education's (HE) outlook on international contexts, referred to as internationalisation. It uses tick boxes to look at the importance you place on this. Open questions are also offered to further explore your ideas. Please answer all questions.

Section A: Demographics (Please place a tick in the appropriate boxes to indicate your age, gender and background)

Age (years) Gender Background

21-30	31-40	41-50	>50		Male	Female		Nursing	Midwifery	Occupational Therapy	Physiotherapy	Podiatry	Other (please state)

Section B: How do we view ourselves and the University? (Please tick the box in each line that reflects your views)

In your work situation, how important is it that…?	**Irrelevant**	**Unimportant**	**Important**	**Very important**	**Don't know**
…*you* operate within a *local/national* healthcare context and identity?					
…*you* operate within an *international* healthcare context and identity?					
…*you* develop skills to be used in *national* practice?					
…*you* develop skills to be used in *international* practice?					
…*you understanding of* how different cultures impact on work and social practices?					
…*you* develop *abilities to work with* different cultures?					
…*your* actions and decision making are influenced by inter*national* issues?					
…*your* actions and decision making are influenced by inter*cultural* issues?					
…*you* develop your awareness of inter*national* issues?					
…*you* become more aware of inter*cultural* issues?					
How important is it that *the University…*?					
…develops inter*national* issues/perspectives in some *teaching* programmes?					
…develops people's inter*cultural* awareness in some *teaching* programmes?					
…develops inter*national* issues/perspectives in its *research* training?					
…develops people's inter*cultural* awareness in its *research* training?					
…develops people's skills/abilities for working *in the UK*?					
…develops people's skills/abilities for working *outside the UK*?					
…develops *support services* for students/staff from different countries?					
…develops *support services* for students/staff from different cultures?					
…contributes to debates about *national* healthcare issues					
…contributes to debates about *international* healthcare issues					

Section C: Internationalisation, in HE, is understood in different ways. (Please tick the box in each line that reflects your view)

How important are each of these in your understanding-…?	**Irrelevant**	**Unimportant**	**Important**	**Very important**	**Don't know**
…developing research collaborations across UK borders and internationally					
…developing business collaborations across UK borders and internationally					
…exchanging good practice ideas in education on an international basis					
…undertaking work exchanges and placements overseas for staff and/or students					
…participating in international HE events or conferences					
…helping to develop skills for working and practice in different countries					
…learning to work across social and cultural differences within own country					
…a presence of students from different countries of origin on campus					
…promoting a 'feeling of belonging' to the University for diverse students and staff					
…increasing support for diverse students/staff					
…including an inter*cultural* dimension to university teaching and services					
…including an inter*national* dimension to university teaching and services					
…opportunities for students/staff to learn about inter*national* issues/contexts					
…people consider themselves as having 'European' or 'Global' citizenship					
…internationalisation is an opportunity for additional source of income					

Section D: The Higher Education (HE) experience (study, work and life associated with being at university)

a) What, if any, international policies or professional practice issues impacting on HE needs to be thought about? _____

_____

b) What do you foresee are the implications for HE in preparing students and staff for working internationally? _____

_____

c) What teaching or other activities could be used to contribute to internationalisation of the HE experience and/or curriculum?_____
_____

d) What resources would be needed to support these activities mentioned in question c)?_____
_____

e) Is there anything you want to say about internationalisation within the University? _____
_____

END OF QUESTIONNAIRE

Thank you for completing this questionnaire

Contact Details for Interview Stage of Study – If you are willing to participate in this stage please fill in your details (these will be detached from the questionnaire

NAME……

I would like to participate in the interview part of the study on Internationalisation

Ethics No: 8238

I can be contacted by (please fill in most appropriate):

Telephone ……

Fax ……

Email ……

Appendix 3 – Preamble Script for Interviews

Introduction

My name is Steven Ryall and I am the Lead Researcher for a study about internationalisation. I would like to thank you for agreeing to take part in this interview for Phase 2 of the study.

You have previously been sent an information sheet but I also have a copy here for you to read if you would like. Would you like to do so before we continue? The purpose of the interview is to ask for your views about internationalisation, what your concepts of internationalisation are and your thoughts on the implications of internationalisation for the Faculty and the University.

The interview will be taped recorded and the researcher has put into place a number of procedures to maintain confidentiality within the study. In Phase 1 questionnaire data was preserved as far as possible by using numbered questionnaires and although participants were asked to supply contact details if they were willing to participate in the interview stage these were detached from the questionnaires and kept in a separate facility so that identification could be prevented. For Phase 2 each interview will be given a number code and any parts of the interview data that could potentially be identify the speaker will be removed on transcription by the researcher to maintain confidentiality. The intention is to publish the results and care will be taken when writing up responses to prevent identification. Although this is possible from the perspective of those outside the Faculty I must alert you that there is a possibility that some responses may be thought to be attributable by internal staff. At the end of the study, questionnaires and recordings will be retained and stored for a period of 15 years in line with the University guidelines. If you are happy with this explanation, and happy that it is recorded, can I ask that you initial the relevant parts of the consent form and sign and date it to indicate that you agree to continue with the interview.

Thank you. Now we will commence the interview.

It is recognised that universities work in many contexts and it is claimed that the university experience (including study, work and social activities) can develop many skills for working nationally and internationally.

Subsequent Interview Questioning

As per protocol.

Close of the interview

That is all I would like to ask, is there anything you would like to add? I would like to thank you for agreeing to be interviewed and sharing your views. Just for your information about what will happen now. The recording will be transcribed verbatim by the researcher and a preliminary analysis made. When this is completed a copy of this preliminary analysis will be sent to you and you will be asked to confirm if this reflects your views. You will also be offered the opportunity to add further comments as you wish. After the conclusion of all the interviews and analyses the study will be written up and will be published.

Many thanks for your time.

Appendix 4 – Internationalisation Semi-structured Interview Schedule for Phase 2

Introduction – Researcher introduces themselves, confirms that participant has seen information and talks through the purpose and format of the interview. Confidentiality issues are clarified, a consent form is completed and consent is given for recording

Preamble – as per script in Appendix 3

Topic or Question	**Prompts**	**Notes for Aide Memoire/Thoughts**
Dealing in an international context is often referred to as internationalisation and there are many different ways to understand it. Can you tell me about what internationalisation means to you? Notes:	The overall results of the questionnaire outlined that the there are various perceived aspects of internationalisation such as learning more about: different cultures; global healthcare issues; international healthcare systems and issues/differences. • What are your thoughts?	

You mentioned that internationalisation could include …… Tell me about any activities you think would help develop these (academic, research, business)? Notes:	• The questionnaire results outlined learning activities such as group work, role play, international seminars. • What do you think of these? • What does the Faculty do already? • Tell me about how this might it better be delivered? • Can you tell me more about how these might help internationalisation?	
What might influence whether these happen or not? Notes:	• What sorts of things would be needed to put in place to support it? • The questionnaire has mentioned constraints such as time, workload, finance, people. What do you think about limitations/constraints for internationalisation? • What sorts of further resources would be needed – IT, 'energy' to lead developments, a champion, training and development?	

Preamble: I would like to ask a few questions in relation to both staff and students

How would you recognise as the characteristics of an 'international' Faculty with respect to staff? How would you recognise as the characteristics of an 'international' Faculty with respect to students Notes:	• The questionnaire mentioned institutional activities such as increased mobility, exchanges or development of a global care module. • What do you think university/programmes should do? • What might be the expectations of an internationalised university experience? • How do networks help? • How could networks be developed?	
Tell me about what you think should be the outcome of internationalisation for the staff? Students? Notes:	• There are tensions in terms of national v. international; individual responsibility v. someone else's; understanding v. competence; segregation v. integration into HE life. • How should staff and students view themselves and their role?	

Tell me about what you think should be the overall outcome of internationalisation for the Faculty/University? Notes:	• How should the Faculty view itself and its role? (National v. international; understanding v. active participation; degree of support internal .v outside and continued) • There is a tension between dependency on finance/business needs versus altruism. What do you think about this?	
Tell me about the key factors that indicate success Notes:	• For the staff? • For students? • For the Faculty?	
We have talked about internationalisation in terms of what we put in, the activities we do, the resulting output and its impact. Some see it as a sequence where one leads into another, what are your thoughts? Notes:	• If different, what should we consider first? • Why in this way? • Are there anything that is missing/ anything that influences how the sequence works together?	

Anything else – Are there any other comments you would like to make or expand on further? Notes:

Closing Thank you for your time in agreeing to be interviewed.

After transcription an initial analysis will be sent to you with a request to confirm if this reflects your views and add further comments if necessary.

The study will then be written up.

Appendix 5 – Consent Form (Version 1)

Study title: An investigation into the issues around staff's conceptions and experiences of internationalisation and the implications for its delivery in higher education

Researcher name: Steven Ryall

Study reference:

Ethics reference: 8238

Please initial the box(es) if you agree with the statement(s):

I have read and understood the information sheet (insert date/version no.) and have had the opportunity to ask questions about the study ☐

I agree to take part in this research project and agree for my data to be used for the purpose of this study

1) Questionnaire ☐
2) Interview ☐
3) Taping of interview ☐

I understand my participation is voluntary and I may withdraw at any time without consequence ☐

Name of participant (print name)……

Signature of participant……..

Name of Researcher (print name) ……

Signature of Researcher……..

Date……

Appendix 6 – Internationalisation Study Participant Information Sheet

Study Title: An investigation into the issues around staff's conceptions and experiences of internationalisation and the implications for its delivery in higher education

Researcher: Steven Ryall

Ethics number: 8238

You are being invited to take part in a research study on internationalisation in the Faculty and University. Please take time to read the following information carefully and talk to others about the study if you wish. The information sheet tells you the purpose of this study and what will happen to you if you take part and information about the conduct of the study. Please ask the researcher if there is anything that is not clear or if you would like more information. If you are happy to participate you will be asked to sign a consent form.

What is the purpose of the study?

Globalisation affects everyone and has a partner term, internationalisation, which is used to describe the way different people engage with globalisation. As each organisation attempts to unpick the influences of this process it is clear that they are not only having to respond to national and international changes but also changes in the needs, demands, values and expectations of their customers and sourcing services. Two service sectors that exemplify this are healthcare and education, which are linked together through provision of training. The challenge for HE is how to prepare themselves, their business and their graduates for communicating and working in such diverse environments. Consequently, instituting a programme of internationalisation or setting a strategic direction is not a simple process. It requires knowledge of the business environment and a good understanding of the different needs, values, expectations and constraints within it but it is not clear what factors will influence how the Faculty conceives and engages with internationalisation and what will be its implications.

The main aim of this study is 'to investigate the issues around staff conceptions of internationalisation and the implications for its delivery in higher education' but also to

understand the input, resources, activities and issues that may influence the University's and Faculty's practice.

Why have I been chosen?

You have been chosen as a member of the academic, research and managerial staff at the Faculty of Health Sciences at the University of Southampton and, because it is part of the University and Faculty strategy, you are part of the internationalisation process.

Do I have to take part?

No. It is up to you to decide whether or not to take part. This information sheet will explain about the study to enable you to decide whether to take part. You are still free to withdraw at any time and without giving a reason. A decision to withdraw at any time, or a decision not to take part, will not affect you in any way.

Are there any benefits in my taking part?

There are no benefits to taking part but the information that is gained from the study will add to the current knowledge base of staff views about internationalisation and the implications that result. It is hoped that this will inform how a strategy of internationalisation may be designed that would work for each of the professions within the Faculty.

What will happen to me if I take part?

The project will be conducted in two phases. Phase 1 involves a questionnaire which canvases your views on internationalisation. This should only take 15-20 minutes to complete. Once results are collated they will inform the construction of an interview schedule for Phase 2. If you are willing to take part in Phase 2 then please fill in your contact details at the end of the questionnaire and return with it in the addressed envelope in the Faculty internal mail. Please understand that only a few people will be selected for the interviews so you may not be asked to participate in Stage 2.

If you are selected for interview, these will be conducted at a time that is convenient to you and should not last more than 40 minutes. Once the interview is completed it will be transcribed and analysed. A set of the preliminary themes will be sent to you and

you will be asked to check them as a record of what was said and asked if there is any additional information you would like to supply.

What do I have to do?

All participants will be asked to fill in a questionnaire, canvasing your views on internationalisation that should only take 15-20 minutes to complete. As only a few people will be selected for the interviews you may not be asked to participate in Stage 2 so the questionnaire may be all that you are required to do.

If you are selected for interview, the researcher will contact you to arrange a convenient time to conduct the interview. The interview should not last more than 40 minutes and, once the interview is transcribed and analysed by the researcher, a set of the preliminary themes will be sent to you at a later date. You will be asked to check them as a record of what was said and supply any additional information if you feel this is important.

Will my participation be confidential?

This study complies with the Data Protection Act/University policy. Information will be stored in a locked facility in accordance with University policy. Any information in the form of questionnaires will be stored as hardcopy and, for interviews, on digital recordings. Electronic data (analysis of data and interview transcripts) will be stored on a password protected computer. Information and identity will remain confidential as far as is possible and only be known to the researcher. Confidentiality of data in Phase 1 will be preserved as far as possible by the use of numbered questionnaires. Although participants will be asked to supply contact details if they are willing to participate in the interview stage, any contact details supplied will be detached from the questionnaires and kept in a lockable facility known only to the researchers. Each interview will also have a number code and any data from the interviews that could be identifiable will be anonymised on transcription.

Please be aware that, as the research is conducted within a single faculty, if the study is to be published anonymity may be possible to an external view. However, although care will be taken when writing up responses, despite the Faculty being large with a large number of staff, it may not be possible to ensure complete anonymity, internally. Responses may be enough to allude to the participant's profession and role within the Faculty and, as Walford (2005) suggests, potentially being recognised. As far as

possible identifying data will be removed prevent this but participants will be made aware of this before they consent to interview.

What happens if I change my mind?

Any participant has the right to withdraw at any time without giving any reason and without any consequence.

What are the other possible disadvantages and risks of taking part?

There are no disadvantages or risks from taking part. Whether you participate or do not participate will have no effect of the marks obtained in the end of year exams or degree classification.

What happens if something goes wrong?

If you have a concern or a complaint about this study you should contact Susan Rogers, Head of Research & Enterprise Services, at the School of Health Sciences (Address: University of Southampton, Building 67, Highfield, Southampton, SO17 1BJ ; Tel: +44 (0)23 8059 7942; Email: S.J.S.Rogers@soton.ac.uk). If you remain unhappy and wish to complain formally, Susan Rogers can provide you with details of the University of Southampton Complaints Procedure.

Where can I get more information?

More information can be obtained from the researcher, Steven Ryall, who will answer any questions that you may have after reading the information sheet.

Appendix 7 – Participant Check of Emerging Themes Letter Version 1

Ethics Number: 8238

Mr S. Ryall
School of Health Sciences
University of Southampton
Highfield
Southampton SO17 1 BJ

Faculty of Health Sciences
University of Southampton
Highfield
Southampton SO17 1 BJ

24th October 2012

Dear ,

Further to our interview for Phase 2 of the study of staff views of Internationalisation in the Faculty, I said that I would be sending each participant a copy of the themes and findings to enable you to check whether this reflected what you had said and to provide an opportunity for you to add any further information. I would be very grateful if you could check the themes and information and return any comment to me by 9th November 2012. If I do not hear from you by 9th November 2012 I will assume that you do not wish to make any comment.

If you have any questions or require any additional information please do let me know.

Thank you for your attention.

Sincerely,

Steven Ryall

Appendix 8 – Recruitment Letter

Ethics Number:

Mrs X
School of Health Sciences
University of Southampton
Highfield
Southampton SO17 1 BJ

Mr S. Ryall
School of Health Sciences
University of Southampton
Highfield
Southampton SO17 1 BJ

3rd June 2011

Dear Mrs X,

I am a lecturer at the University of Southampton and I am interested in conducting a study of staff views of Internationalisation in the Faculty and the University. Internationalisation is understood in different ways by different people and information from this study can be used to help inform how internationalisation might be conceived and how a strategy for incorporating within the Faculty and the University may be constructed.

The study will be conducted in two stages. The first is the completion of a short questionnaire that takes about 15 minutes to complete and has been constructed to maintain anonymity as far as possible. An information sheet explaining the study, a questionnaire and an addressed envelope is enclosed. The second stage is an interview as a follow-up to the questionnaire. Only a few of the participants will be asked to participate in this stage to explore questionnaire responses in more depth. If you would be willing to participate in this second stage I would be grateful if you would return the interview slip overleaf with the completed questionnaire in the enclosed envelope to the researcher via the Faculty internal post.

Return of the questionnaire will be regarded as consent for stage 1 of the study. Please note that not everyone will be selected for the second stage interview so the questionnaire may be the extent of your involvement. If you are selected for interview I will contact you to arrange a convenient time to talk over any questions you may have. Any data collected from the study will remain confidential. In any resulting publication, anonymity of questionnaire respondents is secure. Anonymity of interviewees cannot be guaranteed to an internal audience, but every effort will be made to minimise the risk of identification of respondents by colleagues. Written consent will be requested prior to interview. You will be free to withdraw at any time, without having to give a reason for doing so.

Steven Ryall

Thank you for your attention. I look forward to contacting you in the near future.

Sincerely,

Steven Ryall

NAME……

I would like to participate in the interview part of the study on Internationalisation

Ethics No: ……..

I can be contacted by (please fill in most appropriate):

Telephone ……

Fax ……

Email ……

Appendix 9 – Reminder Letter

Ethics Number: 8238

Mr S. Ryall
School of Health Sciences
University of Southampton
Highfield
Southampton SO17 1 BJ

School of Health Sciences
University of Southampton
Highfield
Southampton SO17 1BJ

28th November 2011

Dear ,

I am currently conducting a study of staff views of Internationalisation in the Faculty. I sent a short questionnaire to all academic and research staff within the Faculty and asked for their participation in the study but have not received a response from some participants. This may be because there are some questions about it that need addressing or more information that could be provided.

Please do let me know if this is the case and I will help in any way I can. I would be grateful, if you have not done so already, if you could complete and return the questionnaire to me. If you require an additional questionnaire please do let me know. If you have already returned the questionnaire please disregard this letter.

Thank you for your attention.

Sincerely,

Steven Ryall

Appendix 10 – Sample Statements with Coding Analysis and their Contribution to Themes

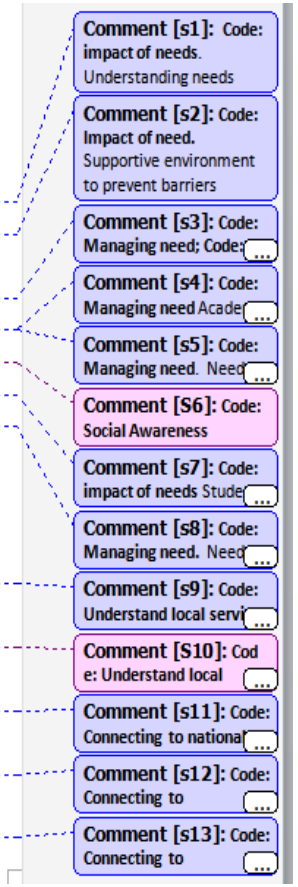
The following show significant statements extracted from a section of an interview and the codes allocated to them on the right along with accompanying comments. These are collected into clusters and the titles of the clusters are indicated by the italicised headings. The table then illustrates how codes and clusters were developed into key categories, themes and superordinate themes

Needs

- To get the facts and to get the reality of what people's needs are globally in terms of healthcare but also how that impact on us.
- If their language and religion is slightly different for them to feel that that is not a barrier to them engaging with the other student groups.
- The training is crucial. You cannot move forward without that I think.
- Academic staff need to have their own kind of awareness of internationalisation in all its many facets.
- Staff's own awareness of what they consider to be their culture, their ethnicity, their diversity.
- I think students who are coming in at different levels will expect different things.
- Post-graduate, would have an expectation that they are being supported through each process differently to other students i.e. language, i.e. engagement in the community and also with the other academic...post-graduate student communities.

Translating local to global and vice versa

- You know suddenly they start to think gosh we are very fortunate to have this and they start to manage their understanding of how we manage our services better.
- There is a real importance for them to focus on our healthcare population here because that is what they are immediately, for most of them, going to be going out to.
- Some of that is what they are coming across in health and social care policies that are being handed down to us and we are asked to implement from our Departments of Health.
- they need to have someone in the classroom saying going to the WHO website is not just for putting a reference in your essay, going to the WHO website will teach you about why it is that our policies are developed nationally in this way.
- Get very excited about what we know, not only about the healthcare in the UK. When they hear us talk about global issues it almost kind of puts into perspective why we are doing the profession that we are doing. What is the importance of the reason for us being.



International and Intercultural knowledge

- For our faculty the outcome should be that we know that the students have got this wider understanding of global health issues and some of the social issues which are very apparent
- I think the outcome should be that we feel that the students have reached a point where they not only appreciate health and social care from the perspective of their experiences and their programme practice experiences and what they are going out to but what is happening in the wider world as well.
- I think they would love to see a real experiential knowledge of global health issues
- Understand that you don't just get on the plane and go to a different country you really need to have a good, at least an awareness of the cultural environment that you are going to.

See the bigger picture

- Impact of economy, the impact of a change of environment, the impact of disability and race, the impact of different approaches and belief systems about what is good education and what is poor education to attain your professional qualification.
- We are also making those links to the wider world because the World Health Organisation influences everything we do.
- For our students who are developing and emerging as health and social care professionals, there needs to be an opportunity to talk openly about things that affect them

Working together and Citizenry

- The student communities from different areas need to come together.
- Students themselves have an international perspective. They could tell us quite a lot of things and bring that in would just enhance the skills
- The days of education where everyone is staying where they are in their lines of communities have really, really changed
- To do a really good job of something that is a bit of a new way of conceptualising the way we engage with others ...
- We are welcoming you now to get engaged with us and make those [international] comparisons but also to learn from us and we learn from you.

Comment [s14]: Code: Acquiring international knowledge. Code: Social Awareness Students have different levels of knowledge and understanding

Comment [s15]: Code: Using international knowledge; Seeing location in the bigger ...

Comment [s16]: Code: Acquiring international ...

Comment [s17]: Code: Intercultural knowledg ...

Comment [s18]: Code: Impact of contexts. ...

Comment [s19]: Code: Making links to the wi ...

Comment [s20]: Code: Impact of contexts. ...

Comment [s21]: Code: Coming together. ...

Comment [s22]: Code: Sharing knowledge ...

Comment [s23]: Code: Coming together. ...

Comment [s24]: Code: Collaboration. Code: ...

Comment [s25]: Code: Reciprocity and ...

Identity

- If we want to work with other individuals being health and social care professionals or academics across the world we always need to tap in a little bit to our own sense of self
- It's like trying to get blood out of a stone in the academic world because our roles are multiple

Comment [s26]: Code: Framework of identity. Networks

Comment [s27]: Code: Framework of identity. Self-awareness

Comment [s28]: Code: Framework of identity. Acknowledging people play different roles. Influence of role and identity – can be conflicting

Code: Shortened quote	**Cluster**	**Key Category**	**Theme**	**Superordinate Theme**
Using international knowledge; Location in the bigger picture: Appreciate different healthcare perspectives **Acquiring international knowledge:** A wider understanding of global health issues **Acquiring intercultural knowledge:** Need for awareness of the cultural environments	International and intercultural knowledge	Awareness of intercultural issues and their implications	Knowledge for employability	**WHAT IS INTERNATIONALISATION – PARTICIPANT CONCEPTIONS**
Impact of need: Reality of what needs are globally **Impact of need:** Language a barrier to engagement **Managing need:** Needs self-awareness **Managing need:** Different expectations **Managing need /Creating support:** Training is crucial	Needs	Recognising needs and gaps and meeting needs	Recognising need	**UNDERSTANDING THE NEEDS AND THEIR IMPLICATIONS**
Impact of contexts: Impact of economy, environment, disability, race, different beliefs **Impact of contexts:** Talk about issues that affect them **Making links to the wider world:** Links to WHO /wider world	See bigger picture	Awareness of the bigger picture and ability to explain and do things within a global perspective	Programme design, content and learning opportunities	

Coming together: Communities need to come together **Sharing knowledge enhances skills:** Broaden and share knowledge **Sharing knowledge enhances skills:** Students bring knowledge that enhance skills **Social awareness:** Awareness of own culture **Social awareness:** New way of conceptualising engagement with others **Reciprocity:** Learning from us and we learn from you	Working together and Citizenry	Civic and social engagement with the local communities		
Framework of identity: Tapping into sense of self **Framework of identity:** Roles are multiple	Identity			
Understand local service: Focus on our population. **Understand local service:** Managing services better	Translating the local to global and vice versa	Using healthcare skills appropriately	Enhancing skills to work with others	**UNDERSTAND WHAT OUTCOMES AND BENEFITS GAINED**
Relating to national policy: Translating national to local **Relating to international issues:** global issues put into a professional perspective		Able to work in a variety of settings		

Appendix 11 – Theme Development

Table to illustrate the development of a single theme from its constituent key categories and the contribution from responses from several interviews and their codes.

Sample quotes from several interviews	Code:	Key Category	Theme	Superordinate Theme
- If you don't know what you don't know then you won't encompass the whole picture especially teaching healthcare provision and delivery - Talking about global issues in teaching puts the profession and the reason for us being into perspective	See the whole picture	Awareness of the bigger picture with the ability to explain and do things within global issues and perspective	THEME – Programme design, content and learning opportunities	SUPERORDINATE THEME – Understanding the Needs and their Implications
- An awareness of what's happening in the bigger picture, broaden perspectives and understanding - A blend of purpose and experience with empirical knowledge and aesthetic knowledge put all together to build into a bigger picture and being able to use that appropriately in your daily life.	Awareness of the big picture			

- Have to be self-reflective and always looking for a way to enhance yourself by asking yourself how did that go?, and asking other people or students for feedback - Staffs own awareness of what they consider to be their culture, their ethnicity, their diversity.	Self-awareness	Key category – The ability to see the world differently to help broaden thinking/ problem solving		
- Know who is in the classroom, basic knowledge about them, what country they come from - Academic staff need to have their own kind of awareness of internationalisation in all its many facets.	Mindfulness			
- A better understanding of the kinds of issues and different approaches to health and social care - Ability to widen our horizons, and having your eyes opened	Broaden knowledge			
- Help staff to think and problem solve, interpret things in a different way so it would actually broaden out their thinking - Develop staff by beginning to see the world in a slightly different way.	Broaden thinking			

Another layer of broadening them out and thinking differently and interpreting the world differently				
- People taking pleasure in and mixing with people from different backgrounds - Talking to people in different countries is important	Engaging with others	Key category – Using working and learning with others to enable knowledge transfer		
- Not just learning from other students but also from other cultures that they come into contact with - Being able to engage with international students, being able to learn about them as a human being – where they have come from, what their home life is like, how are they able to practice, what is their schooling like, understanding of a different culture	Learning from others			
- Aligning itself with one or two projects where you have an enduring relationship with it so that you can build on (sustainable) – can actually measure, there's some tangible impact - Look at specific cases in healthcare and then share – designing specific cases to look at one perspective in healthcare or economic or political and	Enable knowledge transfer			

then address how different parts of the world would look at that particular issue				