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Experiences of Success by Minority Students Attending a Predominantly Caucasian
Nursing Program

A dissertation
presented to
the faculty of the College of Nursing
East Tennessee State University

In partial fulfillment
of the requirements for the degree
Doctor of Philosophy in Nursing

by
Staci M. Boruff
December 2012

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Keywords: Nursing Education, Minority Student

ABSTRACT

Experiences of Success by Minority Students Attending a Predominantly Caucasian

Nursing Program

by

Staci M. Boruff

Nursing educators have struggled for many years with the problem of student attrition in the minority population. Because there are so few minority students who choose nursing as a profession, educators strive to retain these students to graduation. Unfortunately, attrition rates of minority students continue to rise despite years of research into the problem. The majority of this research approaches the issue from the viewpoint of the failing student. What might happen if nursing research took a positive approach to the issue? The purpose of this study was to describe the influencing factors that led minority nursing students to be successful in a predominantly Caucasian prelicensure nursing program. The researcher sought to describe the influencing factors that led to success for minority students who attended a predominantly Caucasian nursing program. Seven minority students from a medium-sized community college were interviewed for the study. The findings of this study reflect a need for minority students to have strong family support while in school. They must also possess a strong work ethic and determination to succeed despite obstacles that may be detrimental to less motivated students. It is hoped that by describing the stories of successful minority nursing students through a qualitative descriptive lens, nursing education researchers and nursing faculty can use the information to develop positive strategies and interventions that will contribute to the success of future minority nursing students.

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CHAPTER 1

INTRODUCTION TO THE PROBLEM

The Tennessee Center for Nursing predicts 14,910 unfilled nursing positions by the year 2020 (Tennessee Center for Nursing, 2009). While this number is less than the originally predicted shortfall of 35,000 positions in 2004, the shortage remains a vital concern to the nursing profession. Buerhaus, Auerbach, and Staiger (2009) reported that despite the current easing of the nursing shortage due to the recession, the U.S. nursing shortage is projected to grow to 260,000 registered nurses by 2025. The American Association of Colleges of Nursing (2011) reported that a shortage of this magnitude would be twice as large as any nursing shortage experienced in the United States since the mid-1960s. Buerhaus et al. (2009) report nurse researchers point to a rapidly aging workforce as a primary contributor to the projected shortage. Although multiple factors lend to the nursing shortage, the Tennessee Board of Nursing placed much of the burden to reduce the shortage on prelicensure schools and colleges of nursing by requiring an increase in graduation numbers of every school in the state.

Community colleges are faced with the additional challenge of recruiting and retaining a diverse population. Diversity issues continue to affect many schools of nursing across the nation. As the cultural landscapes change across the country, nursing schools are posed with the challenge of recruiting and retaining students of various cultural backgrounds. A fact sheet published by the American Association of Colleges of Nurses (2011) reported that in 2008 nurses from minority backgrounds represented 16.8% of the registered nurse workforce. In Tennessee, this number was 11% (Tennessee Center for Nursing, 2010). The Tennessee Center for Nursing (2010) reported the general African American population will increase to 20% by 2015, with minimal change in the number of African American nurses. Nurses classified as

Asian or other comprise only 2.7% of the state's registered nurses. Alternatively, the number of African American licensed practical nurses in Tennessee approaches 15%, with individuals identifying themselves as "Asian or other" making up only 0.7% of the licensed practical nurse population (Tennessee Center for Nursing, 2010). This number supports the findings of the Sullivan report in which multiple authors expressed concerns that certain racial minority students are advised to follow the technical school pathway due to diminished expectations that are societal and may even be cultural (The Sullivan Commission Report, 2004).

Recent reports show current enrollment of minority students in prelicensure associate degree nursing programs in the state of Tennessee at 15.1% (Tennessee Center for Nursing, 2010). Nurse educators continue to explore factors that lead to success in nursing programs and on the National Council of State Boards of Nursing Registered Nurse exam (NCLEX-RN). Educators and students alike suffer the consequences of poor outcomes. Nursing programs suffer low rates of retention, which negatively affect funding and reputation. Students suffer emotionally and financially when faced with failure.

Despite the grim statistics, there exists a certain population of minority students who not only succeed but thrive in nursing programs. In fact, many minority students progress continuously through the ranks of education eventually receiving masters and doctoral degrees. A report from the *National Sample Survey* concluded that registered nurses from the minority population were significantly more likely to pursue baccalaureate or higher degrees in nursing (American Association of Colleges of Nurses, 2011). What key factors existed in the lives of those students who achieved such success? A search of the literature finds very few studies that focus on success of the minority population in nursing education. A significant gap exists in this research area.

Background of the Study

In 2005 the United States Bureau of Labor Statistics estimated that health care facilities will need to fill more than 1.2 million RN job openings by 2014 to accommodate growing patient needs and to replace retiring nurses. Community colleges are the primary educators of new registered nurses in the United States. In 2009-2010 community colleges in the United States awarded 81,277 associate degrees in nursing (National Center for Education Statistics, 2011). According to Viterito and Teich (2002, p 6), “Community colleges are the colleges of choice for entry into the nursing field for African American, Hispanic, and Native American students. Fifty-seven percent of non-diploma African American graduates were educated in associate-degree programs in 1997.”

English-speaking Caucasian students greatly outnumber African American and English as Second language (ESL) students in Tennessee community colleges. According to the Tennessee Center for Nursing (2009), associate degree nursing programs enrolled 3,357 students in 2008, with 15.1% being from racial and ethnic minorities. In 2008-2009 minority students represented 12.9% of all graduating nurses in Tennessee. The reported retention rate for associate degree programs was 72.5% (Tennessee Center for Nursing, 2009).

Adult students attending college for the first time are more likely to choose community colleges. The very nature of the community college population (first-generation college attendee, lower socioeconomic status) challenges retention strategies. Nontraditional college students who encounter real and perceived barriers in academic settings may experience less confidence in their ability to succeed as students (Quimby & O’Brian, 2004). Amero, Abriam-Yago, and Yoder (2006) identified the need for tutoring, financial assistance, lack of ethnically diverse faculty, and family stress as major barriers for ethnically diverse students in nursing programs. Although each

student situation will vary, studies show main sources of attrition in the nontraditional student include employment, family responsibility, limited outside encouragement, and weak academic support (Jeffreys, 2007). Barriers to education for African American and other minority students include a need for role models, inadequate preparation for the health care profession in high school, perceived and real discrimination, and social isolation (Vilschick, 2003). For this reason, nurse educators are challenged to develop theoretically and empirically-based retention strategies targeting the nontraditional student (Jeffreys, 2007).

Statement of the Problem

This study described factors that led to success for minority students enrolled in a predominantly Caucasian nursing program. Years of research in nursing education has focused on students who fail nursing school. These types of studies may lead nurse educators to believe that all minority students will have difficulty in nursing programs, possibly causing some educators to lead minority students to other career paths. Research related to attrition in nursing programs show that retention efforts for minority students have not been successful. Issues such as recruitment, counseling, support services, financial assistance, and recruitment of minority faculty are lacking in nursing education (Buchanan, 1999; Dapremont, 2011; Etowa, Foster, Vukic, Wittstock, & Youden, 2005; Vilschick, 2003). It is postulated that fostering academic success in minority students using newly developed retention strategies may contribute to the likelihood of persistence to graduation. It is also postulated that by increasing the numbers of minority registered nurses the United States will experience an increase in culturally competent healthcare. To achieve this goal nursing educators must attempt to home in on the reasons why certain minority students find success. Nursing education researchers cannot continue to repeat

studies on attrition of this population. We must look to those who have found success and learn from them.

The object of this study was to describe the influencing factors that lead minority nursing students to be successful in predominantly Caucasian prelicensure nursing programs. Minimal research exists that explores actual successful stories of minority students who attend predominantly Caucasian nursing programs. Using a qualitative approach and examining experiences of minority students may reveal new insights and ultimately lead to new retention strategies.

Conceptual Framework

The phenomenon of student attrition has been examined using many theories. Tinto's theory of individual student departure is among the most widely discussed and explored in higher education literature (Milem & Berger, 1997). Tinto (as cited by Flowers, 2004, p 24) describes the concept of student departure as “the act of a student withdrawing from a university or a system of higher education.” Tinto’s theory suggests that students’ personal background characteristics, educational and occupational goals, commitment to these goals, economic situation, and degree of academic involvement interact to help predict whether or not a student will leave the college before completing the degree program (Flowers, 2004). While this study does not use any particular theory or model to guide the process, the concepts rooted in Tinto’s theory are important in educational research of retention.

Definition of Terms

For the purpose of this study, the following terms are defined as:

Academic involvement: The degree to which minority students are involved in college-related activities including social clubs, sporting events, and interactions with faculty.

Culture: The customary beliefs, social norms, and material traits of a racial, religious or social group.

English as second language student (ESL): Nursing student who identifies primary language as anything other than English. Evolving terminology also describes these students as English language learners (ELL) who are developing proficiency in English. For the purpose of this study, the term ESL was used to define the population despite being imprecise because many of the participants spoke several languages.

Minority student: Nursing student who identifies self as ethnicity other than Caucasian, such as African American, Native American, Hispanic American, or Asian American or identifies English as a nonfirst language.

Nursing program: Undergraduate associate degree prelicensure registered nurse program in the Southeastern United States.

Success: Academic progression throughout the nursing program to the point of graduation.

Assumptions

This research was based on the following assumptions:

1. The participants were honest and truthful during the interview process and answered the questions to the best of their ability.
2. The participants possess the ability to describe their experiences while in a nursing program and how these experiences contributed to their success.
3. The participants are able to communicate their ideas of what “success” and “support” means to them.

4. The researcher used open-ended, thought-provoking questioning while interviewing participants.
5. The researcher was able to separate past history with the participants from the current research efforts.

Nature of the Study

Literature reviews show the issues of retention and attrition in minority students to be multi-faceted with no clear solution to the problem. Descriptive qualitative research has special value for investigation of complex and sensitive issues. Because each of us experiences a different reality, qualitative study will best capture the essence of the student's experience.

CHAPTER 2

REVIEW OF THE LITERATURE

Introduction

Becoming a registered nurse is a dream of many women and men from all cultural and ethnic backgrounds. In the United States the nursing population consists of mainly Caucasian females. In 2010 the Tennessee Center for Nursing revealed a population of registered nurses as being predominately Caucasian (88.7%) female (91%). African American nurses account for a mere 8.0% of the workforce. This does not reflect the general population of Tennessee that has an African American population of 16.8% (U.S. Census Bureau, 2010). Other minorities including Hispanic Americans and Native Americans constitute less than 3% of all registered nurses in Tennessee. This number is somewhat of a closer reflection of the total population of these races in Tennessee (Hispanic 3.7%, Native American 0.3%).

Minority disparity in nursing is not limited to Tennessee. According to the Sullivan Commission (2004), African Americans, Hispanic Americans, and Native Americans make up more than 25% of the U.S. population but only 9% of the nation's nurses. Many factors including racism, segregation, and limited opportunities for minorities have led to nursing becoming a Caucasian dominated profession. The Sullivan Commission on Diversity in the Healthcare Workforce was formed in 2003 to address these issues and to find solutions to reduce the disparities between minorities and Caucasians. The Commission was made up of leaders in health, business, higher education, law, and other fields and was funded by a grant from the W.K. Kellogg Foundation. To address the root causes of a lack of minorities in the healthcare professions, the Commission offered 37 recommendations. These recommendations were based on three main principles: 1) To increase diversity in health professions, the culture of health

professions schools must change; 2) New and nontraditional paths to the health professions should be explored; and 3) Commitments must be at the highest levels of our government and in the private sector (Sullivan Commission, 2004).

According to the Sullivan Commission (2004) the lack of minority healthcare professionals significantly impacts the continued healthcare disparities of the minority population in general. The commission identified that cultural differences, a lack of access to healthcare, and high rates of poverty and unemployment contribute to the substantial ethnic and racial disparities in health status and health outcomes (Sullivan Commission, 2004). It is hoped that increased diversity in healthcare professionals will improve the overall health of the nation.

Research over the past decade has reported that although minority students are interested in the field of nursing, many minority students who are enrolled in prenursing programs either do not enter the actual nursing program or do not progress to graduation from the program. Factors that lead minority students away from nursing as a career include role stereotypes, economic barriers, a lack of mentors, gender bias, lack of direction from early authority figures, misunderstanding about the practice of nursing, and increased opportunities in other fields (American Association of Colleges of Nursing, 2001). Studies have identified several reasons for attrition of minority students including cultural barriers, financial needs, family responsibilities, and lack of support from Caucasian faculty members (Clark & Springer, 2010; Dapremont, 2011; Deary, Watson, & Hogston, 2003; Olson, 2012; Shelton, 2003).

The Pipeline to Higher Education and Nursing Education

Years before considering college or entering the nursing profession, many minority students in the United States face challenging barriers to higher education. These challenging barriers are described in the literature as “obstructed pipelines.” Obstructed pipelines cause

minority students to lag behind Caucasian students at every educational level in all key scholastic indicators such as reading and math skills, high school completion rates, college enrollment rates, and graduation rates (Sullivan Commission, 2004). In fact, the Sullivan Commission (2004) described the gap between the primary and secondary educational experiences of Caucasians versus that of Hispanics, African Americans, and Native Americans, and some Asian subgroups to be wide, deep, and persistent. The Sullivan Commission (2004, p. 73) listed the key obstructions in the educational pipelines. They include:

- stark inequalities in educational resources;
- disparities in learning outcomes especially reading and math;
- disparities in high school completion rates;
- perceptions among minority youth that education is of little value;
- low aspirations;
- diminished expectations among teachers;
- the need for more role-modeling and youth mentoring.

These barriers are not easily overcome by minority students who might want to choose nursing as a career. It is especially discouraging to find that there appears to be insufficient effort to direct minority students into the health care professions. As part of the Sullivan Commission, Dr. Hilda Hutchinson, Associate Dean for Minority Affairs, Columbia University College of Physicians and Surgeons, reported that recruiters from other disciplines attempt to lure minority students away from healthcare, advising students that other disciplines will allow them to make more money, avoid the possibility of malpractice, and enable them to finish their education more quickly (Sullivan Commission, 2004).

The Culture of Nursing

Imagine a picture of a nurse. What do you see? For many it is an image of a Caucasian female dressed in a starched white uniform. This image is seen in magazine ads, television programs, and in some textbooks. These images may be deterrents to nonwhite, male individuals who are interested in the nursing profession. Historically, racial barriers to nursing were quite severe. Nursing schools in the northern United States maintained quotas for “colored” students, while nursing schools in the south barred these students from nursing schools completely (Sullivan Commission, 2004). Although progress is being made, disparity between the races still exist. It will take many more years to overcome these gross disparities.

Efforts such as *Be a Nurse* and *Discover Nursing* by Johnson and Johnson’s national and worldwide campaigns have attempted to reverse years of discrimination and prejudice by recruiting minorities such as African Americans and men into the nursing profession. The website www.discovernursing.com consistently presents images of African American and male nurses on the homepage. This website also links potential minority nurses to organizations and websites such as MinorityNurse.com and DiversityNursing.com. These sites encourage minorities to seek scholarships and other funding to achieve the dream of becoming a nurse.

The Culture of Nursing Education

The culture of an institution or school is sometimes described as the institutional climate. This climate reflects the overall impression the college exudes to the public. As defined by the Sullivan Commission (2004, p. 83), “Institutional climate refers to the collective social, cultural, and psychological attitudes and values that prevail within an institution and which demonstrate – particularly as seen from the viewpoint of minority students and faculty – whether the institution truly welcomes minorities.”

This climate can and does play a major factor in the success of minority students in predominantly Caucasian nursing programs. A welcoming climate demonstrates the value of students, minority and majority, by addressing and meeting the needs and concerns of all students (Sullivan Commission, 2004). Institutional elements significantly determine the quality of the educational experience include (Sullivan Commission, 2004, p. 84):

- academic program and advisement;
- faculty and student relationships;
- administrative practices and policies;
- the availability of support services;
- and cocurricular resources and activities.

Nursing education is sometimes identified as a subculture of nursing. This subculture is also predominantly made up of middle-aged Caucasian females, reflecting the current population of nurses in the United States. Nursing education is commonly described as difficult, rigid, and highly structured. Nursing faculty are sometimes depicted as a “Nurse Ratched” type of person, a hard-nosed, unsupportive beast of a teacher who would rather fail students than assist them. These images of nursing instructors in cartoon form are found easily on nursing student internet sites. This unfortunate stereotype can lead potential students to have negative expectations of nursing education before entering the door of a classroom. According to Dahlborg, Lyckhage, and Philhammar (2008, p. 538), “Images can both contribute to and prevent the possibilities of becoming a professional nurse.”

Although nursing educators are highly attuned to the need for increased diversity in nursing, they are left to deal with common attitudes and values such as treating everyone the same without regard to cultural morays that rise from the culture of nursing. This action has been

described as *unconscious incompetence* (Campinha-Bacote, 1999). In fact, Hispanic nursing students described their experience in nursing school as rigid and demanding, with nursing faculty expecting every student to be the same without regard to cultural differences (Alicea-Planas, 2009). Unconscious incompetence perpetrated by nursing faculty is often associated with academic incivility, unfairness, and overt discrimination (Hall, 2004; Luparell, 2004; Thomas, 2003).

Evans (2008) cited multiple studies that have found nursing faculty to have diminished expectations of minority students (Byrne, 2001; Chavous, Harris, Rivas, Helaire, & Green, 2004; Villarruel, Canales, & Torres, 2001; Yurkovich, 2001). Whether intentional or subconscious, Caucasian faculty members sometimes exhibit stereotyping behaviors when interacting with minority students. As discovered by Kossman (2003) faculty members in an undergraduate nursing program routinely assumed that African American students didn't understand content of their courses or didn't have the background knowledge to understand nursing material. One student in the study reported faculty "don't look at your intelligence or what you know or what you can do. They just look at color" (2003, p. 103).

Kossman's study also found nursing education to be extremely rigid. She reported Caucasian faculty in one institution were more rigid with minorities who were struggling in courses so much so that caring faculty members were criticized by uncaring faculty members for attempting to help struggling minority students. The uncaring faculty failed to recognize the unique needs of some students, thereby bringing about negative experiences and barriers to success for the minority students (Kossman, 2003). Alternatively, Gardner (2005) posited that minority students would experience higher levels of success and graduation rates if faculty understood the experiences of minority students.

Lack of minority faculty members to serve as mentors for students presents a significant problem for schools and colleges of nursing. Data from the American Association of Colleges of Nursing (2011) revealed that in its reporting member schools only 12.6% of full-time nursing faculty are from minority backgrounds. In Tennessee minority faculty members make up only 11% of total faculty in all nursing programs (Tennessee Center for Nursing, 2011). A major recommendation of the Sullivan Commission is to increase the representation of minority faculty in all healthcare profession education as well as in major institutional committees and advisory councils (Sullivan Commission, 2004). Even though this recommendation has great merit, it is very difficult to find minority nurses who are professionally qualified to teach. For example, a medium-sized community college in the southeastern United States has no full-time minority faculty representation in a very large nursing program. In this area the problem is partly due to the lack of master's degree prepared minority registered nurses and partly because minority nurses who hold advanced degrees bypass positions in nursing education for higher paying jobs.

Community Colleges

In many cases community colleges are the first step to higher education for many minority students in the United States (Provasnik & Plenty, 2008). The population of students in community colleges include a diverse group of nontraditional, low income minority students who typically start college with no intention of pursuing any education higher than an associate's degree (Provasnik & Plenty, 2008). Karp, Hughes, and O'Gara state (2010-2011, p.70), "Because of their convenient locations, open-access admission policies, and relatively low costs, community colleges tend to enroll students who are more academically, economically, and socially disadvantaged than do other postsecondary institutions." In nursing community colleges house associate degree programs that provide the majority of new nurse graduates as well as the

largest number of minority graduates. Associate degree nursing programs provide the United States with 54.7% of new African American registered nurse graduates and 55.1% of Hispanic registered nurses (Fulcher & Mullin, 2011).

While some view community colleges as a springboard into the profession of nursing, others believe that minorities are guided to community colleges because of diminished expectations of these students. Community colleges have been criticized for keeping minority students from transferring to larger universities to attain baccalaureate or higher degrees. Some studies suggest community college faculty and advisors tend to lead minority students into 2-year degree or certification programs so they can enter the workforce more quickly instead of encouraging students to enter baccalaureate nursing programs (Jain, 2010).

One reason minority students, especially Hispanic students, choose to attend community college is to stay close to family members because family is a priority and maintaining a close connection is essential (Alecia-Planas, 2009). The community college setting allows the student to live at home, which reduces cost of college attendance. While proud of attending college, these students report feelings of selfishness about being in school and guilt over missing shared time with family members (Goetz, 2007).

While many minority students choose community colleges over universities, they often enter college with the expectations that faculty will not be supportive or willing to assist them with academic issues (Flowers, 2002). How can this perception be reduced or eliminated all together? Derby and Watson (2007) suggest attending a formal college orientation can help minority students adjust to campus, create an investment in the college, and begin to develop relationships with faculty. Achieving cultural competence in nursing faculty is essential to be able to meet the needs of a culturally diverse student body (Ume-Nwagbo, 2012).Once students

break the barrier and perceive faculty as supportive, either psychologically or functionally, retention rates improve. Shelton (2003) reported that students' perception that faculty cared about them and wanted them to succeed created an atmosphere conducive to success, encouraging them to continue in nursing their programs.

Despite some negative attributes of community colleges, the majority of these schools wish for nothing but success for their students and push minority students to continue their education once graduating with associate degrees. There are currently more than 430 RN-to-baccalaureate degree programs in the United States plus an additional 140 + RN-to-master's degree programs. The Sullivan Commission (2004) recognizes community colleges as a valuable resource for recruiting minority students to 4-year colleges and universities. Leading nursing associations such as the National Association of Hispanic Nurses and the National Black Nurses Association demonstrate their commitment to assisting minority associate degree nurses to continue their education by providing grants and scholarships.

English as Second language Students

The population of English as Second language (ESL) students has grown in the community college system due to a variety of factors. These students are often described as a subpopulation of minority students who tend to struggle in nursing school (Olson, 2012). ESL students experience multiple barriers to effective learning in nursing programs. Factors that were identified as barriers to success for ESL students were: language barriers, cultural barriers, academic barriers, and personal barriers (Olson, 2012).

Difficulty with the English language can lead to loneliness, isolation, and outright discrimination (Gardner, 2005). Language difficulties affect a student's ability to effectively communicate needs, leading to problems with integration, retention, and ultimately completing

the nursing program (Davis & Nichols, 2002). The technical language of healthcare is especially daunting, with the addition of abbreviations and medical jargon. The use of slang by an instructor either during lecture or on an exam can cause confusion. Many times students are reluctant to ask for clarification of material due to embarrassment. For example, Colsimo and Xu (2006) reported “being ashamed” as a reason for not admitting that they did not understand a nursing concept or intervention.

Cultural barriers sometimes form when ESL students attempt to integrate their own norms, values, and belief systems into those of their nursing programs (Olson, 2012). Students who experience racism in nursing programs certainly may cause them to feel as if they are singled out or stereotyped by nursing instructors. Although less severe than racism, ESL students may find it difficult to approach faculty due to cultural norms of teacher and student relationships (Olson, 2012). This may lead a student to shy away from asking faculty for clarification of information, causing the student to misunderstand important material as described above.

Multiple studies identify reading and the need to translate educational materials as academic barriers to success for ESL students (Bosher & Bowles, 2008; Brown, 2008; Cunningham, Stacciarini, & Towle, 2004; Gardner, 2005). These students must be able to read a test question in English, translate the question into their native language, and then translate once again into English in order to fully understand the meaning of the test question. This process can take time, which can cause students to fail timed exams.

Olson (2012) identified the lack of peers of the same ethnic background as the major personal barrier to success in ESL students. Lack of peers can lead to loneliness and isolation of the ESL student. Family obligations, home responsibilities, and financial concerns were also

categorized as barriers to success for the ESL student. In comparison, the same concerns were found in other minorities and in nonminority nursing students.

While ESL are grouped into minority categories along with ethnic minorities and other “disadvantaged” groups of students, retention rates for ESL students are much higher than nonESL minority students (Memmer, 1991). Cunningham et al., (2004) found that foreign-born ESL students “tended to bring a ‘strong obligation’ to prove that ‘they can make it’” (p. 17). These students feel pressure to strive for excellence for various reasons: internal values, family members, or cultural expectations (2004). This cultural pressure can actually be beneficial to the student, leading to increased motivation to succeed.

Olson (2012) also described factors that lead to success in ESL students. While language, culture, academic, and personal issues can be barriers in nursing education, they can also be viewed as bridges to success. For example, students who speak more than one language have the ability to communicate with a wider cultural variety of patients. Students who speak Spanish fluently have a distinct advantage over English-only speaking students in some areas of the United States. These students are more likely to be hired when potential employers discover their ability to speak Spanish.

As described by Olsen (2012) research into testing difficulties of ESL students has led to specific recommendations to assist students with multiple choice testing. Recommendations by Boshier and Bowles (2008) have led nurse educators to change the way test items are constructed. Educators are encouraged to use short, simple questions that state information directly and to use common words instead of obscure words that are not frequently heard in English speaking conversation. These recommendations have led to an overhaul of test-item writing in general that has been observed during the last several years.

Student Attrition

Of minority nursing students African American students are the most extensively studied group related to student attrition. Childs, Jones, Nugent, and Cook (2004) identified multiple obstacles to retention including lack of academic and social adjustment to predominately Caucasian university settings, lack of academic preparation, financial difficulties, and lack of institutional commitment to retaining students from diverse ethnic and cultural backgrounds. An abundant amount of research exists that shows minority students who feel disconnected from their school are less likely to graduate (Cervero & Bowles, 2009; Chavous, Rivas, Green, & Helaire, 2002; Gausman, Gerstl-Pepin, Anderson-Thompkins, Rasheed, & Hathaway, 2004; Golde, 2005).

A study at a major southern university revealed that minority students continue to feel the effects of centuries old prejudice and racism in higher education. Johnson-Bailey, Valentine, Cervero, and Bowles (2009) inquired about the educational experiences of African American students in a southern university graduate program. The study showed that statements about race, racism, and discriminatory and racially motivated actions dominated the data. In many cases the discrimination caused the student to drop out of college.

A qualitative study by McGregor (2005) described lack of faculty support to be a factor in nursing students' voluntary or involuntary withdrawal from nursing education programs. This qualitative study was designed to gain a deeper understanding of the meaning of failure or its threat for nursing students in Ontario, Canada. The study showed that nursing students felt bullied by their faculty and that no one stood up for them when the possibility of failure appeared. McGregor suggested that faculty and students must engage in connected dialogue that

offers “genuine respect, kindness, and positive regard” (p.94) when discussing potential failure from the nursing program.

Deary et al. (2003) found “the reasons students leave nursing programs are many and varied, and include discontinuation on several grounds, such as academic failure, misconduct, or failing clinical assessments” (p. 73). The authors described how students reported leaving school for “personal reasons” that made it very hard to ascertain exactly why they left. Other attrition related factors included difficulty with studying, low educational ability, inability to cope with the stress of the program, and burnout related to emotionally demanding workload (Deary et al., 2003).

Low educational ability is the focus of multiple national initiatives to increase the quality of K-12 education of minority students. According to the Sullivan Commission (2004) when compared to Caucasian students racial and ethnic minority students receive an elementary and high school education of measurable lower quality, score lower on standardized tests, and are less likely to complete high school. The Commission found that while talented students are able to overcome these odds, they are less likely to enter health professions programs. Minority students are met with such barriers as over-reliance on standardized testing in the admission processes, unsupportive institutional cultures, insufficient funding, and leadership with no commitment to diversity (The Sullivan Commission, 2004).

Research shows that perceptions of what is involved in being a nurse frequently differ from the reality of what needs to be learned in becoming a professional nurse (AACN, 2001; Grainger & Bolan, 2006; Harvey & McMurray, 1997.). Potential nursing students may be lured into the healthcare profession by television programs such as *Grey’s Anatomy* or *HOUSE*. Healthcare images in the media are skewed for entertainment value, providing a false ideology of

what it is like to be a nurse. These perceptions change immediately with the first clinical classes that introduce students to the reality of clinical nursing. It is not uncommon for students to drop out of nursing completely after a day or two in the hospital or nursing home setting. Having a family member or close friend working in healthcare can prevent some of the culture shock that students experience during their first year of nursing school.

Theoretical Foundations -Thoughts on Retention

Why do minority students struggle in many nursing programs? Research shows that minority students have higher rates of attrition than Caucasian students in all levels of prelicensure nursing education (Amaro, Abriam-Yago, & Yoder, 2006; Braxton, 2004; Childs et al., 2004; Deary et al., 2003; Wong, Seago, Keane, & Grumbach, 2008;). Nursing programs across the nation approach failing students with strategies such as implementing peer-tutoring, early intervention and tracking, learning style intervention, and faculty mentoring to decrease attrition (Gardner, 2005; Remington & Kroll, 1990). Many of these strategies are based on suggestions from Tinto's model of retention.

Tinto's Model of Student Persistence.

Educational theorist Vincent Tinto has studied the phenomenon of student retention and attrition since the mid-1970s, and his work has been used extensively in nursing education research. Tinto's model of individual student departure is among the most widely discussed and explored in the higher education literature (Milem & Berger, 1997). Student departure is defined as "the act of a student withdrawing from a university or a system of higher education" (Flowers, 2004, p 24). Approximately 45% of students enrolled in community colleges drop out of school during their first year never to return (Braxton, 2004). African American students have

significantly higher dropout rates (60.6%) than Caucasians (39.3%) and moderately higher dropout rates than Hispanics (53.4%).

Looking at student retention issues, Tinto's model of student persistence suggests that students' personal background characteristics, educational and occupational goals, commitment to these goals, economic situation, and degree of academic involvement interact to help predict whether or not a student will leave the college before completing the degree program (Flowers, 2004). According to Tinto (1990) students who have frequent, quality contact with faculty, staff, and other students are more likely to persist to graduation regardless of school type, student gender, or race.

Adult Learning

What is learning? How does learning differ between children and adults? These questions are not new to educational research. In fact discovering the intricacies of learning first began with Plato, who stated those with the greatest ability to learn must receive the best education, be engaged in a regimen of mental discipline that should grow more strict with every passing year of their lives. According to Billings and Halstead (2005, p. 255), "Adults make a commitment to learning when learning goals are perceived as immediately useful and realistic and as important and relative to their personal, professional and career needs."

Adult Learning Theory.

The term "andragogy" was first defined by Alexander Knapp in 1833 as the lifelong necessity to learn. This beginning investigation into adult learning gradually evolved into Malcolm Knowles's theoretical and practical approach to adult education. Knowles's theory is based on the humanistic concept of adults as autonomous learners and instructors as facilitators of learning (Reischmann, 2004). Most recently, research into andragogy is moving into a

postmodern discipline in which the learner must always be set in a socially constructed context, and it is this context that shapes the learning of the student (2004).

Multiple theories exist regarding learning. The underlying assumption of most learning theories is that adults have an internal drive, a self-directedness, that leads to success in education (Merriam & Caffarella, 1999; Wood, Saylor, & Cohen, 2009). Another assumption is that adults have life experience, and educational settings should value those experiences.

Community colleges actively seek students from all walks of life and tend to attract large numbers of nontraditional students. As described by DeYoung (2003) adult learners have multiple characteristics including culture, literacy, age, and socioeconomic status. Teaching in a prelicensure program offers an opportunity to start the novice nursing student in the right direction. Students express feelings of fear, anxiety, and being overwhelmed while in nursing school. Not only are they dealing with the pressures of school, but they may also be dealing with family and work responsibilities.

Malcolm Knowles first described adult learners as self-motivated, organized, and structured (as cited in Billings & Halstead, 2005). According to Knowles (2005) for a learning environment to be supportive and effective the learner must know why they are learning the information presented, have some control over their learning experience, be aware of the relevancy and usefulness of the information, and not feel unduly pressured by others imposing their will upon them. As described by Wyatt (2011, p. 14), “Adult learners spend much more time on academics and subject matter and are highly focused, serious, and more motivated than the traditional college student.” These students appear to be less involved in extra-curricular activities and more focused on working toward the goal of graduation.

According to Billings and Halstead (2005, p. 236), “Faculty’s beliefs about learning provide the assumptions that underlie the approaches used in their teaching.” Working with students of different cultural backgrounds poses challenges. Malcolm Knowles’s adult learning principles lend support to the creation of a supportive atmosphere for the learner by providing specific guidance for the establishment and maintenance of an attractive and motivating learning environment for students. Knowles’s principles lend credence to respecting the individual learner, making sure instructions and procedures are clearly stated and that their experience and expertise is acknowledged from the first contact with the course instructor.

Knowles’s entire body of work supports placing the focus of the educational experience on the learner with the instructor in a supporting role. Providing relevant and immediately applicable learning opportunities helps establish a sense of security in the learner. Adults need to know why they need to learn information, must have some control over their learning, want to have their experience and expertise acknowledged, resist learning when they feel a loss of control, are ready to learn when they perceive a need to know the information, seek to understand how they can apply the information in their reality, and respond better to their own internal priorities (Knowles, 2005).

Motivation to learn is a key component of every adult learner. Intrinsic motivation occurs when the student has a personal desire to succeed. Extrinsic motivation comes from parents, spouses, or other external forces. Motivated students tend to achieve educational goals with energy and persistence and become lifelong learners (Hastings, West, & Hong, 2005). The exact motivator will be different for each student as it is influenced by the learner’s background and experience. For example, some students enter nursing for job security or financial stability while others simply want to help people.

Minority Student Success

When reading nursing education literature it is evident that student attrition in the minority population is a very real problem. Research on this topic can be found in all levels of nursing education. There is a lack of research, however, when it comes to identifying factors that lead to success in minority students. When searching for published research using the terms “success” and “minority nursing student” very few articles were identified. Wood, Saylor, and Cohen (2009) examined the relationship between locus of control and success in minority baccalaureate nursing students. The students in this study identified three major factors that they believed led to their academic success: study strategies, persistence, and supportive social connections. These students also believed personal attributes such as intelligence and the calling to be a nurse contributed to their academic success.

Interestingly, Alecia-Planas (2009) described factors that led to success for some Hispanic nursing students were barriers to success for other students of the same culture. These dichotomies were described as either facilitators or barriers. For example, financial aid significantly influenced academic success as it allowed students to work fewer hours. But for students who were not familiar with the processes of financial aid, it became cumbersome and discouraging. Students who persisted and found success in their nursing programs described themselves as being self-motivated and self-determined. Many of the students had been told by others that they possessed a quality that would bring them success (Alecia-Planas, 2009).

Summary

The problems of minority student attrition from nursing programs have not been solved by exploring the reasons for attrition. Study after study shows the same factors that lead to attrition: lack of faculty support, monetary issues, lack of family support, and cultural

differences. These issues are nothing new in nursing education. Focusing on why our students fail seems to be a negative way to approach the problem. Although we have large numbers of minority student attrition, we also have minority students who graduate from our nursing programs. Many of our graduates go on to receive bachelors and master's degrees in nursing and are very successful in their nursing careers.

Through research and individual experience nurse educators have knowledge of the issues that students face. This research has led to wonderful educational interventions for the minority population. But do faculty members truly know what our successful students are doing in order to be successful in the first place? Do these successful students use the strategies that nursing research has identified as factors that lead to success? In conclusion, it is hoped that viewing the adult minority student holistically nurse educators can begin to understand “what it takes” for minority students to be successful in predominately Caucasian nursing programs.

CHAPTER 3
RESEARCH METHODS

Introduction

This chapter describes the qualitative research design and methodology that were used to conduct the study. The purpose of this study was to describe the influencing factors that lead minority nursing students to be successful in predominantly white prelicensure nursing programs. In considering this purpose, a basic descriptive design was employed. The research design, procedures for selection of participants, protection of human subjects, data collection, data analysis, and interpretation are presented.

Research Questions

The research questions are aimed to discover the influencing factors that help individual minority students become successful graduates of prelicensure registered nursing programs. The specific research questions guiding the study are:

1. What are the factors that lead minority students to become interested in nursing as a profession?
2. What are some of the obstacles that minority students had to overcome to achieve academic success?
3. What are the influencing factors for minority students that contribute to their success in a predominantly Caucasian nursing program?
4. To what extent does academic involvement with other students, faculty and staff, and the college environment contribute to the success of minority students in a predominantly Caucasian nursing program?

Study Design

The constructivist paradigm of qualitative research assumes a relativist ontology, a subjectivist epistemology, and a naturalistic set of methodological procedures (Denzin & Lincoln, 2005). Knowledge is constructed within the individual. The goal of this type of research is to gain an understanding of the phenomenon not to predict or control it. According to Merriam (2002) qualitative research contains the three major characteristics of understanding the meaning that people have constructed in their lives, the researcher is the primary instrument for data collection and analysis, and the end product of the research will be richly descriptive.

The nature of the study was focused on the concept of finding meaning in the experiences of minority nursing students who achieve success in their nursing program. Using qualitative inquiry allows the researcher to seek the real meaning, structure, and essence of those being studied. As described by Sandelowski (2000, p. 336), “Researchers conducting qualitative studies want to collect as much data as they can that will allow them to capture all of the elements of an event that come together to make it the event that it is.” Qualitative description is used when the researcher desires to describe a phenomenon rather than explain it (Sandelowski, 2000).

Although one could argue that quantitative description could produce similar results, the study would lose the deeply personal and richly descriptive findings that can only be discovered by qualitative description. Because the purpose of this study was to describe the influencing factors that lead minority nursing students to be successful in prelicensure nursing programs, a descriptive design provided rich inquiry into each individual participant’s experience.

The Role of the Researcher

In qualitative research the researcher becomes the instrument used in data collection and data analysis. During this study the researcher served as the instrument in several distinct respects. First, personal experience and knowledge (or perceived knowledge) with and of each participant was identified and reflected upon prior to each interview. Having a limited personal and professional knowledge of each participant in the study could have affected how each interview was subjectively approached. These factors were acknowledged prior to each interview in order to obtain a fresh, open view of each participant. Second, working with the recorded and transcribed interviews allowed immersion in each participant's experience. While reviewing the participants words on a transcribed page, their voices were heard and their facial and body expressions were recollected, which led to a deeper understanding of each individual experience. Third and last, data immersion with personally developed codes led to descriptive themes.

Sample

Most qualitative research consists of small, purposive samples. This purposive sample was comprised of African American, Native American, Hispanic American, and other students who are identified as minority students in a community college system located in the southeastern part of the United States. For the purpose of this study other minority students included any student for whom English is identified as a second language. The participants were approached to enroll in the study because of their educational accomplishment of completing at least an Associate's Degree in Applied Science in nursing and passing the National Council Licensure Exam (NCLEX) on the first attempt. Recruitment occurred through email contact of personally known potential participants.

A bigger sample was anticipated, which may have yielded additional results. However, once the potential participant had been approached on two occasions, it was considered unethical to continue asking the potential participant to be involved in the study. The final sample size was designated by data saturation. Recruitment and interviewing continued until common themes began to emerge from several different participants. Seven participants were interviewed to reach saturation.

Data Generation

Setting

The study was conducted at a mid-sized community college in the southeastern United States. Participants were asked to choose the location of the interview with the expectation that the location would be quiet enough to allow audio recording. One participant chose a satellite campus location near her home. One participant chose to be interviewed in a campus library study room. Five participants chose to be interviewed in the researcher's work office setting when no other faculty members were present. Of these five three were interviewed during evening hours and the remaining two were interviewed during the weekend. The locations of all interviews were selected in relation to proximity to the participant's home.

Semistructured Interviewing

Potential participants were contacted via email or telephone to establish rapport, explain the study, request participation in the study, and schedule an appointment for an interview. Data were collected using individual, face-to-face semistructured interviewing that allowed the participant freedom to move the interview in any direction to best describe factors that led to his or her success in nursing education. According to Bernard (1988) semistructured interviewing is best used when there may only be one chance to interview someone. As the participants were

fairly new graduates, most worked night shift, which limited the amount of time participants were available for the interview. An interview guide was used to insure that each participant was asked the same questions. Interviews were recorded using the researcher's personal digital recording device.

The following open-ended remarks and questions were used to begin the interviews: "Please describe what led you to choose nursing as a profession." and "Can you tell me your story about your journey through nursing school?" Once the participants appeared to have completed their stories or descriptions of their experience, they were then asked to describe why they believe they were successful in the nursing program. Participants were instructed to notify the researcher if they had anything to add or delete after the initial interview. Follow-up information was sent via email to the researchers private, password protected email address. The complete interview guide is found in the appendix labeled *Interview guide*.

Demographic Data

Demographic data were collected and displayed in Table 1 on page 44. Demographics allow the reader to develop a contextual basis of the participants. Collected data included interviewees' age, race, marital status, number of children, city or country of origin, and employment status while in nursing school.

Data Analysis

While qualitative research does not have a standardized method of data analysis (Saldana, 2011), Sandelowski (2000) described qualitative content analysis as "the analysis strategy of choice in qualitative descriptive studies" (p. 338). Patton (2002) defined qualitative content analysis as "any qualitative data reduction and sense-making effort that takes a volume of qualitative material and attempts to identify core consistencies and meanings" (p. 453).

Following the principles of content analysis, data analysis began with the first interview. As data collection and analysis were ongoing, interview questions were revised in subsequent interviews to acquire additional data on emerging themes. During each interview process personal field notes were taken regarding the tone of the interview. Field notes also reflected body language, facial expressions, and gesturing of each participant. Each interview was transcribed word for word. Each recorded interview was played multiple times, while notes were made on the transcribed copy of the interview if emphasis was noted in the participants' verbal tone. Transcribed interviews were read and reread in order to gain intimate familiarity with the content. Memoing was used to capture ideas and insights while reviewing the transcripts. This method of content analysis led to small revisions of the interview questions after the first couple of interviews.

Coding took place over a period of several months. The computer software program Nvivo 10 was used for organization of identified codes, known as nodes in the Nvivo program, in each transcribed interview. Codes were then sorted into overarching categories from which themes gradually emerged. Coding was done mostly through reflection of each participant's words on the transcript, listening to verbal tones during the interview process, and other observations from field notes. This coding process revealed 49 initial codes. These codes were then sorted into like categories using the assistance of Nvivo software.

Rigor

Ensuring Trustworthiness and Credibility

The process of ensuring trustworthiness and credibility in qualitative research involves multiple steps. The researcher followed Lincoln and Guba's evaluative criteria for qualitative

inquiry. Following the style of Lincoln and Guba (1985), it is imperative for the qualitative researcher to establish credibility, confirmability, and transferability.

Credibility. Credibility is the process of developing confidence in the “truth” of the findings. Credibility can be established using a variety of methods including triangulation, prolonged engagement, peer debriefing, and the use of member checks (Lincoln & Guba, 1985). Triangulation is used in qualitative research to ensure the description is rich, robust, comprehensive, and well-developed (Lincoln & Guba, 1985). Prolonged engagement between the researcher and participants helps to develop rapport and trust. This process of prolonged engagement allows for a deeper understanding of the situation so that the context is better appreciated and understood (Cohen, 2006). This was achieved by having achieved a prior positive rapport with each participant in the study prior to the interview process.

Confirmability. Confirmability is the process of showing that study findings are shaped by the respondents and not by the researcher’s bias, interest, or motivation (Cohen & Crabtree, 2006). Confirmability is sought using audit trails. An audit trail is “a transparent description of the research steps taken from the start of a research project to the development and reporting of findings” (Cohen & Crabtree, 2006). While working with transcripts and audio recordings, each participant was contacted if questions arose regarding the participant’s account of his or her experience. Each participant read, signed, and was given a copy of an informed consent that listed contact numbers in case the participant needed to make additions or deletions from the original interview. Participants were given the opportunity to read their individual interview.

Transferability. The final aspect, transferability, is the intent to show that research findings have applicability in other contexts. Thick description is the process of describing an area of interest in sufficient detail to which one can evaluate the extent to which the conclusions

drawn are transferable to other times, settings, situations, and people. Lincoln and Guba (1985) suggest using thick description as a way of achieving a type of external validity. It is hoped nursing programs can use the stories and experiences described in this study to attract and retain minority students.

Ethical Considerations

After receiving approval from the university Institutional Review Board (IRB), potential participants were contacted and enrolled in the study. Informed consent was obtained from participants before completing the demographic information and proceeding with the interview. The informed consent was thoroughly reviewed with each participant in both oral and written forms. The consent form, approved by the Institutional Review Board, is found in Appendix B. Risks and benefits of the study were described to each participant individually, with ample time allowed for questioning by each potential participant. Participants were made aware of the voluntary nature of the study and given the option to opt out of the study at any time without consequence. Each participant initialed each page of the consent document indicating it had been reviewed and explained. Each participant, along with the researcher, signed and dated the back page of the consent form. Participants were given copies of their consent form. Each copy contained contact information in case questions or concerns arose. There was no offer of payment or reward for participation in the study.

The confidential nature of the study was emphasized to each participant. In order to protect the identities of participants and the institution, pseudonyms and other nonidentifying descriptors were assigned to each participant and institution. Identifying information was removed. Interview transcripts and field notes were filed in a secure, locked location. Information kept electronically was password protected with only the researcher having access.

All information gathered from the interviews was used for research purposes only. Each participant was assured that all transcripts and audio files would be destroyed after data analysis was complete.

Risks and Benefits

There were no foreseeable risks associated with the study. Even though the study involved discussing potentially stressful times in the lives of the participants, all participants experienced success in their academic endeavors. A benefit of the study for the participant is to contribute to the growing science of nursing education, specifically in the area of minority nursing education.

Summary

In conclusion the study design is based on descriptive case study qualitative methodology using individual, semistructured interviews to investigate factors that lead to success in nursing programs for minority students in predominantly Caucasian nursing programs. Data were collected from recent community college graduates representing several minority groups including African American, Hispanic American, Native American, and English as second language students. This process served to provide a graphic representation of the minority student's experience of success when facing multiple demands and potential barriers to success. Therefore, the goal of the research is to gain an understanding of the phenomenon of academic success of minority students, to contextualize the issues of their particular socio-cultural-political milieu, and possibly gain the knowledge to transform or change social positions of future minority nursing students.

CHAPTER 4

RESULTS

Bitter are the roots of study, but how sweet their fruit – Cato the Elder

Presentation of the Findings

This chapter presents the findings of this study of minority nursing students. The purpose of this study was to describe factors that led to success of minority nursing students in an associate degree nursing program. Participants were identified and selected from an associate degree nursing school with a predominantly Caucasian female student body.

The specific research questions used to guide the study were:

1. What are the factors that lead minority students to become interested in nursing as a profession?
2. What are some of the obstacles that minority students had to overcome to achieve academic success?
3. What are the influencing factors for minority students that contribute to their success in a predominantly Caucasian nursing program?
4. To what extent does academic involvement with other students, faculty and staff, and the college environment contribute to the success of minority students in a predominantly Caucasian nursing program?

Introduction of the Participants

Semistructured interviews were conducted with seven registered nurses who had recently graduated from a predominately Caucasian nursing program. Ages of the participants ranged from 30 to 50 years old. Four of the participants were born and raised in the Southeastern United States, while the remaining three participants were born in the former Soviet Union. The

participants from the Soviet Union lived through the breakdown of the Soviet state and now consider themselves as natives of Ukraine (2 participants) and Lithuania (1 participant). Four participants reported speaking more than one language fluently.

Three participants identified themselves as African American, three participants identified themselves as Caucasian, and one participant identified herself as Hispanic American. Five of the participants were married while in the nursing program, one participant was divorced and one participant had never been married. Five participants had children. Four of the participants had family members who worked in healthcare as either nurses or certified nursing assistants. Three participants had prior working experience in healthcare: one licensed practical nurse, one certified nursing assistant, and one dental assistant.

Each of the seven participants had some level of college education prior to returning to school to become registered nurses. Four of the participants held college degrees in other disciplines, such as business, education, language arts, and nuclear engineering. Interestingly, these four participants each held more than one degree in various fields. The remaining three participants had prior college credits in areas such as engineering and dental hygiene but did not finish the degrees.

Pseudonyms were used to protect participant confidentiality. The participants were given the opportunity to choose their own pseudonym. Interestingly, two of the participants deliberately chose “ethnic sounding” names in order to intentionally represent their ethnicity.

Demographic Descriptives

Demographic information was collected and is displayed in Table 1 to provide a contextual basis of the participants. The data were collected during the interview process with

each participant. Next, brief individual profiles of the participants are shared to introduce each participant as an individual with a personal story to tell.

Table 1
Participant Demographic Summary

Pseudonym	Age	Marital Status	Race/ Ethnicity	Employment Status	Prior College Degree	Number of Children	Country Of Origin
James	50	Single	African American	Part time	Yes	0	United States
Maria	30	Married	Hispanic American	Part time	No	1	United States
Jenell	30	Married	African American	Not employed	No	3	United States
Anna	41	Married	Caucasian	Not employed	Yes	1	Former U.S.S.R. Lithuania
Paul	42	Divorced	African American	Part time	No	3	United States
Ilena	33	Married	Caucasian	Not employed	Yes	1	Former U.S.S.R. Ukraine
Lilia	32	Married	Caucasian	Part time	Yes	0	Former U.S.S.R. Ukraine

Participant Profiles

James

James is a 50 year old African-American male who had graduated with an associate degree in fine arts and an associate of science degree in prephysical therapy and after being unable to find work related to his degrees, he began working as a certified nursing assistant. He stated that he was working too hard and making too little money and decided to return to school to become a registered nurse. He completed his associate degree in nursing after originally failing out of a generic program, completing a licensed practical nurse (LPN) program, and re-

entering the associate degree program through the LPN-RN bridge curriculum. After 5 years in the community college system, James proudly walked across the stage as the first African-American male to graduate from his school's nursing program.

While in nursing school, he was single, had no children, and lived with his mother. James described his experience as an LPN as a vital step in becoming a registered nurse. Although he had worked in multiple healthcare settings throughout his lifetime, he did not gain the experience required to be successful in an associate degree nursing program until he started working as an LPN. He stated his job experience as an LPN, working closely with registered nurses, allowed him to view the professional role of the registered nurse differently from what he perceived as a student.

Maria

Maria is a 30 year old female of Hispanic descent. She is married with one child. During nursing school she lived with her family in a home that was threatened with foreclosure. Maria completed her associate degree in nursing after taking several years off from college to work in the real estate industry. After the economic downturn of 2008, she chose to return to school to finish her degree in nursing. She describes her return to school as traumatic and stressful due to financial struggles within her immediate family. The desire to complete her degree, along with the love and support from her family, led her to return to school despite some apprehension. Having completed 78 college credits prior to transferring, she was sure she had the ability to do well in nursing school. She described dealing with financial insecurity as being the biggest stressor during her time in school. The fact that she was the only student of Hispanic decent in her class did not impact her success in school. In fact, she described only one incidence in which

her culture was even brought up. She proudly recalled when a faculty member described her as “her favorite student” because she spoke Spanish.

Jenell

Jenell is a 30 year old African American female who completed her associate degree in nursing over a 3-year period. She is married and lives with her three children. She described having an on and off relationship with her husband. Jenell described her desire to be a nurse as a “calling.” This desire to become a nurse surmounted the difficulties she experienced while in school. Receiving very little emotional support from her spouse, she found the support and encouragement she needed from family and friends. She stated that if it weren’t for the emotional and financial support from her father and other family members, she would not have been successful in school. Because she felt it was important to have some healthcare experience, she worked part-time as a certified nursing assistant during nursing school.

Anna

Anna, 41, immigrated to the United States from Lithuania after finding a job working for an international cruise line. Anna entered higher education in the former Soviet Union in the 1980s. She originally chose medicine as her vocation, but due to the competitive nature of education in the Soviet Union she was not accepted into her chosen field. She described working as a dental assistant in a country where no one received working wages. Because Communism prevented most citizens from becoming truly independent and self-supportive, Anna lived with her mother. She described feeling like a burden to her mother, so she began searching for jobs throughout Europe.

After the fall of the Soviet Union, Anna was able to find a job working for a major cruise line. The cruise line, based in Miami, allowed Anna the opportunity to immigrate to the United

States. While living in Miami she met and married her husband. After leaving the cruise industry, Anna became pregnant and gave birth to a child with Down syndrome. As a family they decided to move from Florida to their current home. While taking care of her special needs child, Anna began to think about returning to school to work in healthcare. With her husband's support, she returned to school to become a registered nurse.

Paul

Paul is a 42 year old African American male who returned to college after the recent economic slow-down left him without a job in the mortgage industry. Paul's job experience in banking was almost useless in the depressed economic climate. His children were almost grown, so he felt the timing was right to return to school. Paul had previously completed 73 college credits at a major state university but had dropped out of school after marrying and becoming a father.

Around the same time he had decided to return to college, Paul's brother became terminally ill. While staying with his brother, Paul observed the nurses who visited and provided care to his brother for the last 6 months of his life. He described how those nurses made a big impact on his life and led him to choose nursing as a career. Paul indicated his success in the nursing program came from his intense desire not to let other people down, especially those in the local African American community. Paul stated that the pressure of being the only African American male who was currently enrolled in the nursing program pushed him to succeed. James had graduated one semester prior to Paul's acceptance into the nursing program.

Ilena

Ilena, 33, immigrated to the United States from Ukraine after marrying her husband, whom she met through an online dating service. Ilena was raised by a single mother who

instilled the importance of education by pushing her daughter to become successful. After graduating with degrees in education, art, and music she returned to school for a degree in accounting. Although she was a successful businesswoman with a master's degree in Ukraine, she found it extremely difficult to work as an accountant in the United States due to her lack of English skills. Knowing that she needed to find a job, she looked to a profession in which she could care for others. Interestingly, she chose nursing despite serious reservations from her mother because nursing was poorly regarded in her country. She stated that her mother had very high expectations for her and wanted her to become an attorney. Despite language barriers and no prior healthcare experience, Ilena chose nursing in order to help others.

Lilia

Lilia, 33, immigrated to the United States from Ukraine after marriage. Like Ilena, Lilia met her soon-to-be husband through an online dating service. Lilia graduated from a major university in Ukraine with degrees in education and German. Once immigrating to the United States, she discovered those particular degrees were not useful in her new hometown. Despite speaking four languages, she knew very little English when she first came to the United States. While her husband and in-laws found her accent and limited English charming, she did not like receiving odd looks from strangers when she spoke. She began to study English in earnest on her own. She described learning English as somewhat easy because she had already mastered four separate languages (Ukrainian, Russian, German, and French).

Not having children gave Lilia the opportunity to return to college in the United States, this time majoring in nuclear engineering. She graduated from a major state university and began working as a nuclear engineer at a local factory. After working several months, she described being unfulfilled and unhappy. Through conversations with Ukrainian and Russian friends who

had also immigrated to the United States, she learned of the opportunities that were available in nursing. Although initially angry at her decision, Lilia's husband supported her need to change careers and provided support when she decided to return to school to become a nurse.

Thematic Findings

Let no feeling of discouragement prey upon you, and in the end you are sure to succeed.

-- Abraham Lincoln, 1860

Qualitative description was used to explore experiences of success of minority students in predominantly Caucasian nursing programs. The process of coding originally identified 49 distinct codes. These original codes and the process of data reduction are shown below in Tables 2, 3, and 4.

Table 2

Data Reduction – Initial Emergence of Themes

Family	School	Work	Education
<ul style="list-style-type: none"> • Family in healthcare • Family • Family in nursing • Mother's reaction • Spousal support • Support 	<ul style="list-style-type: none"> • Overwhelmed by school • Involvement in nursing school activities • Faculty support • School is challenging • Internship • Involvement in college environment • Pressure 	<ul style="list-style-type: none"> • Working in school • Studying at work • Study time • Work (general) • Attitude of Americans 	<ul style="list-style-type: none"> • Importance of education • Prior education • Differences in U.S. and other countries in education
Hurdles	Obstacle	Study	Faith
<ul style="list-style-type: none"> • Money • Illnesses • Injury • Escape from personal worry 	<ul style="list-style-type: none"> • Money obstacle • Guilt • "I felt like nothing" • Pulling down 	<ul style="list-style-type: none"> • Study time • Focus • Do what is expected of you 	<ul style="list-style-type: none"> • Calling
Language	Culture	Motivation and Working hard	Student relationships
<ul style="list-style-type: none"> • Culture • Overcoming language barriers 	<ul style="list-style-type: none"> • Race • Culture • Culture of nursing program • Attitude of Americans 	<ul style="list-style-type: none"> • Focus • No fear • Strong willed • I can do this 	<ul style="list-style-type: none"> • Family • Friends • Faculty
Nursing			
<ul style="list-style-type: none"> • Why choose nursing • Attitudes about nursing • To help others 			

After coding and identification of potential themes, each transcript was read once again, searching for emerging and reoccurring themes. This process of data reduction is demonstrated below.

Table 3

Continued Data Reduction – Further Emergence of Themes

Pulling Down	Lifting Up	Working Hard	Race and Culture
<ul style="list-style-type: none"> • Obstacles • Hurdles • Attitudes about nursing 	<ul style="list-style-type: none"> • Family • Friends • Faith • Student relationships 	<ul style="list-style-type: none"> • Motivation • Study • Language • Culture • Working in school 	<ul style="list-style-type: none"> • Nursing • School • Culture • Education

Subthemes were identified during the process of thematic review. Once themes and subthemes were identified, each theme was organized into categories intended to summarize and bring meaning to the text. Final themes and subtheme are demonstrated in Table 4 as shown below.

Table 4

Completed Data Reduction – Final Emergence of Themes and Subthemes

Teetering on the Abyss	Staying Upright	Reaching the Goal	We are not so different after all
<ul style="list-style-type: none"> • The educational abyss • The financial abyss • Personal health crises 	<ul style="list-style-type: none"> • Overcoming guilt • They Lift you up • Faculty support • Student life 	<ul style="list-style-type: none"> • I CAN do this • You either do or you do not 	<ul style="list-style-type: none"> • We all want to help others

The first predominate theme *Teetering on the Abyss* describes participant reflections on potential barriers that were surmounted on their journey to success. These potential barriers were further broken down into three subthemes: *The Financial Abyss*, *The Educational Abyss*, and *Personal Health Crises*.

As the participant moved away from and overcame each potential abyss on the horizon, elements of support began to appear. From this notion came the second predominant theme, *Staying Upright*. This theme emerged from participant reflections on the various aspects of

support that were needed while in nursing school. This theme was felt to have four important subthemes: *Overcoming Guilt, They Lift You Up, Faculty Support-Not Just Lip Service, and Student Life-Academic Involvement*. Each subtheme was inductively derived from participant description of factors that led to success.

The third theme, *Reaching the Goal*, emerged as the participants discussed personal behaviors and experiences that made them realize the goal of becoming a nurse was within reach. Two subthemes, *I CAN do this* and *You Either Do or Do Not*, emerged from participants descriptions of their personal experiences of success while in school.

The final theme, *We Are Not So Different After All*, emerged from participant reflections on race, culture, and their nursing programs. Because the majority of nursing students, no matter their race, choose nursing in order to care for people, *We All Want To Help Others* emerged as a final subtheme to illuminate the prevailing reason most people choose nursing as a career.

Teetering on the Abyss

There is a saying that permeates throughout nursing programs, “If it can happen to you, it will happen while you are in nursing school.” Many potential nurses have succumbed to life’s stressors while in nursing school. Attrition numbers, especially among minority students, can be as high as 50% in some programs. Most studies relate this attrition to the stress of coursework, family life, and financial responsibilities. The participants voiced similar stressors in their own experiences. Although stressed, they found a way to rise to the challenge of each stressor. An abyss is thought to be any bleak situation that appears to be inescapable. The predominant theme of “Teetering on the Abyss” arose from the idea that even though the participants felt like the pressures of the world and the stressors of school seemed to be pulling them down into an abyss, they were able to find a way to rise up above each challenge to find success.

The Financial Abyss. Reflecting the general population, several of the participants were hit hard by the recession that began in 2008. Two of the participants lost their jobs and were forced to make hard decisions regarding personal finances and about the future.

Maria's family was hit hard by the real estate crash that began in 2008. When selling real estate no longer paid the bills, she began to seriously consider returning to college to become a nurse. While taking prerequisite coursework and during her first 3 semesters in nursing school, her family's financial situation continued to spiral down and out of her control. She described experiencing having the Internal Revenue Service place a tax levy on her bank account that depleted the small amount of money she was using to pay bills. Having no other money, she was forced to contact the IRS by phone while also trying to study. The financial issues became exponentially worse, forcing her to defend herself in court on several occasions. She recalled the experience:

All through this time I had been taken to court for not paying my bills. I had been served three or four times during the first 2 semesters of school. I had never in my life experienced that. I had always paid my bills. I had excellent credit prior to the real estate crash. I remember standing in the courtroom going, "If they only knew what is going on right this minute," and nobody knew. Nobody ever knew in this school what was going on because I always kept it to myself. And I said, "You just have to keep going. You cannot stop now. You are in the middle of the lake, either sink or swim."

Maria not only swam her way out of the lake, but she also kept going once she made it to shore. After finding her own way to deal with the stress, she began to excel in school. By the time she graduated, she was performing in the top 10% of her class and was nominated for a clinical excellence award. Maria says she used studying and attending class as ways to escape from the

worries of her personal finance: “I knew in a weird sick way I would go to school and felt disconnected. I felt when I walked through that door whatever was happening [financially], I had to leave it. It was almost an escape for me.”

Paul experienced similar economic hardships while in nursing school. After losing his job as a loan officer he was able to collect unemployment while in school but it was not enough to cover his living expenses. He worked part time as a security guard for a while until he was hired in the tutoring lab at his school. Finding those particular part-time jobs were factors that led to his success, factors that helped him rise from the potential financial abyss that was looming. He stated: “A lot of people have to work, but I think I had two different jobs where I could utilize my time to study, whether I was sitting in that guard shack or sitting in a tutoring lab.”

Jenell expressed that many times her husband’s behavior pulled her down financially. Being unable to depend on her husband, her father stepped in to pull her up and allow her to continue in school. When asked about family support, she recalled:

Did I have a lot of support from my husband, NO. We are off and on anyways...My dad, I just love him so much. He paid my bills for me while I was in school. He paid my rent, my lights, my water, and my cable! He wanted me to succeed. My daddy taking care of the financial part...if he had not done that for me I would not have been able to do it.

The Educational Abyss. James’s experience in nursing school was different from the other participants because he originally failed out of the generic nursing program at his school and returned through the LPN-RN transitional program. The experience of failure pulled him down to one of the lowest points of his life. He described the experience:

I was devastated when I failed out of the program and my confidence was low. My co-workers could see that I was not my usual happy go lucky self. I came to work and

performed my job, but I felt like a failure, and I began to doubt myself. I did not want people to see me. I would take the cargo elevator to get to each floor or use the stairs to avoid people.

He described gaining the confidence he needed after graduating from the practical nursing program and passing the practical nursing licensure exam on the first attempt. Although proud of these accomplishments, he thought something was missing in his life. When he returned to nursing school through the LPN-RN transitional program he described feeling prepared and ready to succeed. He described being lifted out of his abyss when he returned to school and realized that he was capable of doing the work necessary to pass his coursework and graduate from the nursing program. Basic information he learned about nursing while in the LPN program aided James in the LPN-RN transition program. He stated, “Everything was still a learning process for me. I used what I learned in the LPN to help me through the RN.” Not giving up on his dream of becoming a registered nurse was really what spurred his success in the program the second time around. As he described it, “I think it was basically a conviction from me to get through the program. It did not matter how many times I got knocked down. I am going to get back up until those times had just run out.”

The experience of the participants who were classified as ESL students exemplifies how individuals can overcome obstacles on multiple levels to achieve success. The participants who immigrated to the United States had varying degrees of professional success in their home countries, but all had experienced educational success by receiving degrees from universities in their home countries. Once arriving in the United States, the participants discovered they were unable to work in their chosen career fields for various reasons. This realization came as quite a shock to Ilena:

In Ukraine, I was very successful. I always had a great job. I was just a confident professional in Ukraine. But when I came here, I felt like I was nothing. Especially after you already got your master's degree in Ukraine and had a great job with experience and everything. Then you come to a different country and barely speak English. You cannot even communicate. It was horrible.

Personal Health Crises. Two participants overcame injury and/or illness to succeed in school. Maria experienced a back injury during finals week in her final semester of nursing school. The injury caused excruciating pain. Because her first final exam was scheduled the next day, she refused to take any narcotic pain relievers. She described how the injury affected her at the time:

I went to the hospital and I said, "I just need you to make the pain go away." I could not breathe or talk, it was horrible. I knew I had to go to school the next day. I failed my first HESI and I did not just fail it, I mean I bombed it. I was mentally defeated at that point. I said, "I cannot believe I have worked this hard and I have gone through all of this to now fail at the last two weeks of school!" I went every day with my donut that I sat on or stood. I remember taking the next test. I walked in to take my management test and that day I was in so much pain.

Despite the injury, fighting through the pain, Maria passed her final exams. She expressed that she did not believe the grades came from her knowledge but from intervention from a higher power. She said from the start of her nursing education that God had placed her in a position to succeed in nursing school, and that God was with her once again during her final exams. She stated, "I think I got a 93 or 94, which I do not know how it happened. It was divine intervention again; because I was in so much pain I do not even remember the questions."

Ilena experienced a severe illness during her third semester in school, which required a 5-day hospitalization. Despite the illness, Ilena continued to work toward her degree in nursing. She credited her husband, a classroom friend, and her clinical instructor for being able to keep up with her coursework:

He would come [to school] and tell the instructors everything I told him to tell and bring me books. Just very, very supportive. [My friend] and I would call each other if we had any questions. When I was sick she would help. She would give some assignments and information to my husband. My instructor, she just gave me the assignments online instead of coming back to clinicals. Everything worked out.

When asked if she took time off from school to fully recover from her illness, she shook her head no. Immediately after being discharged she came right back to school, smiling she stated, “I had a test.”

Staying Upright

The theme *Staying Upright* developed from many participants describing instances in which they had to find a way, either from within themselves or with the help of others, to continue in school despite feeling overwhelmed.

Overcoming Guilt. Success for each of the participants came after the realization that sacrifices had to be made in order to achieve their goals. These sacrifices obviously affected each participant financially, but quality time away from family members and children took a toll emotionally on many of the participants. Maria recalled leaving her daughter with family members, “During school I remember feeling like she is not going to know who mom is, because she was with my mom or my mother-in-law or she would stay with my sister.” Ilena expressed

worry that the time she took away from her daughter to study and attend school has negatively affected her behavior:

A lot of times I felt like I did not have enough time for her unfortunately. She needed attention and she needed bad attention and I was not able to do this for her because I had to study all the time. Probably I will have consequences to this. Her attitude is not always good.

Jenell described she “felt guilty” due to the amount of time she spent away from her children while in nursing school. She stated:

As a mother, it was very difficult to be a student. I sometimes felt like a bad mother when I was in school because I didn't get to spend as much time with my kids as I wanted to. My boys were older so they were very understanding and helped me with their little sister a lot. They also wanted to see me succeed and understood that I was going to school to better our life. My baby girl on the other hand would make me feel terrible. I can remember staying up late studying and she would be up with me waiting for me to go lay down with her. She would say, "Mommy, are you almost done? Will you please just hold me?" I would always say, "In just a minute." Then those minutes would turn into hours and I would turn around and she would be asleep. It would make me feel awful! Needless to say, I thought about quitting school many of times because I felt like I was neglecting my kids.

Anna, the mother of a child with Down syndrome, had very little help caring for her son while in school. Because Anna was not working, her husband was forced to work long hours and could not care for their son. She was forced to study while simultaneously trying to care for her son. She described her situation:

I did not have any help with my son on [a] daily basis because my family was overseas and my husband's family was [out of state]. My husband was working long hours to support us while I was in school. Many times I felt really guilty when I had to study. Downs kids are very easy going, they don't ask for much. My son never complained even when his diapers were soiled. I remember studying for finals, long long hours. My son would walk by me, pat me gently on my shoulder, go to refrigerator, grab his food, feed himself and go to his room to play alone. The worst part of it all was babysitters and daycares. Since we needed them only part time they would constantly dump us. I never knew when I will need to find a new place for him.

The participants all expressed that spouses in particular would suffer and feel a sense of abandonment when it came time to study. Ilena stated, "A lot of times before exams I would try to crunch and every little thing would be annoying and be on my nerves. He would just try to be quiet and stay out of my way." Similarly, Lilia described that when she studied "the slightest noise would upset me." She laughingly reported once telling her husband to "take the dog and leave the house!" in order to have quiet time to study.

Anna described the stress that school placed on her relationship, which was especially difficult on her family because her husband was the sole income provider for the family.

I had difficulties because I had a special needs child, besides being not American. But there were some stresses in the family. Of course, my husband had to support us and I was never really any help. I just had to go to school and take care of my son. Sometimes I could tell that my husband was stressed out and that was the tough part. I used to have to tell him, 'You do not know how stressful it is,' and he would tell me, 'You do not know how stressful it is for me.'

Paul stated that any romantic relationship had to take a backseat to nursing school. He voiced that “the person you are with has to understand how much time and effort this program takes.” He described that his current girlfriend worked in healthcare, so he believed she understood the pressure he was under. He also stated that he was “lucky” that his children were “almost grown,” with the youngest one being in high school while he was attending nursing school.

They Lift You Up. The participants clearly stated that support from family and/or friends made the difference in whether they passed or failed their nursing courses. Maria’s Hispanic culture values the presence of extended family in all aspects of life. She described the support she received from her family while in school in the following passage:

I think if we go back to Hispanic culture, we are very tight, from Grandma and great Grandma all the way to youngest. That group is so tightly knit. If you cannot do this today, one of these other people are going to pick up and do it for you. It is like everybody graduated from nursing school. During graduation or during our ceremony, there was not a person [in my family] who was not bawling, because they knew that every minute of that journey was one hurdle over another hurdle and sometimes three hurdles stacked up on top of each other. They all had to be there for me to get through because I would not have been able to do it by myself. One of the proudest moments of our entire family has been that [graduation night].

The three ESL students came into the United States with prior success in the universities of Eastern Europe. Anna attended a university in Lithuania, while Anna and Lilia attended universities in Ukraine. These participants talked about the importance of receiving an education in their home countries. Anna, Ilena, and Lilia knew that education was expected from their

parents. “Everybody goes to school in my family,” reported Anna. “Education is [the] number one priority.” Ilena described how a very large percentage of Ukrainian citizens have college degrees: “It is sort of cultural there. In general a lot more people have masters and bachelor degrees than here in the United States.” Lilia’s entire family had received college degrees and they expected the same from her. She stated, “Since I was born I knew I had to have an education. It is not an option.”

The three African American participants also reported receiving support, both emotional and financial, from immediate and extended family. Because of the small African American population in the geographic region of the college, the participants described feeling lifted up by the African Americans in their communities. Paul described the feeling of support he felt as overwhelming. While working in the tutoring lab, Paul got to know several African American faculty members and saw how they worked with many minority students, mostly athletes, who came through the lab in need of academic support assistance. The feeling of support described by Paul:

They are all black and they all knew I was in the [nursing] program, and they took interest in me. They would come up to me and ask me how I was doing. The black community is a little different. I do not know how to explain it, but I felt like they were all pulling for me. I felt like every place I went everybody knew who I was, which is not a bad thing.

James’s sources of support came mostly from coworkers and friends. While his mother supported him in everything that he attempted, he described feeling the most support from his coworkers.

My coworkers always encouraged me to do my best, not to give up, and to take things one day at a time. They helped me understand nursing procedures and many called me to see how I was doing and offered help if I needed it. Some of the administrative staff called me at home to encourage me to not give up. There was not a lot of family pushing me. They were proud of me but we never talked about it.

Parents, grandparents, and friends all pitched in to help Jenell when she needed someone to watch her three children when she needed help.

My mom and mamaw helped by watching my kids. They watched them when I needed to study, had clinical or just other things that I had going on for school. They also cooked for me and my family through school. They knew that I didn't have a lot of time to do a lot of things, so they always made sure we had a hot meal every night. Without the help of my family, I would have never made it through school.

While the participants were not specifically asked about religion or faith as influencing factors, Jenell and Maria spoke often regarding the influence of a higher power in attaining their educational and career goals. When Maria was struggling with the decision to return to school, she stated she was certain that God was in control of her educational and financial destiny. She described feeling that a higher power was assisting her throughout school, reasoning that every passed exam was God's way of preparing her to care for others one day as a registered nurse. She stated, "I always said if everything falls into place then God wants me to do it." As she described how she overcame each potential obstacle, with hands in the prayer position she pointed upward and said, "Again, thanks!" Jenell described how her Christian faith influenced her success:

I feel like I have a very close relationship with the Lord. Growing up my Mamaw always took me to church. She always let me and my sister know that we could never get through this cold world without God on our side and in our life. While I was in school my spirituality was a big part of my success. I always had to repeat to myself while I was in school, "I can do all things through Christ that strengthens me." I also remembered hearing in church the words, "God will never put more on you than you can bear." Saying those two things, prayer and guidance from God helped me get through school. I know I couldn't have done it without Him.

Maria described her family as being her "cheerleaders" during school. Recalling her first semester in nursing school as completely overwhelming, she went home one day after class and told her family that she was not going to be able to pass the coursework. Her family told her, "You can do this. We will help you, just focus." Her parents and husband provided the lift she needed to return to class time after time. No matter how defeated she felt, her family would lift her up. In the end she said she would do it all again, if for no other reason than the feeling of pride that her family expresses in her success. She stated, "I would do it all again, because I know my family is super excited. I swear, any chance my sister gets it's, 'My sister is a nurse.'"

The ESL students all relied on their husbands and the husband's families for support as their own families were back in their home countries. While Ilena and Anna described their mothers as being proud of their accomplishments, they did not voice receiving emotional or any other type of support during school. Anna described her mother-in-law and her husband's family as being supportive as she attended school. She stated, "They were very proud that I went to school. His mom was so happy for us." Sadly, Anna's mother-in-law passed away 3 months after her graduation, but she was thankful that she was able to see her graduate. Ilena described her

husband as being supportive of her decision to return to school. She stated, “We talked about it and he agreed that I needed to get an education. I was blessed with my husband that I had total support from him while I was trying to do this.” Her husband would cook, clean, and do whatever was needed around the house while she studied.

Lilia decided to return to school, once again, after feeling empty in her job as an engineer. She described herself as a joke in her family as “the crazy person who likes degrees.” When she approached her husband about returning to school, he became so angry that he did not speak to her for one week. She said, “My husband thought I was crazy. Which I explained to him that I was not happy.” Once he was able to recover from the initial shock of Lilia returning to school, she says her husband was very supportive.

Faculty support – Not Just Lip Service. Nursing education research frequently touts the importance of faculty support and guidance in the success of nursing students. The participants were asked to indicate if they felt faculty were supportive of students. All of the participants voiced that the nursing faculty offered support and assistance. James described how he perceived the faculty to be caring and supportive toward all students. He stated, “It was the professors, I could tell that they really cared about the students. They wanted them to succeed and it was not just lip service. Even at the worst times when I was not even sure I was gonna make it; it was like somebody was always there.” Lilia described being somewhat shocked at how willing the faculty were to offer help. She stated, “The teachers here, they actually care for a change.” She went on to discuss that when she was a student at a major university she would sometimes wait 2 hours for a faculty member to meet with her, only to find out that the faculty member was “stuck somewhere” and could not meet with her.

Surprisingly, many of the participants indicated little interaction with faculty outside of the classroom. Only rarely did any of the participants need to interact with faculty, usually only to ask a question or to clarify information. Anna's experience with faculty was limited, she explained, "If I had questions I would go to the teacher, but usually I would just figure it out on my own." Lilia and Ilena voiced that they knew they could rely on faculty if necessary, but they also felt more comfortable figuring things out on their own.

All of the participants reported feeling that faculty provided all of the information and tools needed to be successful in the program. Maria voiced that she was fortunate to always be able to remember what faculty members said in class. She stated, "that ability to know what you guys were saying and understand what you were saying was what helped me to get to the point where I got, which was to graduate." Lilia voiced that faculty were very specific in what was required for success. She spoke with amusement when recalling a conversation with a fellow nonminority student:

If you actually follow the instructions you will be just fine. Many people have problems with just following the instructions. If they told you to read the chapter, there is probably a good reason why they said it. If you do your work, which I did, that's just all that it takes. I kept telling people there is no secret to it, because they would ask me.

Maria described feeling comforted knowing that faculty was always present, offering words of encouragement to all students. She stated:

Most of you guys, because I think that maybe you did not know what was going on outside [in my life], but there was always somebody who said either [walking] down the hall or whatever that would say "keep it up" and even though nobody knew what was

going on outside those little things were like, if they are telling me this then I can keep on going!

One participant voiced that while he had an overall positive experience with faculty members, two particular faculty members caused him unnecessary stress while in the nursing program. Paul recalled how he had met one particular faculty member during summer break in a nonacademic setting. The faculty member was friendly at the time, but when he became a student in her class he felt her demeanor was intimidating. He described the entire class as thinking “she was trying to ‘get us’.” He described the faculty member as “old school.” Even so, he recalled, “I would go to talk to her and I felt she does want you to succeed. She does want you to pass.” He could only describe having one instructor who he considered “really did not care if I failed or passed.” He went on to say, “It’s not that she was ever mean to me. Whenever I saw her in the hallway she was always nice to me. I just felt like she had done this for so long that she has lost a little bit of that compassion.” He described these two faculty members as “being cut from the same cloth” and that “maybe it was just a generational thing.” Even so, he went on to state, “Other than that, I do not feel like there was a teacher here that I could not talk to. Everybody generally wanted me to succeed and me to pass.”

James’s perception of a caring faculty did not mean to imply that they would decrease their standards for minority students. He stated, “The faculty here is colorblind. They treat everybody the same. They expect a certain performance from the students and a certain number have to pass in order to keep the school accredited. I felt the faculty treated me basically the same as everybody else as far as help and support.”

Student Life – Academic Involvement. The participants were asked about their involvement in college activities and clubs, specifically the student nurses association (SNA).

Paul was the only participant who chose to become involved in campus activities. He described developing a real need to become involved after reading an article written by a nursing student who suggested all nursing students should become involved in campus activities. He chose to join the SNA in his first semester and became the treasurer by his second semester. He described his experiences:

I am so glad I did it. I like to talk and meet people. For me, the most fun times I had at SNA was coming to new student orientation and sitting off to the side and answering questions that everybody had and doing the senior breakfast. Seeing those guys graduate just made me so happy. Those are the two things I truly enjoyed out of SNA.

The remaining participants all voiced how they would have liked to participate in college clubs and activities but stated they did not have time. Maria was a member of the SNA but never attended meetings. She recalled not paying club fees, so she never knew when the meetings were held. She said, “There was just so much going on. I fell out.” Lilia stated, “I didn’t want to spread myself thin. Even though I loved all those things I knew I probably more than likely would not be able to keep up with all of it, because I do not do something half way. If I am in there I would want to participate and do the things.” Anna explained she would have liked to have been involved in the student nurses association, but because her son had special needs she couldn’t be away from home unless absolutely necessary.

Reaching the Goal

True success in any endeavor requires persistence, patience, and hard work. “Anything worth having does not come easy” was a common phrase used by a participant when describing the hard work and determination that it took to gain a nursing degree.

I CAN Do This! The participants described arriving at a point in time in which they realized their dream to become nurses was actually within reach. Some participants discovered late into the nursing program that they possessed the ability to succeed, while some knew from the very first semester that they would do well. Paul knew from the first few weeks in the nursing program that he would be successful. He stated, “I remember thinking, ‘I can do anatomy and I can do micro. If I can do 20 hours [per semester] then I can do this program.’ I was like, okay, I can do this!”

Maria recalled returning to school as a terrifying experience. An aversion to math very nearly caused her to quit school before even applying for the nursing program. But she overcame her fear and persevered, passing every math exam that was required. With these perceived obstacles out of the way she entered the nursing program. She described how uplifted she felt by her accomplishments and receiving her acceptance letter into the nursing program, “I remember I was crying with laughing. It was such a feeling of accomplishment, which I had not felt up until that point. I had not felt that personal gratification of, ‘I did this’, and that is what I felt when I got that letter.”

Jenell used negative comments from her husband and acquaintances as momentum to accomplish her goal. When asked to describe the events that made her realize she was going to succeed she stated:

You know, I think first of all my husband. Because I think he thought I was not going to do it. And I knew I was going to get through this to show him that I can do this... I do not need you. I think there were a lot of other people who were like, “Three kids?” and “She is not going to get through this.” I had heard how hard the nursing program is and you know, it was just something that I wanted to do for myself.

When discussing the decision to return to college in the United States, there were no reservations by any of the participants. Anna described her journey back to college, “Education was everything so when I got here, I always knew I had to do it, because I would be nothing without my education.” The only concern she held was in her need to translate reading materials. She recalled being terrified of taking nursing exams only because she feared essay type exams. She knew she would be fine when she saw the first exam. She recalled,

I did not know here you had multiple choice. We do not have it back there in Soviet Union, every answer is an essay. Here you have an answer in front of you. You just have to pick. When I first saw it I was like “Really? I can do this!” But when I did not know, I was like “How am I going to write an essay in English on every exam? It is just impossible!” But once I learned, it is not so hard. I did not know that I am that good. I remember when I took my sociology I aced it and I was like, “Yes! I can do it!”

Lilia recalled that the first semester in nursing school was the most challenging, but after the first couple of months it became much easier. Once she realized that she was actually using what she learned in the classroom in the hospital setting, everything fell into place. It was at this point that she realized she had made the right decision in becoming a nurse.

Despite research suggesting that study groups are beneficial in aiding minority students in nursing school, none of the participants found study groups to be helpful. In fact, most of the participants described study groups as distractions. Lilia preferred solitary study:

I study by myself always. I actually found it distracts me even more. I could help you if you needed help, but I do not like all the group stuff because I know what works for me and that is it. It takes me a lot less time. I memorize it all better. It is something that always worked for me. I never depended on anybody's help even though if I hear people

say something I memorize it better. But I found it can confuse me more. I just do not like to hear anybody's opinion on anything.

James also preferred studying on his own, mostly because he continued to work night shift while in school. Because he worked night shift, he tended to study at night. He stated, "I would sleep from 8:00 pm until 2:00 am, get up and read the assigned chapters and answer the questions. This way of study worked best for me." While Paul would sometimes study with a few of his closest friends in class, he too preferred to study alone. He stated,

I just developed my own routine for studying. I would stay up literally all night before the test and study. I would pass out, get an hour of sleep, and get up and start studying again. Nobody else wants to study like that so study groups did not really work out for me."

You Either Do or You Do Not. The initial shock of the amount of work almost overwhelmed Lilia on her first day. She smiled as she recalled the experience, "It was very scary and very overwhelming with all this information. And I was like 'I have to get organized' was my first thought, otherwise it was so much information. There was so much information from everybody." Jenell also initially struggled with the sheer amount of material. She recalled her second semester in nursing school, "I barely passed, that was a hard semester... We had so many chapters at a time. That was really, really rough. I felt like I studied, studied and studied... But I got through it."

Each participant was asked to give advice to a theoretical nursing student, with backgrounds similar to herself or himself. The most common advice offered was to focus on studying the material, despite other things that might be going on in their lives. Ilena suggested that ESL students must all work hard and study hard. She advised that school must be the number one priority: "If your family is number one, your husband is number one, your job is

number one, you will not be able to survive. It is a very difficult program. I would have to study for 10-12 hours.”

Continuing with the theme, Maria expressed that the hard work that went into getting her degree was worth every moment. She said,

Is it hard? Yes. What is easy? Anything that is easy does not come cheaply in any way.

Work hard. You will feel so much more accomplishment when you are done. You will feel like, I did it! Nobody did this for you. You have support around you, but you can have all the support but if you do not put your mind to do it you cannot do it.

She described the intense relief she felt once she had graduated and passed the licensure exam:

I still get goose bumps because I remember feeling at that point like I cannot believe it, I cannot believe that this has happened. I cannot believe if I go back and think of everything how it has gone, every odd was against me, I should not have been able to do this and I did.

James described nursing school as a place that “does not give you anything” and that “you earn it.” He also related, “You have to be focused and you got to want it. You definitely have to want it.” He stressed the importance of taking the time to study. He stated, “You have to have the right mind set, like ‘I am going to do this!’ Sometimes I did not feel like studying, but I did.” For James, part of wanting to succeed in nursing school meant letting go of certain things he enjoyed, such as television. He recalled the moment he realized that television was interfering with study time:

I would see something on TV and I would be like a zombie. I would think I could watch for a few minutes and resume study. The few minutes would turn into hours. The next thing I know, I’m waking up on the couch, hours have passed by, the TV is watching me,

and I haven't studied the first page of my nursing assignment. I feel that TV is one of the quickest ways to fail out of nursing school or any curriculum.

The three ESL participants each spent hundreds of hours translating notes and required readings. Anna said, "English is my third language and you add this medical language as a fourth language, so it was very, very stressful. For me, since it is not my own language, it takes me much longer to read." As described by Lilia: "Of course, learning for me was always a two-step process because I had to translate it first and make sure I understood everything." She expressed feeling disgruntled at times with her American classmates, especially when they would complain about the difficulty of the program. She stated, "Anytime people complain it [nursing school] was hard. I just laugh at their face." Ilena also recalled needing to translate frequently:

I remember it took me two days to read one page because I had to translate every second word, but I did well. I passed all the courses and I had good grades. I guess it is just that I had an attitude about this and just worked hard no matter what."

Anna also recalled the fear of returning to school, this time in America. Despite having college experience and holding a bachelor's degree in English, attending classes in the United States was frightening at first. She recalled:

You have to be really strong willed and stubborn to get there. When I just started I was really scared. I did not know how the system works. I remember I went just for my prerequisites. I registered and the lady said, "Why don't you go to sociology class and you are going to get your syllabus." I did not know what a syllabus was. I was like, "Do I need it?" because I did not know. Your heart is always trembling, but you just go and do. If you want to get somewhere, you have to do stuff.

We Are Not So Different After All

Despite looking different, or speaking differently than their classmates, the participants discovered soon into the nursing program that they were in the same boat with the other students. All participants were under extreme pressure to succeed in a very difficult academic program. The fact that there were very few minority students in their classes didn't keep the participants from achieving their goals. As described by Jenell,

I never felt that being a minority student was difficult in the classroom or in the clinical setting. I felt just as smart as the next person. I was treated with the same respect and dignity as the rest of the students. I have always been used to being a minority student. I come from a small town where there are not many African Americans. When I was in nursing school I felt really great about being a minority student, because I knew I was one in a few African American people that was blessed to have an opportunity to go to school and be successful.

James's experience was a bit different. Being an African American student and being male placed him into two separate minority categories in nursing. Although he had worked in various healthcare settings over the years, he had not seriously considered nursing until later in life. He described when he first realized there were no other African American men in the classroom:

I remember the day it hit me that I was the only black male in the program. I usually sit out of view of the camera. One day I moved to the back, in the center of the auditorium. I was busy doing something and I looked up and there I was, bigger than life in the camera. Like a fly in buttermilk. I noticed I was twice the size of the other students. I also noticed

I was the only black male in class. I began to think, “How many black male nurses had I seen?” The answer was zero. I didn’t even see any at my clinical sites. I was the first.

Other than recognizing himself as the only African American male in the classroom, he did not remember feeling as anything other than “just another nursing student.” James stated, “The students and staff never made me feel like I was different. I felt accepted. I felt wanted.” He described forming friendships with classmates, all of whom were Caucasian females, after being grouped together in class:

We were all going for the same goal. Everybody knew that we were all moving toward that same goal and we were all trying to help each other. Most of us were working, so we were doing things, exchanging numbers, exchanging emails, and trying to figure out each other’s work schedule, when we could get together, when we could help each other and basically try to be successful in the program.

Anna stated that the smaller numbers in her clinical courses helped her form closer relationships with fellow students. She indicated the physical, hands-on work in the hospital setting allowed the students to help each other and allowed for bonds to be formed. Lilia also stated she “enjoyed working in smaller groups” of students. While she indicated the group work as challenging at first, she learned this was the best way to get to know her fellow classmates. The group projects allowed her to “make memories” and “make friends.” She is still in contact with her friends from nursing school and keeps up with fellow graduates via Facebook.

Anna, Lilia, and Ilena each described the only time they ever felt different from others in school had to do with their accents. Two of the participants recalled instances when they worried about their ability to communicate, with Lilia and Ilena fearing “being made fun of” by others. Lilia went so far as to not speaking in class to avoid the attention that was brought to her accent,

“I really do not like to get close to people. Because especially here, because every time I open my mouth people look at me like I am weird.” She went on to discuss how nursing school helped her get over the feeling of being different. Working in small groups with her classmates, either through teaching projects or poster presentations, allowed her to open up to others. She stated, “These projects force you to get together. It’s fun!” Anna remembered being in the hospital while caring for patients thinking, “What if they cannot understand me and they are in pain and I am just talking gibberish?” She smiled at this and said, “You learn that they understand you.”

We All Want To Help Others. Nursing students frequently list helping others as their primary motive in becoming a nurse. This motivation was voiced again and again when talking with the participants about why they chose nursing as a profession. Several of the participants had family members who worked in healthcare as nursing assistants, licensed practical nurses, or registered nurses. Maria described feeling an affinity toward healthcare from a younger age, originally aspiring as a child to become a pediatrician. She described this urge arose from her family, as her great-grandmother worked as an operating room nurse in Cuba. As time passed, and obstacles veered her path away from medicine, she retained a strong urge to help others. As a teenager she volunteered in a Miami hospital, which allowed her to see how nurses work. She reminisced, “I really wanted to do that. I wanted to be that nurse.” She also felt that her family believed she had the caring nature and instinct needed to become a professional nurse. She stated, “My grandparent’s used to say all the time that I was the one that had that ‘thing.’ They could not describe it but if anybody was sick, I was always the one that would go. Or is someone had a problem I would go, so I think that they made sure to keep that in the back of my head.”

Jenell and Paul each realized that nursing was in their future after taking care of dying family members. Jenell remembered her experience, “I helped take care of my papaw when he

was dying of lung cancer. He was 55-years old. I enjoyed taking care of him.” This experience led her to take nursing assistant classes that led to a job caring for adults with disabilities. She describes these experiences as things that helped her identify her “calling.” She stated, “I just knew that my calling was to help people. I had always wanted to be a nurse. I love helping people. It is very rewarding, so I said I want to go back to school. So that is why I took up nursing. I feel like it is my calling.” She went on to explain how she and a cousin were the only people in her family to ever graduate from college, and they both graduated in nursing.

Paul also had family members who worked as nurses. He described watching how hard his ex-wife worked in school to become a nurse but was unsuccessful. He recalled never aspiring to be a nurse until having a deeply personal experience with nurses. Paul’s experience of watching nurses care for his dying brother led him into the nursing field. He stated, “I really needed something...my brother passed away. He had gotten really sick and nurses took care of him and made a big impact in his life, for the last 6 months of his life, and mine too. I thought that would be a really good career to do, and that is what really led me to think about nursing.”

Interestingly, all three participants from the former Soviet Union had never considered nursing as a profession in their home countries. Ilena had worked in the business sector prior to nursing, but she stated she had “always liked taking care of people.” She battled with her mother for a short time over becoming a nurse. As she described it,

She had this mentality that nursing gets low respect. She did not like nursing. In Ukraine nursing is not a very respectable profession. It is a low paid job and not very popular. She just did not understand how things worked here in the United States.

Anna had been interested in medicine but never nursing. She described nurses as being “pretty invisible” in Lithuania. As for nursing education in Ukraine Lilia conveyed,

I never thought about healthcare because it is very hard to get in. To get education is very competitive. So maybe that is why I never thought about it. It never even crossed my mind because I know that more than likely I would never even be able to afford the education.

Only after immigrating to the United States did the ESL participants realize the respect and admiration that nurses possess. Lilia made several friends who had immigrated from Russia who were working as nurses in the United States. She stated, “Nobody was a nurse...but when they came here they realized it is easy to get, meaning it does not take a long time. You can provide, make really good money and take great care of people!”

Summary

This chapter has presented the major findings from face-to-face interviews conducted with seven minority participants who had recently graduated from a predominantly Caucasian prelicensure associate degree nursing program. In relation to the research questions, the four major identified themes, along with seven subthemes, were inductively drawn from the data and were found to be influences on the success of the participants. The main themes were: 1) *Rising Up from the Abyss*, 2) *Staying Upright*, 3) *Reaching the Goal*, and 4) *We are not so different after all*. Other data that failed to reach saturation but were felt to be significant in the success of the participants were also presented. The discussion of findings in respect to the current body of literature is presented in Chapter 5.

CHAPTER 5

DISCUSSION AND IMPLICATIONS

Introduction

The purpose of this study was to describe the experience of minority students who attended a predominately Caucasian nursing program. Seven participants were interviewed over a 5-month period using an open-ended, semistructured approach. Using inductive methods, four themes emerged from the data as discussed in the previous chapter: (1) *Teetering on the abyss*; (2) *Staying Upright*; (3) *Reaching the Goal*; and (4) *We are not so different after all*. This chapter is an exploration of the meaning of the themes in relation to current nursing educational theory and past research. Implications for nursing education and nursing research are discussed. Strengths and limitations are also discussed.

Teetering on the Abyss

The first theme described how participants overcame intense obstacles to achieve success in the nursing program. Issues that may have caused other students to drop out of school or fall behind were dealt with head-on by the participants. The participants described being pushed down by financial troubles, family issues, educational challenges, and personal illness. These factors are similar, if not identical, as those identified in nursing research as reasons for student attrition (Alicea-Planas, 2009; Smith, Williams-Jones, Lewis-Trabeaux, & Mitchell, 2012).

The Financial Abyss. The first subtheme “The Financial Abyss” emerged from the intense struggle that several of the participants dealt with while trying to attend school and ultimately provide a better life for themselves and their families. Many nursing students are not able to hold full-time jobs while in school. In fact, the participants all attended a program that discouraged students from attempting to work full time because of the deleterious effects on

grades and clinical performance. Being unable to work very many hours affected the participants' ability to support themselves or their families. This finding supports recent research by Smith et al. (2012) who found that minority students described having a job as the most important factor that interfered with their academic performance.

Fortunately, participants were able to stay afloat with financial support from family members and friends. One participant described the help she received from her father, "My dad helped me financially. He really wanted me to succeed and he knew I couldn't afford my bills working part-time so he paid my rent, lights, water, and cable/internet the whole time I went to school." Additional financial support from outside sources would alleviate the financial stress described by the participants. Prenursing advising sessions provided by college counseling centers or faculty advisors should lead potential students toward local scholarship opportunities in place specifically for nursing. Minority students must also be made aware of national efforts to increase the numbers of minority nurses, such as Johnson & Johnson's "Be a Nurse" campaign.

The Educational Abyss. The second subtheme "The Educational Abyss" emerged from participants who needed to overcome feelings of inadequacy in the classroom. Students who experience educational failure struggle with diminished self-esteem, feelings of inadequacy, and guilt (Roa, Shipman, Hooten, & Carter, 2011). One of the participants described feeling "devastated" after being dismissed from the nursing program on his first attempt. He described how he would avoid friends and coworkers because he was so down on himself. Through the support of friends and coworkers he found the strength to give nursing another try, this time successfully becoming the first African American male nursing graduate in school history.

Because there are many minority students who are not successful in nursing programs, schools must conduct exit interviews for all students who are not successful. As faculty conduct

exit interviews, careful examination of factors leading to the failure should be explored with each student. During this time efforts should be made to explore other career options available in the nursing profession. When students truly desire to become nurses despite failure, the faculty should describe the different levels of nursing and the different types of nursing programs that are available in the area. As described in this study, students may not always be ready or able to complete the coursework required in registered nursing programs but may do well in practical nursing programs. Doing well in a practical nursing program can build confidence that was lost after failing out of a registered nursing program. Furthermore, working as a practical nurse builds technical skills that sometimes overwhelm registered nursing students. This can decrease some of the stress involved when the student returns to school. In many instances the student who obtains a license as a practical nurse can return to school through bridge programs to become a registered nurse.

Another type of educational abyss is related to having graduated from college with a degree that is not useful or does not lead to gainful employment. All three ESL participants completed degrees in their native countries but found they were unable to use their training in the United States. The researcher has observed increasing numbers of immigrants attaining nursing degrees in the United States after being unable to work in their selected vocation after immigrating. Imagine working for years to obtain a master's or bachelor's degree and being unable to use it. This is precisely what happened to Ilena. After working as a successful business woman in Ukraine, she described feeling "like nothing" after immigrating to the United States. Research suggests employers to not recognize immigrants' qualifications, which leads to these individuals taking low paying jobs (Hum & Simpson, 2004; Koert, Borgen, & Amundson, 2011).

This research supports these findings as all three ESL participants had worked in low paying jobs prior to returning to school, this time to attain a degree in nursing.

Personal Health Crises. The third subtheme “Personal health crisis” emerged from participants who overcame illness or injury to continue their college careers. Despite severe injury or illness the participants continued to complete coursework assignments, take required examinations, and did so without thoughts of taking medical withdrawals. Interestingly, descriptions of students who continue in school despite health obstacles (other than mental health) is rarely found in the literature. Only one study was identified using a variety of search engines such as CINHALL, OVID, and Education Full Text.

Further research is needed in this area to help nursing educators understand the impact of personal illness on academic success. How many students are not able to graduate in a timely manner or even drop out because of health issues? While it is appropriate for ill or injured students to stay out of school, only a certain number of hours can be missed. Most colleges approach illness and/or injury on a case by case basis, but students are not always aware of the policies of the colleges. All schools and colleges of nursing must address policies pertaining to these issues during orientation.

Staying Upright

Nursing students are often heard saying they can “barely keep their head above water” due to the amount of stress they experience in school. When hearing this statement, one cannot help but to picture a person floating in the water with a lifejacket, staying upright in the water only because of the lifejacket. The second theme of the study, *Staying Upright*, emerged from the participants’ descriptions in Chapter 4 of how they managed to keep their lives together despite

overwhelming obstacles and challenges. Despite all participants being lumped into minority status in nursing, each one had distinctive types of support.

Overcoming Guilt. Research indicates that nontraditional students grapple with guilt over missed time with family due to school requirements such as studying or attending class. While proud of attending college, minority students describe feelings of selfishness about being in school, and expressed guilt over missing shared time with family members (Goetz, 2007). This guilt was evident in both participants who had children or were married. This finding supports previous research by Quimby (2006) who described multiple role conflicts as being likely to impinge on time allotted for studying or even the ability to succeed in school. Participants who were pulled away from their children because of school requirements expressed sadness and guilt at the time away from their children. Maria stated, “During school I remember feeling like she [my daughter] is not going to know who Mom is.”

It was common to hear participants relay that even though their family members were being supportive, they really did not understand the difficulty level or the stress of school. For example, Anna recalled an argument with her husband. She stated, “I used to tell him, ‘You do not know how stressful it is,’ and he would tell me, ‘You do not know how stressful it is for me’.” These descriptions support previous research by Alicea-Planas (2008) who also described families as often being unable to understand the level of commitment necessary to be successful in higher education. Once again, orientation or advising sessions made available to family would be useful to prepare everyone to be able to provide support.

They Lift You Up. Family support was the most common influence that kept students in school when they were feeling overwhelmed. All of the participants described being supported, or lifted up, by their families when they needed help. The support came in many forms: money,

babysitting, cooking meals, and simply asking how they were doing. Dapremont (2011) described family support as being the “incentive for most participants to persevere when discouraged” (p.258). The positive influence family members placed on the participants in this study corroborate recent research that found family members provide encouragement, financial support, advice, and a sympathetic ear for minority students (Barbatis, 2010; Dapremont, 2011; Olson, 2012; Rayle, Arredondo, & Kurpius,2005). Interestingly, the female participants described family members as providing the most support while in school, while male participants voiced receiving support from friends.

How can family and friends understand the needs of loved ones who attend nursing programs? Each nursing program may consider sponsoring a support system orientation to meet this need. Students, along with their family and friends, would have the opportunity to speak with current students and past graduates about the rigors of nursing school. This orientation could include describing how family and friends can contribute to the success of the student by providing support in the routine daily functions that many nursing students do not have time to accomplish: cleaning, cooking, etc. The importance of finding someone to watch children to allow quiet study time must also be included. Although faculty can talk to the students during regular orientation, hearing from current students appears to have greater impact.

All participants discussed how support from friends and acquaintances helped encourage them during their journey through nursing school. The African American community on campus lifted Paul to success. Even though he felt pressure to succeed from all of the attention he received on campus, he still treasured the support. Most of the participants described having a few close friends that provided support throughout the program. These friendships crossed racial boundaries evidenced by personal experience with the participants. The notion of minority

students *being lifted up* by friends and social connections reflects recent literature on minority retention (Alicia-Planas, 2009; Amero et al., 2006; Barbatis, 2010; Clark et al., 2006-2007; Dapremont, 2011; Jeffreys, 2007; Wells, 2006-2007).

Spiritual support was described as a “lifting up” factor. Maria and Jenell in particular voiced their spiritual connection to a higher power brought them comfort and support as they made their way through school. This finding reflects published research describing influencing factors for educational success of minority students (Clark et al., 2006-2007).

Faculty Support—Not Just Lip Service. Each of the participants described faculty as being accessible to the students, which provided a sense of security to the participants. This finding supports research findings of Smith et al. (2012) in their study of ethnic minority students in Louisiana who described having faculty available when needed as one of the top five factors that influenced academic success. As described by Maria, “Somebody who said...keep it up...those little things were like, ‘If they are telling me this then I can keep on going.’” Surprisingly, some of the participants revealed they had never met one on one with a faculty member during their time in the program. These participants voiced that even though they did not personally meet with faculty, they always knew faculty were available if needed.

As mentioned previously, two of the participants had health issues during their time in nursing school. These participants described feeling tremendous support from faculty at the time. As voiced by Ilena, “I had a lot of support. My instructor, she let me have my assignments online instead of coming back to clinicals.” Maria described how her back injury caused her to fail an exam. Her faculty member called her at home to let her know that even though she had failed an exam, she would be all right in the course. These findings reflect current research that lists faculty support as one of the leading factors for success in the minority student (Barbatis, 2010;

Jeffreys, 2007; Smith et al., 2012; Tinto, 1990; Townsend & Wilson, 2008-2009; Wells, 2006-2007; Wyatt, 2011)

Nursing faculty may not always realize the impact they have on students, both positively and negatively. Although every participant described feeling supported by faculty, one participant described having two professors who left a negative impact on his experience in nursing school. The experience of feeling negativity from these faculty members could have potentially wiped away the positive interactions with the remaining faculty. In fact, Amaro et al. (2006, p. 252) stated, “Even one negative interaction, especially in front of other students or staff, could be humiliating and devastating to students.” Although only one participant described only a couple of faculty who didn’t appear to care if students were successful, the experience leads one to question the number of other students that might be negatively impacted by similar instances.

Student Life--Academic Involvement. Numerous studies suggest students who are involved in campus activities such as clubs or organizations are more likely to persist to graduation than students who are not involved (Amero et al, 2005; Tinto, 1990; Townsend & Wilson, 2008-2009). Relying on this research, nursing educators may provide blanket invitations to students to join organizations such as the student nurses association (SNA). Although the SNA is a valued way of introducing students to professional organizations, not all students find membership valuable to their learning experience. For this study only two participants were members of SNA while in school and only one of these was actively involved. The majority of the participants expressed “not having enough time” to participate in SNA or any other college organization because of family or work responsibilities. These findings support prior research

that found that involvement in SNA or other college clubs was one of the least important factors that influenced student success of minority students (Smith et al., 2012; Wyatt, 2011).

Reaching the Goal

The ultimate goal for the participants in this study was to graduate and become registered nurses. This success did not come easily to any of the participants. The hours of study, days of translation, and lost sleep were worth it in the end. As one participant stated, “If I had to do it all again, I would do it all again.” Research into nontraditional adult learners show that adult learners “spend much more time on academics and subject matter and are highly focused, serious, and more motivated than the traditional college student”(Wyatt, 2011, p 13).

I CAN Do This. Self-motivation is a formidable quality. Having a positive attitude when approached with stressful situations can be the difference between success and failure. Malcolm Knowles’s work with adult learners led to the description of intrinsic motivation. This type of motivation occurs when students have a personal desire to succeed. All of the participants had experienced varying levels of success in college coursework prior to returning to college to enter the nursing program: one held a master’s degree, two held bachelor’s degrees, one held two separate associate degrees, and the remaining three had previous college credit. They knew what it took to be successful in college in the larger sense, but nursing school was different. As one participant described, “When I first started school [years before] I was not as motivated. I feel like that when I came back as an older student I felt wiser...made better decisions.”

Each of the participants discussed realizing a point in time that she or he was achieving the dream of becoming a registered nurse. As they successfully passed their courses they discovered their capabilities. It was an attitude of “I CAN do this!” that permeated throughout the interviews. One participant stated, “You have to have that positive mindset...you have to

basically look at it like, ‘I can do this.’” Of course having positive mind-set and positive thinking does not lead to success without hard work. Nursing educational research, as well as higher education research in general, frequently tout the use of study groups as a solution to student attrition (Cunningham et al., 2004; Dapremont, 2011; Devonport & Lane, 2006; Memmer & Worth, 1991; Ofori & Charlton, 2002). This study found that while a couple of the participants had attempted to study with groups, they eventually decided that a solitary approach worked best. Individual study was overwhelmingly described as the study method of choice. One participant stated, “I do not like all the group stuff because I know what works for me.”

You Either Do or You Do Not. The sheer amount of academic work required in nursing programs can certainly surprise all nursing students, not just minority students. Amaro et al. (2006) actually identified study workload as a barrier to success for ethnic minority nursing students. The findings of this study are at odds with the research. All of the participants in this study mentioned how difficult it was to keep up with the amount of reading and study that was required. The difference is that although it was difficult, they were able to do it. As voiced by one of the participants, “Life hits, reality hits...here it is, you do not have a choice. You either do or you do not.”

Developing specific ways of learning occurs over time. All of the participants described techniques used to successfully get through their nursing programs. Keeping with the theme of *You either do or do not*, the ESL participants each described the long and strenuous process of translating course material. Amaro et al. (2006) identified language difficulty (i.e. translation) as one of the primary barriers for ESL students. All of the ESL participants described the need to sit and translate hour upon hour to be able to understand the content. After translating from English into their native language and then back into English, the participants sometimes needed to

translate once again from a medical dictionary. Ilena described sometimes taking 2 days to read one page. She also described as having an “attitude” about the process saying that she was going to work hard despite the obstacles. This finding supports previous research by Cunningham et al. (2004) who found that ESL students sometimes develop a mindset that they need to prove they are capable of the work to both themselves and others. While Amaro et al. (2006) described this process as a hindrance to students, the participants in this study described translation as a challenge to conquer.

We Are Not So Different After All

Research regarding minority students frequently addresses the issues of racism and how discrimination and racism turn students away from higher education and the nursing profession (Aleca-Planas, 2009; Allen, 2005; Amero et al., 2006; Dapremont, 2012; Goldrick-Rab & Shaw, 2005; Jain, 2010; Johnson-Bailey et al., 2009; Villarruel et al., 2001) . While the specific words “prejudice” or “racism” were not included in any of the interview questions, each participant was asked to discuss his or her feelings of being a minority student. None of the students described feeling discriminated against or treated unfairly because of race or ethnicity.

This finding appears to parallel current research. For example, Amero et al. (2006) found “the majority of the participants reported they did not experience prejudice or discrimination from their nursing teachers” (p. 251). The successful participants of this study repeatedly proclaimed that they were never treated differently than Caucasian students. Participant examples include, “I was treated with the same respect and dignity as the rest of the students”, and “I did not feel like I was separated by race or gender or anything.”

We All Want To Help Others. The subtheme *We All Want To Help Others* came from an overwhelming response when the participants were each asked why they chose to return to

school and pursue nursing as a profession. Recent research has described that nursing students overwhelmingly want to work with people and want to help others in their career choice (Cohen, 2009; Lyckhage & Pilhammer, 2008; Zysberg & Zisberg, 2008). This altruistic theme was somewhat surprising considering the economic landscape of the geographical region of the study. While participants also voiced a need to improve their financial situations, this need came second to caring for others for the majority of the participants.

Two participants ultimately chose nursing as a profession only after personal experiences of caring for loved ones led them to return to school. These results affirm previous studies that revealed the influence of past experience with a loved one as a reason for choosing nursing as a career (Larsen, McGill, & Palmer, 2008). Both Jenell and Paul experienced a life-changing experience when caring for their loved ones. This experience jolted their innermost psyche and pushed them toward a professional goal which they may have never desired.

Theoretical Implications

This research was conducted using an atheoretical approach. Several theoretical perspectives were explored prior to conducting the study, but only two were considered to have possible connections to the study findings. Although the findings of this study reflect certain elements from both Tinto's Theory of Student Retention and Malcolm Knowles's Theory of Andragogy, neither of these theories was used to guide the study. Each theory is discussed in the context of the study findings as applicable.

Tinto's Theory of Student Retention can be found in almost every nursing educational study of student attrition. Colleges and schools of nursing focus on why minority students do not persist in their programs and use Tinto's various works as guiding theoretical framework. As nursing educational research continues to use Tinto's work when exploring the phenomenon of

nursing student attrition, educators may find that student experiences may be influenced by the disciplines they pursue (Dapremont, 2011).

One of the major tenants of Tinto's Theory of Student Retention describes that the degree of academic involvement of all students helps predict if a student will be retained to graduation (Wyatt, 2011). This tenant of academic involvement includes interaction with faculty, staff, and other students along with involvement in school organizations and functions. The participants of this study widely touted the "support" felt from faculty members. Although personal interaction with faculty was not widely apparent, the participants described a sense of comfort knowing that faculty "would be there" if needed. In discussion of school organizations or functions, only two of the participants had joined the college sponsored Student Nurses Association, and only one of the two was actively involved. The majority of the participants described "not having time" for anything other than school and family. In this respect Tinto's theory does not appear to line-up with the findings of this study.

The work of Malcolm Knowles with adult learners appears to mesh with some of the findings of this study. Knowles attempts to describe each learner in his or her socially constructed context which shapes the individual's personal learning style (Reischmann, 2004). The participants in this study exuded many of the characteristics described by Knowles: an internal drive, self-directedness, and life experience. It is up to the educator to identify these qualities and develop learning tools to meet individual needs. For example, adult learners require educators to have clear instructions with procedures clearly stated for each assignment. The participants of this study indicated they were given the tools to succeed by faculty members, they just needed to use them.

Study Implications

This qualitative study described the factors that led to success for minority nursing students who graduated from a predominantly Caucasian nursing program. Because minority students in nursing programs are more likely to either fail out or drop out of college before graduation, nurse educators struggle to find interventions or methods to increase retention with this population. Because the participants of this study successfully progressed through their program until graduation, the findings have implications for nursing educational theory, nursing research, and nursing education.

Implications for Nursing Educational Theory

Nursing education typically borrows elements of traditional adult education theory such as Malcolm Knowles's Theory of Andragogy when developing theoretical frameworks. As nurse educators in associate degree nursing programs, we are typically teaching nontraditional, adult learners who have specific needs. We search for models or theories to guide our teaching in hopes of attaining the best possible outcomes for our students. While there is no dishonor in borrowing from well-established educational theory, nursing students appear to have needs that go beyond interventions that are offered by theories from other disciplines.

Some nursing programs develop their own educational theory and integrate it into their curriculum. These theories typically arise from models that are developed over time by faculty members who seek to follow curriculum that is less "medical" in nature. The current trend of concept-based nursing curriculum may prove to meet the needs of faculty and students alike. This curriculum is rising from a conceptual lens that will allow students to see patterns and connections at the conceptual level as they relate a particular topic to broader study. This

theoretical approach to teaching is touted as a way to decrease “information overload” that is described by all nursing students.

Further study into minority student success may require the use of a different theoretical lens. The tenets of Tinto’s theory were not applicable in many instances for the participants of this study. Using a different theoretical lens such as critical social theory may provide additional findings in this population that can be used to develop programs and resources for minority students.

No matter which theoretical approach is used in education, all nursing programs must include diversity. Continuing to teach like we have been teaching for the last 50 years will not meet the needs of our current students, nor will it prepare nurses to work with diverse populations after graduation. Nursing educators must understand the perspectives and experiences of all minority students to be able to meet their needs to help them persist to graduation and enter the workforce (Ume-Nwagbo, 2012).

Implications for Future Nursing Research

Nursing research in the field of prelicensure nursing students is lacking in the community college setting. The National League for Nursing (2012) reported in 2011, 44% of associate degree nursing graduates were over the age of 30. Many of these graduates have returned to school after earning bachelor’s or master’s degrees in other fields. The associate degree allows the returning student to achieve their license in less time, allowing gainful employment faster. As found in this study, many nontraditional students are also classified as minority students. This is not a surprise as the majority of minority students choose to attend community colleges over larger colleges or universities. With these facts, nursing research must focus on research in our nation’s community colleges.

The numbers of minority students enrolled in basic registered nurse programs in 2011 continued to remain low. Data from the National League for Nursing (2012) report continued low admission rates for African Americans (11%), Hispanic Americans (6%), Asian or Pacific Islander (6%), and American Indian (1%). Nursing educational research must identify interventions to bring minority students into our nation's nursing programs. Further research should focus on identifying the needs of incoming college freshmen minority students before they ever apply for admission into nursing programs. Through identification of needs, colleges may possibly be able to develop interventions and strategies to reduce overall attrition rates of minority students.

Realizing the similarities between the findings of this study that focused on successful minority students versus prior research that was focused on unsuccessful nursing students leads one to ponder "Why are the findings similar?" This question provides exciting possibilities for future nursing research in education. It is especially interesting to discover why some individuals can overcome similar obstacles and challenges while others cannot. While this study described factors that led to success for this group of participants from a rural area, further research is needed in nursing schools located in suburban and urban areas.

Finally, this study identified a gap in the literature relating to personal illness and academic success. Future research could be aimed at exploring the experience of nursing students who experience illness or injury. From a purely personal point of view, numerous nursing students have been observed dropping out of school for a period of time to heal from injury or illness, only to return months or years later to complete their nursing education. Nurse educators could learn from these experiences and possibly develop interventions to assist students in returning to finish their degrees.

Implications for Nursing Education

Nurse educators in programs that are filled with predominantly Caucasian females need to reach out to minority students without fear of student attrition. Community colleges must reach out to the minority community in their area in order to recruit more students into their programs. Nursing faculty need to visit middle schools and high schools in order to introduce the profession of nursing to minority students early in their educational journey. Advisors from nursing programs located in rural areas may choose to visit suburban and urban areas in order to attract a greater diversity of students into their programs. Inviting minority nursing graduates to community advising sessions is one way to demonstrate that the dream of becoming a nurse can come true for the minority student.

Nursing faculty must also step up their role in advising prenursing minority students. As many nursing faculty retire, new faculty members will be faced with the task of recruiting and retaining minority students. Thorough mentoring programs with seasoned faculty members or dedicated advisors must be offered to all new nursing instructors. New faculty members may not be aware of methods used to identify individual needs of minority students or how to meet those needs when identified. By the same token, seasoned faculty may also need training on best practices related to minority student retention. Group training sessions at the beginning of the academic year could be offered by college or university departments who deal with diversity services. These sessions should address the specific needs of the minority population and train advisors on proper methods to assess and meet the needs of students. For example, financial aid services could host training sessions on financial aid services and scholarships for minority students.

Establishing mentoring programs for minority students is another way colleges and universities can provide support to this population. Programs should reach out to students during their first semester in college in order to help the students adjust to the stressors of higher education. Faculty members and support staff should be included in mentoring programs so that new students will have a designated person to contact if academic issues arise or if they need academic advisement. Contact with current nursing students and recent graduates from similar races, cultures, or backgrounds may provide useful information to students on how to access campus support services and resources that may contribute to a successful academic experience.

Nursing program administrators should also explore venues to increase student retention through careful advising of prenursing students. Even though a student might wish to become a nurse, educators must thoroughly investigate if the student possesses the ability to do the coursework. This ability is most highly reflected in prenursing coursework grade point average. Students who do not meet expected academic requirements should be directed toward other potential healthcare careers. Students should not be discouraged from continuing their education because they do not qualify for nursing programs.

Educators must also assess each prenursing student's support system. Does the student have children? If so, will the student have someone to watch the children when necessary? Will the student have financial support or will the student need to work while in the nursing program? These issues were addressed by the participants in this study as the types of support that are absolutely necessary in order to be successful in nursing programs. The findings of this study are supported by nursing educational research conducted over the last 10 years (Bosch, Doshier, & Gess-Newsome, 2012; Derby & Watson, 2006-2007; Flowers, 2004; Furr & Elling, 2002;). New student orientation sessions conducted by faculty advisors must address work and money issues

with all students. Representatives from financial aid should be present at all sessions to help students find grants, loans, scholarships, and other sources of aid to help decrease financial strain while in school.

Nursing programs must value the importance of ESL students. With increasing numbers of immigrants to the southeast United States, many nurses find themselves unable to communicate with hospitalized patients. This results in requiring the use of a hospital translator or telephone interpreter services. Nurses who have used these services reported a feeling of disconnect from their patients and recognized that crucial healthcare information may be lost in translation. The possibility of having more nurses who are bilingual should be an exciting prospect to all nursing educators. By showing potential students that educators are impressed with their ability to speak more than one language, students might feel more connected to their school. As in this study, Maria described meeting with an advisor who expressed her joy in the fact that Maria spoke fluent Spanish. She remembered thinking that she was doing the right thing by pursuing her nursing degree and feeling like she was “in the right place” for success.

Transferability

Transferability, or fittingness, refers to the likelihood that the study findings will have meaning to others in similar situations (Streuber & Carpenter, 2011). Although each participant’s experience of success was unique to his or her situation, the findings of the study may be transferable to students in similar geographic areas. A thorough description of the setting and data collection process was presented. Also in an attempt to increase transferability, guiding questions used in the interview process can be found in the appendix labeled *Interview guide*. Thick description was provided to allow readers an understanding of the study findings, possibly

enabling others to use these findings in other settings. In retrospect, transferability could have been increased by including participants from multiple schools in this study (Schofield, 1993).

Study Assumptions and Limitations

This study had five assumptions. First, it was assumed that each participant would be open and truthful regarding his or her experience as a successful minority nursing student. While most of the participants were open, a couple of the female participants did not embellish their experiences and tended to stay with short responses, which led the researcher to ask more questions than originally intended. Although open-ended questions were used, participants would answer “yes” or “no” to questions once again without embellishment.

Second, it was assumed the participants would be able to describe their experiences in a nursing program and how these experiences contributed to their success. All participants were able to discuss their experiences while in nursing school. As with the general population, some people are better storytellers than others. Many of the participants were very open and willing to share many things about their lives as students, others were more reserved. The participants were contacted following each interview either for clarification or to provide additional information. All but two of the participants responded to the follow-up questions. The researcher believes that further experience interviewing participants will lead to increased comfort with the process that may lead to increasing the amount of robust data during the initial interview process.

Third, participants were assumed to be able to communicate their ideas of what success and support meant to them. It is believed that all participants were able to describe their ideas of success in a roundabout way. For example, several participants discussed passing nursing courses, graduation, and passing the National Council of State Boards of Nursing exam

(NCLEX). The concept of support was openly discussed by all participants as they discussed family, friends, and faculty.

Fourth, it was assumed the researcher would use open-ended, thought provoking questions during the interview process. As mentioned previously, open-ended questions were used. Many of the participants sat quietly and appeared to be thinking about their answers before speaking for most questions. After reviewing transcripts of interviews, participants were contacted via secure, password protected email if additional clarification was needed.

Finally, the researcher was assumed to separate past history with the participants from the current research process. This was achieved through careful thought prior to each interview. Because the researcher had positive relationships as a faculty member with each participant during his or her time in the nursing program, each participant appeared to speak freely about his or her experiences.

Conclusion

This descriptive qualitative study provided a beginning description of factors that lead to success of minority students in predominantly Caucasian nursing programs. Too often nursing educational researchers focus of the reasons for attrition of minority students without taking notice of the minority students who excel in nursing programs. The participants described factors that led to their success in nursing school. Although these participants were affected by many of the same issues that are found in students who fail out of nursing programs, this qualitative study described how all of the participants rose above each obstacle faced in nursing school and successfully became registered nurses.

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APPENDIX

Interview Guide

Moderator Guide for Interviews with Minority Graduates of Predominantly Caucasian Nursing Programs

Context of Interviews: The interviews will take place in a private area in a public location, mutually agreed upon by the participant and researcher. Questions will be used to elicit the participants personal experiences in nursing school.

Introduction:

1. Thank you for agreeing to share your experiences as a minority student in a predominantly Caucasian nursing program.
2. I will be asking you several questions. If there is anything you would like to discuss about your experiences, even if I did not specifically ask about it, please feel free to talk about it.

Guiding questions:

1. Describe the characteristics of your background. What led you to choose nursing as a career?
2. Describe your educational goals. Did family or friends influence your educational goals?
3. Describe the role of your family in your educational aspirations. Do you have family members who attended college? Did your family encourage or discourage you in obtaining a college degree?
4. Describe your commitment to your educational goals. How did your goals align with the goals of your family and/or your significant other? How did your study time affect your family dynamics?
5. Describe your economic situation while attending school. Did you work a full time or part time job? Did your economic situation affect your ability to attend class or study?
6. Describe your academic involvement with your college. Did you attend college functions? Were you a member of any clubs?
7. Describe your academic involvement with faculty and staff of your college. Think of a time when you needed faculty assistance. Describe how faculty influenced/did not influence your success.
8. How would you describe the culture or your nursing program? Did you feel an attachment to the program?
9. Describe what you think led to your success in your nursing program. How did you change from your first semester in nursing school to the final semester? What did you consider your first accomplishment in school?
10. Describe how your motivation to succeed changed/did not change as you progress through your nursing program.

VITA

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