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The persistence of the associate degree nursing student: The lost nurse

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THE PERSISTENCE OF THE ASSOCIATE DEGREE NURSING STUDENT:
THE LOST NURSE

by

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Dedications

This work is dedicated to my family who has encouraged me from the beginning. My parents, Ernie and Donna, who taught me from an early age that an education was not an option. My in-laws, Lou and Elaine, who supported me by taking care of my husband and daughter as I did school work. My sister-in-law, Tennille, who was my editor even though she had no idea what I was talking about or that APA existed. My daughter, Alison, gave me the biggest push with, "Isn't it great that you'll be a doctor and I'll be a doctor, and Dad won't be a doctor?" Lastly, my husband, Louie, who was my biggest supporter, I could not have done this without you.

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Abstract

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There is controversy surrounding the entry-level degree to the profession of nursing. This study had the focus of showing the persistence of the associate degree nursing student as a way of giving evidence to maintaining this pathway as entry to nursing. Narrative inquiry was used to interview 10 students and 3 faculty on the persistence of the nursing student. Callista Roy's Coping Adaptation Processing Scale was taken by 51 students enrolled in the same nursing program. The overarching themes of the student interviews were goals, learning environment, and admission criteria. The overarching theme as a result of the Coping Adaptation Processing Scale survey results was problem solving, which is in accordance with the ability of the associate degree nursing student to persist. The results of the study show the students enrolled in the 2-year associate degree program have the persistence to complete a rigorous curriculum. With problem solving skills and persistence, the associate degree nurse should remain as entry level to practice for the nursing profession.

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Chapter 1

Introduction

This dissertation investigated the persistence of the associate degree nursing (ADN) student and the importance of the associate degree remaining the entry level into the nursing profession. The literature surrounding the concepts of persistence, emotional intelligence in higher education, academic performance, nursing as a profession, as well as the comparison of associate and baccalaureate degree programs was reviewed. The specifics of the qualitative methodology used in this study are discussed along with the theoretical frameworks that guided the study, Callista Roy's Adaptation Model and constructivism. Narrative inquiry was chosen to gain insight into the nursing student's thought processes in choosing the associate degree as entry level to practice. Qualitative data were collected through semi-formal interviews of associate degree nursing students and of nursing faculty. Interviewing the nursing faculty allowed perceptions of the preparation of the associate degree nurse compared to the baccalaureate prepared nurse to be revealed. Lastly, the sample and setting will be discussed. The setting is at a community college in the Northeastern US with a sample of students enrolled in an associate degree nursing program.

Undergraduate programs evaluate retention and attrition rates to understand whether the students enrolled in a nursing program are completing and entering the workforce (Beauvais, Stewart, DeNisco, & Beauvais, 2014). In academia, the educator examines the curriculum to aid the students in completing the nursing program to which they are admitted; however, external factors such as persistence and motivation need to be considered as well (Beauvais et al., 2014). Persistence through a rigorous associate

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degree nursing (ADN) curriculum shows the quality of the individual; to be successful in a nursing program while maintaining work and family obligations suggests the ADN student is motivated to succeed in the nursing profession. This motivation will drive the student to continue his or her education with a baccalaureate completion program, as discussed later in this chapter.

Nursing Licensure

According to The National Council of State Boards of Nursing (NCSBN), there were more than 4 million active nurses in the United States as of November 2014 (as cited in Alexander, 2015). This number includes both registered nurses (RN) and practical nurses (PN), education and the scope of practice being the major difference between the two. For the RN, the scope of practice includes leadership and delegation as well as the ability to initially assess a patient and create a plan of care in conjunction with the physician. There is no delineation between the scope of practice for the associate degree nurse (ADN) and the bachelor's prepared nurse (BSN) (New Jersey Nurse Practice Act, 2011).

There are a variety of ways to accomplish licensure as an RN (Figure 1). An individual can obtain licensure through a one-year diploma program, a two-year associate degree program, or a four-year baccalaureate program. According to the National League for Nursing's (2015) Biennial Survey of Schools of Nursing, there are 67 diploma programs, 710 baccalaureate programs, and 1,092 associate degree programs for nursing in the US. The diploma curriculum mimics the two-year ADN program; however, the curriculum typically requires the student to complete at least one year of general education courses prior to being admitted to nursing courses. The ADN curriculum

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focuses on nursing theory and clinical courses along with a mixture of general education courses (Orsolini-Hain & Waters, 2008; Staykova, 2012). The BSN curriculum is differentiated from diploma and ADN curricula by its additional focus on research and leadership principles. Another difference between the ADN and BSN curricula is that the core nursing courses of the ADN curriculum are intertwined with general education courses, while the general education courses in the BSN curriculum are completed prior to the core nursing courses. However, even though there are variations in the curricula, the graduates of an accredited associate or baccalaureate nursing program will take the same licensing exam to become a registered nurse after completing their respective program. The following research investigates the case for the associate degree to continue as a viable option for entry level into practice, as the graduate of this program meets the same nationally set benchmark as the baccalaureate nursing graduate.
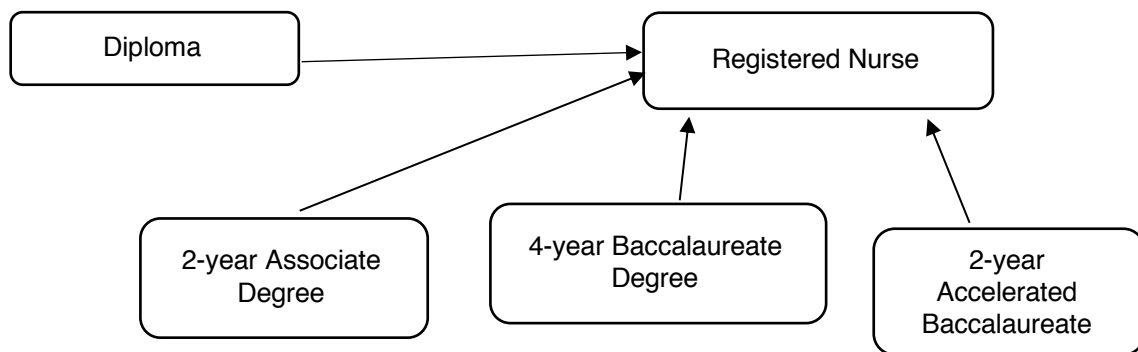
Figure 1. Pathways to become a registered nurse.

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Despite the already large number of active nurses, the U.S. Bureau of Labor Statistics (2014) projects from 2014-2022, the number of RNs will need to increase by 19% to care for growing medical needs. With the passing of the Affordable Care Act in 2010, approximately 30 million more Americans now have insurance coverage and are seeking treatment for ailments which they might have otherwise ignored (Budden, Zhong, Moulton, & Cimiotti, 2013; MacLean, Hassmiller, Shaffer, Rohrbaugh, Collier, & Fairman, 2014). The increased number of potential patients will require additional nursing staff; however, approximately 190,000 RNs could potentially retire in the very near future per the 2013 Survey of Registered Nurses by AMN Healthcare. The U.S. Bureau of Labor Statistics does not specify the educational background of the needed nursing personnel; the report only discusses the need for RNs. It should be remembered, while there are a variety of educational tracks to become an RN, the graduates of every nursing program take the same national licensure exam.

Entry Level to Nursing Profession

The lack of a standard entry level degree for nursing continues to be a barrier for the profession. A student can become a nurse with a diploma, an associate degree, or a baccalaureate degree. There is a great divide between those who believe the diploma or associate degree nurse have enough education to enter the nursing profession and those who believe the baccalaureate should be the minimal entry level. Even though there are calls by many agencies (e.g. National Council of State Boards of Nursing, Institute of Medicine) for the baccalaureate to be the entry level degree for nursing, the majority of the RNs in America entered the field with a diploma or an associate degree (McEwen, White, Pullis, & Krawtz, 2012). Approximately one-third of the RNs in America received

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their baccalaureate as an entry level degree (McEwen et al., 2012). With the impending nursing shortage and approximately 190,000 nurses reaching retirement age, if the profession utilizes only the BSN as entry level to practice, how will the healthcare needs of America fare with two-thirds of the nurses no longer eligible for licensure? To meet the many healthcare needs of our population, it is imperative the ADN continue as an entry level degree into the nursing profession.

The lower degree (e.g. diploma or associate degree) population tend to be first generation adult attendees or non-traditional students who are changing careers, managing full-time employment, and/or raising families (National Sample Survey of Registered Nurses, 2010; White, 2014). Community colleges offer the ADN option as an efficient and cost-saving way into the nursing profession (Raines & Taglaireni, 2008). The baccalaureate program population consists primarily of traditional students who are entering a traditional four-year nursing program out of high school (National Sample Survey of Registered Nurses, 2010; White, 2014). The National Sample Survey of Registered Nurses (2010) found this population to be the recipients of scholarships or grants (60%) or parents paying tuition (42%). Thus, the student who has a lower socioeconomic status or is employed full-time is less likely to attend a BSN program. The accessibility of the ADN program for a variety of students makes it an important entry level option that will help combat the impending nursing shortage by reaching more of the general population. By discounting the ADN as entry level to practice, the profession will miss out on a large number of caring and compassionate individuals who would not likely have access to the four-year BSN degree.

While agencies such as the Institute of Medicine and the National Council of State Boards of Nursing are pushing for the entry level to nursing be the BSN degree, the AACN (2012) reported 52,922 nursing students graduated from ADN programs compared to the 27,845 nursing students who graduated from a BSN program in 2012. With this astronomical gap of 25,000 plus nurses, it makes sense for the associate degree to continue to be considered as an appropriate entry level degree. Associate degree nurses have successfully passed a demanding nursing curriculum, in addition to taking and passing the same National Council of Licensure Exam (NCLEX) to obtain the same license as the baccalaureate prepared nurse; therefore, the ADN should remain as an option for entry level into the nursing profession.

Baccalaureate Entry to Practice

The baccalaureate nursing degree (BSN) is separated into three tracks: the traditional option, the accelerated BSN, and the RN-to-BSN option. Traditional BSN programs are four-year degrees in which the pre-requisite general education courses are taken in the first two years and the nursing courses are completed in the last two years of the program. The accelerated BSN program is offered to individuals who hold a baccalaureate degree in another field. For example, if a student has a baccalaureate degree in economics, he or she could become an RN in approximately 12-18 months. The accelerated BSN program consists of six- to eight-week blocks with one to two days of clinical during the week. Program coordinators in accelerated BSN programs advise the student not to work during the program, given its intensity. On the other hand, the RN-to-BSN option is ideal for the associate prepared nurse to continue his or her education. This program can typically be completed within 12 months of graduating from an ADN

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program. In fact, many community colleges have created partnerships with universities to allow for dual enrollment for the ADN student.

There are 679 RN-to-BSN programs in the US, and there has been an annual increase in enrollment for the past 12 years (AACN, 2016). Only 8% of students were turned away from the accelerated BSN option in 2014 (NLN, 2015), as opposed to the large number of students turned away from traditional BSN and ADN programs. The reasons for turning away students from the accelerated track are lack of faculty (41%), lack of classroom space (12%), and lack of clinical sites (12%) (NLN, 2015). Thirty-one percent of respondents to the National League for Nursing (2015) Biennial Survey of Schools of Nursing for the 2013-2014 academic year listed "other" as a reason for students being turned away; "other" was not defined within the study (Table 1). The Accreditation Commission for Education in Nursing (ACEN) (2017) requires faculty in a BSN program to have a minimum of a graduate degree, with at least 25% of those faculty having a doctoral degree or enrolled in a doctoral program.

Table 1

Reasons Students are Turned Away from Accelerated–BSN (NLN, 2015)

Reason	Percent of Responses
Lack of faculty	41%
Lack of classroom space	12%
Lack of clinical sites	12%
Other (not defined)	31%

While the BSN program has clear advantages, the ADN program should remain an option for entry into the nursing practice. It is concerning that students are turned away from BSN programs. It is imperative for the ADN graduate to continue his or her education, as it will assist with the impending nursing shortage as well as the life of the profession itself. By continuing their education, associate prepared nurses can become the educators of tomorrow, creating a life cycle for the profession.

Nursing School Barriers

While more RNs are needed across the US to support the growing population with health insurance and health care needs, approximately 68,936 students were turned away from undergraduate nursing programs in the 2014-15 academic year (American Association of Colleges of Nursing [AACN], 2015), and for the academic year 2013-14, 37% of qualified students wanting to be admitted to an associate degree nursing program were turned away (National League for Nurses [NLN], 2015).Within the literature, there remains no mention of the unsuitability of the nursing students being turned away. In fact, the AACN (2015) reports the applicants turned away were qualified students. Reasons for students being denied admission range from budget cuts to the shortage of faculty and/or the lack of clinical sites for training (AACN, 2014; Aiken, 2011). The National League for Nursing (2015) reports the main obstacles to admitting every qualified applicant are lack of adequate classroom space (49%) and lack of faculty (28%). In fact, 56% of nursing schools report a full-time faculty vacancy, and 17.4% of schools report the need for additional faculty to offset increased workload despite there being no faculty vacancies (AACN, 2014). Further, it is predicted that approximately half of nursing faculty will reach retirement age by 2020 (Aiken, 2011). The burden placed on

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existing nursing faculty as a result of this faculty shortage—including advising an increasing number of students, grading additional assignments, and maintaining a safe clinical environment for more students—leads to faculty burn out (AACN, 2014).

Nardi and Gyurko (2013) note a smaller pool of younger potential faculty, diminished satisfaction with the faculty role, and the disparity of the salary between nurse faculty and a staff nurse position as reasons for the nursing faculty shortage. Funds from federal and state programs are decreasing, causing colleges to cut budgets, which affects the number of nursing faculty being hired to replace retiring faculty (Aiken, 2011; Nardi & Gyurko, 2013). The Accreditation Commission for Education in Nursing (ACEN) (2017) requires full-time faculty in an associate degree program to hold a minimum of a graduate degree with a major in nursing. The part-time or adjunct faculty in an ADN program may hold a baccalaureate degree, but 50% of those faculty must have a graduate degree (ACEN, 2017). This requirement becomes an issue when the colleges cannot recruit new faculty due to the previously mentioned reasons: disparity of pay, dissatisfaction with faculty role, and a smaller pool of younger faculty.

As mentioned previously, the NLN (2015) also reported the lack of classroom space as a reason for turning away qualified nursing students. Having adequate classroom space is imperative for nursing education as there are a variety of methods to educate the nursing student including props and equipment (e.g. life-size mannequins). These props and equipment require a larger classroom or lab setting as opposed to general education courses, which require minimal extraneous equipment. Additionally, colleges are competing for clinical placement for nursing students as well. The lack of clinical sites exists due to the increased number of nursing students per clinical rotation as well as the

increased number of nursing schools competing for the same clinical site (McNelis, Fonacier, McDonald, & Ironside, 2011). The clinical experience is an important component of nursing education; this is where the nursing student interacts with patients under the guidance of a faculty member within a healthcare setting (Salamonson et al., 2015). Both ADN and BSN programs struggle with placing nursing students in the hospital setting for clinical education due to competition among local nursing programs and the effect of having nursing students within the facility (McNelis et al., 2011). It has been reported that staff in these facilities feel overwhelmed and burned out from having nursing students frequent their units (McNelis et al., 2011). Often, there is more than one nursing school in a facility on any given day. Nursing schools vie for placement at hospitals because there are only so many units within a hospital.

As for baccalaureate nursing programs, 31% of qualified students were declined admission in the 2013-2014 school year (National League for Nurses, 2015). The obstacles for the baccalaureate programs were not that different than those of their associate degree counterparts. The NLN (2015) reports lack of faculty (31%) and lack of clinical placement (41%) as the main obstacles for admitting additional students. Both ADN and BSN programs are tasked with recruiting faculty with limited means. Similar to the associate degree program requirements, full-time faculty in a BSN program should have a minimum of a graduate degree with a major in nursing (ACEN, 2017). However, ACEN (2017) requires at least 25% of the full-time baccalaureate faculty to have a doctorate degree or be enrolled in a doctoral program. For part-time or adjunct faculty, the minimum of a graduate degree with a major in nursing is required (ACEN, 2017). Due to the higher degree requirement of BSN faculty, these programs are also

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dealing with a smaller pool of younger nursing faculty (Nardi & Gyurko, 2013). In regards to the lack of clinical placements faced by BSN programs, while Portzline (2015) notes some facilities give preference to BSN programs for clinical placement due to Magnet® status, these programs still compete with their ADN counterparts.

Magnet® status. While the Magnet® hospital designation is one of the highest honors a hospital can achieve, there is a misconception that a Magnet® designated hospital requires all bedside nurses to hold a BSN degree (American Nurses Credentialing Center, 2016). The American Nurses Credentialing Center (2016) reports hospitals who have earned this distinguished honor have improved patient care and safety rates, attract and retain the best nursing staff, and advance nursing practice due to encouraging nursing staff to continue their education. To earn Magnet® status, the hospital must achieve goals within five preset areas: transformational leadership, organizational empowerment, excellent professional practice, new knowledge and improvements, and realistic outcomes (McHugh, Kelly, Smith, Wu, Vanak, & Aiken, 2013). Portzline (2015) notes some facilities with Magnet® status give preference to BSN programs for clinical placement because these programs contribute to the status of the Magnet® designation as the gold standard for hospitals. BSN programs are associated with increased use of evidence-based practice, advocacy for patients, and the ability to view the bigger picture, and Magnet® hospitals prefer to hire BSN graduates for this reason (Sellers, Millenbach, Zittel, Tydings, & Murray, 2014).

While Aiken, Clarke, Cheung, Sloane, and Silber (2003) assert there would be a decreased mortality rate in post-surgical patients with an increased number of BSN prepared nurses, it should be noted they do not delineate between graduates of a

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traditional or accelerated BSN program and BSNs who were initially licensed through an ADN or diploma program. Therefore, while a student who achieves licensure with an ADN should further his or her education with a BSN degree, the ADN should remain the entry level to practice, as students of these programs are put through a rigorous curriculum and have passed the same licensure examination as the BSN graduate.

Post-Licensure Education

The Organization for Associate Degree Nursing, American Association of Community Colleges, the Association of Community College Trustees, the American Association of Colleges of Nursing, and the National League for Nursing (2012) joined to issue a statement that every nursing student should have a seamless transition into nursing education programs, whether it be an ADN, BSN, or MSN program. Associate prepared nurses face barriers to furthering their education, including lack of financial support, scheduling conflicts including work and family obligations, and a lack of recognition for advancing to a BSN (Romp et al., 2014). The financial concern is of utmost importance, as Romp et al. (2014) found the need for employers to assist with paying for the advanced degree as the highest concern of nurses in their descriptive correlational study. The Nurse Reinvestment Act (P.L. 107-205), passed in 2002 to increase nursing recruitment and combat the nursing shortage, only allowed for the authority of recruitment tactics; no funding was included. With the aid of several key politicians, the act was funded with $20 million dollars in 2003, allowing for nursing schools to obtain grants to offset the costs to nursing students (Campbell, 2005).

There is a need for continued education past the associate degree; the ADN graduate should continue his or her education to broaden leadership and critical thinking

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skills and to increase career opportunities. The ease of progressing into an RN-to-BSN program is a necessity with the ADN population, as these nurses may not have had access to a BSN program initially (OADN & ANA, 2015). As stated previously, the New Jersey State Board of Nursing requires the educator in an ADN, BSN, or MSN program to hold, at a minimum, a graduate degree (NJ 13:37-1.7). Furthermore, the New Jersey State Board of Nursing requires the nurse educator have documentation proving he or she has the qualifications to teach the course assigned (NJ 13:37-1.7). For example, a nurse educator teaching pediatric content to nursing students must have evidence of his or her knowledge of pediatric nursing. Thus, the associate prepared nurse should continue his or her education to assist in educating the nurses of tomorrow, creating a consistent stream of nurses. There are a projected 1 million nursing positions that will be available by the year 2024, according to the AACN (Rosseter, 2017). Without the academic progression into BSN and graduate level programs, the gap of 1 million nursing positions will not be closed. By discounting the ADN as entry to practice in nursing, the profession will eradicate approximately half of the nurses joining the profession, therefore making the nurse educator pool smaller as well.

Problem Statement

Requiring a BSN degree as the only entry level to nursing practice would cause the profession to lose half of its new graduates, as many nurses enter the practice with an associate degree (National Council of State Boards of Nursing [NCSBN], 2016). With 58% of 2015's graduating nurses earning an associate degree, it's clear removing the ADN as an entry level to practice would cost the profession many caring, compassionate people, which would only increase the impending nursing shortage (NCSBN, 2016). If

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the associate degree is dismissed as an option for entry into the profession, the majority of nursing graduates are discounted. This disparity alone will cause a tremendous impact on the nursing shortage, especially with approximately 190,000 nurses reaching retirement age in the near future (AMN Healthcare, 2013).

Furthermore, the BSN curricula consists of a broad overview of general education within the first two years and then focuses on nursing specific courses in the last two years (AACN, 2016). Due to the curriculum being segregated in this manner, the BSN student does not have ample opportunity to practice the skills of being a nurse. For the nurse to provide safe and effective patient care, he or she must be able to demonstrate technical skill competence (Adair, Hughes, Davis, & Wolcott-Breci, 2014). Adair et al. (2014) found BSN graduates were overconfident with some basic technical skills; the graduates were unable to perform the task to the standards of the expert. This overconfidence coupled with minimal experience performing the task will compromise patient outcomes. Hospitals and varying agencies hiring BSN graduates should be aware of the lack of clinical experience of the student as well as the student's perception when it comes to task completion (Adair et al., 2014).

Controversy surrounds the entry level degree in the nursing profession. The Institute of Medicine (IOM) has called for 80% of nurses to have a baccalaureate degree by 2020 (Shen, Peltzer, Teel, & Pierce, 2015). The problem lies in access to the nursing degree; lower income individuals may not have access to a four-year university to obtain a baccalaureate degree. Perna (2005) notes the best way to combat poverty is through obtaining a degree; however, in some communities, it is difficult for residents to afford a four-year degree. Local community colleges offer an alternative option to lower income

individuals to enter the nursing profession and attain their life goal of becoming a nurse. ADN programs attract minority and male populations given the accessibility of the programs (Mahaffey, 2002). In addition, 50% of the students enrolled in the 2014-15 nursing cohort at Clay Community College are enrolled full-time while managing school, work, and personal obligations.

It should be noted the profession of nursing is rewarding and exciting, albeit stressful. Having the ability to assist people in their time of need is an awe-inspiring experience. A nurse has a tremendous duty to change a person's life with each shift he or she works. However, to become a nurse, the student must first navigate an intense nursing program designed to create a safe, general practitioner with the ability to think critically and make the appropriate decision in a timely fashion. Both the BSN and ADN curricula afford the same outcomes of graduating the safe, general practitioner with critical thinking ability. In fact, there are accrediting bodies (e.g. Accreditation Commission for Education in Nursing [ACEN], NCSBN) ensuring those outcomes are met. According to the National League for Nursing's (2014) Biennial Survey, 24% of the North Atlantic's nursing programs are ADN, 30% are BSN, and only 13% are diploma schools. While there are slightly more BSN programs than ADN programs, these figures show the ADN remains a popular option for entering the profession of nursing.

Purpose of the Study and Research Questions

The aim of this study is to show the persistence and tenacity of the ADN student to capture the lost nurse. The associate degree prepared nurse is in danger of becoming lost as a result of not allowing the ADN to remain as entry level to practice. As a result of the increased call for the baccalaureate degree to be the entry level degree for nursing,

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ADN graduates are being overlooked and forgotten when it comes to the profession. ADN programs graduate knowledgeable, caring, and competent nurses who can practice safely in a variety of healthcare settings. The majority of nurses entering the profession do so with an associate degree; to negate this degree would only increase the impending nursing shortage and decrease patient outcomes within the hospital due to staffing shortages. The ADN student is capable of persisting through a rigorous nursing program and passing the national licensure exam.

Persistence can be defined as the continued engagement to obtain a specific goal despite frustrations, obstacles, and fatigue (Constantin, Holman, & Hojbota, 2011). As mentioned previously, the nation will be in dire need of nurses in the next 10 years, making each student's success a priority for the nursing faculty. Schools of nursing look to standardized tests such as the Nursing Entrance Test (NET) or the Test of Essential Academic Skills (TEAS), and the science course GPA to gauge the ability of the student to succeed in a nursing program, as opposed to the psychological variables of stress, resiliency, and hardiness (Newton, Smith, Moore, & Magnan, 2007; Wolkowitz & Kelley, 2010). These standardized exams are designed to assess the student's abilities in mathematics, science, English, and reading (Pitt, Powis, Levett-Jones, & Hunter, 2012).

All students entering college take a college entrance exam (e.g. ACCUPLACER) to measure their ability to read, write, complete math problems, and use computers (College Board, 2016). After taking this exam, the students are placed in classes at the appropriate level, whether developmental or college level. Approximately 70% of students entering college are assigned to remedial or developmental courses (Mangan, 2015). It makes sense to place the student within the appropriate courses on admission to

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college; however, for students requiring remedial courses, this may lead to frustration (Saxon & Morante, 2014). For nursing students, this frustration comes from not meeting the nursing program admission criteria when first applying to the program. To gain admission to a nursing program, the student must be at college level for all general education courses.

Complicating matters is the achievement gap between high school and college. This gap is perpetuated through students graduating high school without the academic skills that are necessary in the college environment (Sepanik, 2012). Higher levels of academic skills such as study strategies, test taking strategies, and time management are needed in college (Wernersbach, Crowley, Bates, & Rosenthal, 2014). Throughout the high school years, students are not required to complete the same quantity of reading that is required in college. The increased amount of reading required can increase the gap between high school and college due to the student's inability to manage his or her time. Also, high school test questions are primarily located in the knowledge and comprehension levels of Bloom's Taxonomy, as opposed to the higher levels of application and analysis found on nursing exams.

While it is important to consider the student's early academic achievement, such as high school, in relation to nursing school success, external factors must be considered as well. Consider Yoder's model of "Student Needs Perception of Barriers" in which barriers are identified as personal needs (e.g., financial aid, child care), academic needs (e.g. tutoring, study groups), language needs, and cultural needs such as ethnic role models (Amaro, Abriam-Yago, & Yoder, 2006). The financial needs of the student can be met with varying grants and scholarships, but it is up to the institution to make these

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opportunities known to the student body. This lack of information is a major reason low socioeconomic students avoid seeking financial assistance with college (Scott-Clayton, 2012). In addition too many are ignorant of the cost of higher education; multiple studies have found both students and parents grossly overestimated the cost of college courses (Scott-Clayton, 2012).

The above-mentioned external needs and their potential barriers play a role in the motivation of the nursing student, which in turn, can affect whether the student passes or fails exams or the overall course. Motivation or the student's drive to engage in the learning process can be diminished because of perceived setbacks (Martin, 2008). Setbacks, such as the financial aid application process or the need for developmental courses, can cause the student to lose focus. It is imperative for the student who earns admission to the ADN program to succeed through the rigorous curriculum as a way to achieve his or her dream of becoming a nurse and caring for others.

For this study, a narrative inquiry qualitative design was chosen to gain insight into the perception of the student enrolled in a local associate degree program. The study will address the following research questions:

1. What is the persistence (defined as the continued engagement to obtain a specific goal despite frustrations, obstacles, and fatigue) of third-semester, second-year associate degree nursing students at a community college in the Northeastern US?

2. What reasons do third-semester, second-year associate degree nursing students give for persisting with a rigorous nursing curriculum?

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3. How does the persistence of third-semester, second-year associate degree nursing students affect their academic success, as defined as achieving a minimum score of 78 in previous semesters?

In order to address the above questions, persistence will be defined as the tenacity of the student to navigate through a difficult or troubled time to achieve a particular goal (Constantin, Holman, & Hojbota, 2011). Persistence through a nursing program is an important variable to take into consideration, as nursing school is demanding of the student. The nursing student must be able to understand, essentially, a new language. Medical terminology is utilized throughout the nursing curriculum to educate the student on every aspect of the human body. Furthermore, not only does the student need to understand how the healthy human body works, he or she must be able to comprehend a multitude of disease processes and their treatments to return the body to a state of homeostasis or balance. In addition to the demanding curriculum as it relates to the didactic portion, the program itself is time consuming. For most nursing programs, the student will attend at least two days of didactic instruction weekly, one day in a laboratory setting and at least one day of clinical instruction held at an outside healthcare facility. The laboratory setting is where the student can apply theoretical knowledge to simulation mannequins as well as manipulate the various equipment and tools utilized by a nurse. The clinical setting can be an eight- or 12-hour day held in a healthcare facility; in this setting, the student receives hands-on experience caring for a patient. While actual nursing education consists of three to four days per week, the student is also responsible for reading textbooks, creating care plans and/or concept maps, and viewing computer-based tutorials to aid in the learning process. The nursing curriculum also takes a physical

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toll on the student. Students must navigate the curriculum as well as the physical challenges of lifting, pulling, pushing, standing for long periods of time, and increased periods of stress. It is a massive commitment for the student to undertake; therefore, the persistence of the student is crucial to consider.

As mentioned previously, there are varying programs one can use to become a nurse. Diploma programs offer the ability to become an RN in two years. The curriculum of a diploma program is clinically based, with theoretical knowledge interspersed. Community colleges offer two-year ADN programs. Universities offer four-year BSN or accelerated BSN programs. The four-year BSN degree consists of two years of general education studies and two years of nursing specific courses. Accelerated BSN programs are typically 14-month programs consisting of six week blocks of course work. These programs require the student to have a baccalaureate degree in another field. It is essential to note the graduate of a diploma program, the two-year ADN, the four-year BSN, and the accelerated BSN programs all sit for the exact same licensure exam and practice according to the same Nurse Practice Act (Russell, 2012; White & O'Sullivan, 2012).

To gain admittance to a competitive nursing program, a student is evaluated through his or her overall grade point average (GPA), science GPA, and/or a standardized entrance test (Pitt et al, 2012). The GPA of the student during high school and first semester of college are reliable predictors of the student's ability to obtain the degree he or she seeks (Stewart, Lim, & Kim, 2015). As the nursing curriculum includes a high level of science throughout the program, a student's science GPA is an important factor

to consider. The standardized entrance test is similar to the college entrance exam as it measures the student's academic ability in math, English, and science concepts.

Once admitted to the nursing program, the student must adjust to a different method of instruction. Ricketts (2011) reports the need for advancement in strategies for teaching the nursing student due to the increased need for critical thinking. For the student to gain a deep knowledge base, the student must be actively involved in the learning process. Instructional methods leading to the discovery of new knowledge, such as case studies and role playing, are examples of how nursing educators teach in the classroom. The student not only needs to adapt to a new method of learning, but also must adapt to the loss of the social support system that comes with attending college. Often, the student moves into a dorm without knowing any of the other students. This potentially isolating event can increase the pressure on the student. In addition, the loss of the familial support for the student who moves away increases the stress of the student.

These environmental changes and the change of instructional methods can result in tremendous strife for the student. The student's self-esteem and quality of life are the victims of this constant strife. While attempting to further his or her education, the student must navigate a rigorous curriculum without the support of his or her peers. The persistent stress in one's life eventually decreases self-efficacy and the ability to maintain adequate grades. Dhabhar (2014) noted correlations between extended periods of stress and student health; prolonged periods of stress weaken the immune system and puts the student at risk for developing hypertension and infection. By gaining an understanding of the ADN student, this study can decrease the above-mentioned health risks in addition to making a case for the ADN remaining the entry level to practice.

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Through a narrative inquiry study, the researcher seeks the answers to the above-mentioned research questions surrounding the persistence of the ADN student. A qualitative methodology was chosen to delve into the perceptions of a particular population (Clandinin, 2013; Toma, 2011). There are 134 students currently enrolled in the two-year ADN program that is the focus of this study; this includes 60 students in their first year and 74 in their second year of the program. For this study, Callista Roy's Coping and Adaptation Scale (CAPS) survey was administered to the second-year students. Interviews with semi-structured questions were conducted with willing participants. The interviews lasted approximately 20-30 minutes each. These interviews took place in November until data saturation was achieved. Three faculty members were sought out to participate in semi-structured interviews to provide a different perspective on the ADN graduate.

Qualitative studies involve the interweaving of content ideas; for this study, the content ideas are the quality of the ADN and the BSN (Maxwell, 2013). Further, Clandinin (2013) states qualitative methodology involves not only studying the participants, but ourselves as well. The researcher is a graduate of the ADN program where she currently is an adjunct professor of nursing and conducted her study in that same setting. Her position at the college poses limitations to the study in that students may not be forthcoming with actual feelings, but may choose to report the thoughts they perceive the researcher would like to hear. In an attempt to combat this limitation, the researcher attempted to gain trust through the consent process, ensuring the students complete anonymity and making it clear that their participation would have no bearing on

their final grades. To ensure validity of the study, rigor was established through the proper transcription and coding of the interviews (Polkinghorne, 2007).

The following chapter will include a review of literature surrounding the profession of nursing with a focus placed on the student enrolled in a nursing program. External factors such as persistence, motivation, and stressors will be discussed as they relate to the student within higher education. Baccalaureate and associate degrees in nursing will be compared for the purpose of educating the reader. An overview of the theoretical frameworks utilized in the study (Roy Adaptation Model and constructivism) will be presented to give context.

Chapter 2

Review of Literature

There are a variety of ways an individual can obtain licensure as a registered nurse. One of those pathways is the two-year associate degree (ADN) offered at a community college. This degree is a valid option for entry into practice, as the graduate from this program has persisted through a rigorous curriculum and will go on to pass the same national examination to obtain licensure as the graduate of a four-year baccalaureate nursing program. The problem facing the nursing profession is an impending nursing shortage due to the number of nurses who will be reaching retirement age as well as the increasing number of individuals who are seeking healthcare. Patients are no longer only in the hospital; they are remaining in their homes and living longer. Therefore, more nurses are needed to care for a larger population. Additionally, associate degree programs continue to be the chosen avenue to licensure in the nursing profession for approximately half of new nursing graduates. These combined factors will serve to increase the pending nursing shortage if the BSN is made the only entry level to practice.

Through the use of a narrative inquiry methodology, the following research questions will be answered in this study:

1. What is the persistence (defined as the continued engagement to obtain a specific goal despite frustrations, obstacles, and fatigue) of third-semester, second-year associate degree nursing students at a community college in the Northeastern US?

2. What reasons do third-semester, second-year associate degree nursing students give for persisting with a rigorous nursing curriculum?

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3. How does the persistence of third-semester, second-year associate degree nursing students affect their academic success, as defined as achieving a minimum score of 78 in previous semesters?

Chapter 2 will review the literature related to the associate degree remaining as an entry to the nursing profession. An introduction to the profession will be discussed before delving into the intricacies of nursing school. Nursing schools are held to specific standards set by outside accrediting agencies; these standards will be discussed. The admission criteria for nursing programs will be evaluated along with the specific requirements for nursing students. To be successful in nursing school, the student must persist through an intense curriculum consisting of a minimum of four days per week of instruction; the instruction varies from didactic to hands-on demonstration in laboratory and clinical settings. The student must show a degree of resiliency while maintaining a busy school schedule along with external responsibilities that existed prior to the student entering the nursing program. Specific behavioral characteristics will be evaluated after an introduction to higher education is presented. Finally, the theoretical frameworks for this study will be addressed to provide structure for the study. By examining these specific topics, the necessity of the rigorous curriculum and the ADN student's subsequent persistence through the curriculum will show the benefit of having the ADN remain as entry level to practice.

Two theoretical frameworks, Callista Roy's Adaptation Model and constructivism, support retaining the associate degree as entry level to nursing practice. Roy's Adaptation Model focuses on the adaptation process the student will go through during the stressors of nursing school. In addition to the stressors of nursing school,

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students bring with them external stressors. Whether it is family or work obligations, the student must be able to adapt his or her home life to accommodate nursing school. Constructivism supports the attainment of knowledge through collaboration and the engagement of a life-long learning process (Brown, Collins, & Duguid, 1989). Through the application of these two frameworks, this study will show the practicality of the ADN remaining as the entry level to practice for nursing.

The Projected Need for Nurses

While there are more than four million active nurses in the United States (Alexander, 2015), the country is on the verge of a nursing shortage (AMN Healthcare, 2013). Between 2014 and 2022, there will be a projected growth rate of 19% for the nursing profession to care for the nation's growing healthcare needs (U.S. Bureau of Labor Statistics, 2014). A large portion of Americans currently have insurance coverage as a result of the Affordable Care Act (Budden et al., 2013; MacLean et al., 2014). With the surge of insured Americans, healthcare facilities are seeing an increase in patient visits, which will increase the need for RNs. Meanwhile, approximately 200,000 nurses will be reaching retirement age within this same timeframe (AMN Healthcare, 2013). The push for the baccalaureate degree (BSN) to be the base requirement for nursing would make the impending shortage of nurses even worse. Since approximately half of all nursing graduates earn an ADN as an entry-level requirement for practice, by discrediting the ADN graduate, the profession would only perpetuate the nursing shortage (National Sample Survey of Registered Nurses, 2010).

The nursing shortage can be defined as a gap between actual staff and projected staffing needs (Buchan, Duffield, & Jordan, 2015). This impending nursing shortage puts

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the public at risk. Nurses who practice in hospitals are faced with unsafe nurse-to-patient ratios; public health nurses also face unsafe patient ratios. In the public health aspect of nursing, a nurse can only visit a certain number of homebound patients in one day, resulting in sicker patients and minimal health education for the patient. Because of the unsafe homecare nurse-to-patient ratios, more patients will be admitted to the hospital, intensifying the unsafe ratios found in the hospital setting.

The Quad Council of Public Health Nursing Organization (2007) reports the impending nursing shortage is a result of poor funding from government agencies, decreased public health awareness, and a decreased number of nursing faculty qualified to educate nursing students on the importance of public health (as cited in Young, Acord, Schuler, & Hansen, 2014). While healthcare facilities are looking to methods for decreasing budgetary costs in the age of diminishing funds from the government, staff and inventory are the two budget lines that tend to take the most cuts. Decreasing staff only serves to add to the stress of the nurse; in fact, 93% of nurses report these cuts may cause them to leave nursing (Buerhaus, 2005). Thus, these financial cuts only increase the nursing shortage.

Another factor to consider in deciding which degree should be the entry level to practice is the quality of the ADN student. There are a variety of studies that focus on the nursing student; however, these studies typically focus on the BSN student, not the ADN student. Minimal studies are conducted with the ADN student population; however, 58% of nurses graduated with an associate degree in nursing (National Council of State Boards of Nursing, 2016). Fisher (2014) conducted a descriptive, non-experimental study to determine the professional value development of three entry-level nursing degrees: the

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diploma, the ADN, and the BSN. The results showed no significant differences between the ADN and BSN participants, but found the values (i.e. caring, activism, trust, professionalism, and justice) of the diploma-nursing students were higher than the ADN student and BSN student (Fisher, 2014). Interestingly, Martin, Yarbrough, and Alfred (2003) found that the ADN students scored higher than the BSN students on five of the subscales on the Nurses Professional Values Scale. The five subscales in which the ADN students scored higher were privacy and protection of information, assuming responsibility and accountability, using informed judgment with care and delegation, participating in improvement of nursing standards, and collaborating with other professionals to meet the healthcare needs of the public (Martin et al., 2003). While these two studies conflicted, it shows the value of the ADN graduate in that he or she practices in an environment demanding professionalism and knowledge; the above-mentioned studies prove the professionalism is present in this population, and the ability to pass the National Council Licensure Examination (NCLEX) gives evidence of the knowledge base.

History and Tenets of the Nursing Profession

Nursing is a growing profession due to its demand across the globe and the constant need for new professionals (Eley, Eley, Bertello, & Rogers-Clark, 2012; Price, Hall, Angus, & Peter, 2013). This global need for the profession goes back to the mid-1800s when Florence Nightingale sought to aid the soldiers of the Crimean War (Carroll, 1992). After the war, Nightingale took to transforming the civilian hospitals in England and improving the sanitation conditions in India and other British colonies to aid in the well-being of the population (Carroll, 1992). In addition to improving the environment as

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a method of nursing a sick individual back to health, Nightingale established a caring relationship with the individual (Wagner & Whaite, 2010). Nightingale wrote letters to the families of soldiers who died during the Crimean War because she felt responsible for the soldiers while they were away from home (Wagner & Whaite, 2010).

The American Nurses Association (ANA) (2016) defines nursing as the protection, promotion, and optimization of health and abilities, prevention of illness and injury, facilitation of healing, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, groups, communities and populations. The Institute of Medicine (2011b) adds, "nursing practice covers a broad continuum from health promotion, to disease prevention, to coordination of care, to cure—when possible—and to palliative care when cure is not possible" (p. 3). The profession of nursing covers a vast majority of concepts and ideals; therefore, the nurse must have a solid foundation of nursing practice and caring behaviors, along with the drive for obtaining new knowledge.

While caring and compassion are major tenets of a nurse, it is important to recognize the academic ability of the nurse as well. Navigating through an accredited nursing program takes dedication to academics; there is little time for socialization. Often students find themselves prioritizing studying for nursing school over family or work obligations. MacEntyre (2011) asserts nursing practice is more than technical skills and the ability to complete them; it also requires upholding standards of excellence within the nursing programs. While the ability to complete nursing tasks is at the core of nursing practice, the ability to uphold the standards set forth by the Accreditation Commission for Education in Nursing (ACEN) and the National Council of State Boards of Nursing

(NCSBN) require more than physical task accomplishment. These standards require the ability to critically think through a problem while maintaining a caring, empathetic persona. Through nursing school, faculty encourage caring behaviors along with imparting the knowledge and skills necessary to be a nurse.

Historically, nurses were educated in hospital-based diploma programs (Aiken, 2011; National Sample Survey of Registered Nurses, 2010). The community college began producing associate degree prepared nurses in the late 1960s because of the American Nurses Association's call for increasing the entry-level education for the profession (Aiken, 2011). Currently, approximately 45% of nursing graduates are entering the workforce with an ADN, according to the National Sample Survey of Registered Nurses (2010). Although the ADN accounts for almost half of new nurses, the unemployment rate is growing (Auerbach, Buerhaus, & Staiger, 2015a). This sad statistic may be a result of hospitals acquiring Magnet® recognition. The American Nurses Credentialing Center (ANCC) (2016) reports the typical Magnet® hospital has approximately 51% baccalaureate prepared nurses and only 35.8% associate prepared nurses.

Nursing Education

Nursing degrees. Two-year nursing programs award either an associate degree or a baccalaureate degree as an RN; the distinction is whether the student attends an accelerated baccalaureate program at a university or an associate degree program at a community college. The accelerated baccalaureate program requires the student to have attained a baccalaureate degree in another field. The two-year ADN program will accept a student who meets the admission criteria; pre-requisite general education courses can be

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taken while completing the core nursing courses. The traditional BSN program is four years in length, with the first two years consisting of general education courses and the last two years consisting of nursing courses. After graduating from either a two-year ADN program, a two-year accelerated BSN program, or a four-year BSN program, the individual will take the NCLEX-RN to obtain a license to practice nursing as an RN (Russell, 2012). The RN can care for individuals across the healthcare continuum but cannot medically diagnose or prescribe medications unless he or she possesses an advanced degree. The RN must follow the Nurse Practice Act established by his or her respective state. It should be noted there is not a difference between the associate prepared nurse and baccalaureate prepared nurse in the NCLEX-RN or the Nurse Practice Act (Russell, 2012; White & O'Sullivan, 2012).

Nursing school admission criteria. The admission process to gain entrance to a nursing program is a selective, competitive one. Both ADN and BSN schools look to similar admission criteria (Smith, 2017a; Timer & Clauson, 2010; Wolkowitz & Kelley, 2010). There are multiple variables affecting whether a student is accepted, including overall grade point average (GPA), science GPA, and/or pre-admission standardized examinations (Pitt et al., 2012). Stewart, Lim, and Kim (2015) report the student's GPA in high school and first semester of higher education are excellent predictors of not only academic success, but also of persistence in higher education. Because of a multitude of studies correlating a higher science GPA with increased positive outcomes, some nursing programs look at the pre-requisite science course GPA rather than overall GPA (Siu & Reiter, 2009). Pre-admission standardized exams, such as the Test of Essential Academic Skills (TEAS) or Health Education Systems Incorporated (HESI), can be used as a guide

for nursing schools to select the students most likely to be successful in the first semester of nursing curricula (Bremner, Blake, Long, & Yanosky, 2014). With these arduous admission criteria, the nursing student is under pressure to succeed from the beginning of his or her higher education career.

Challenges of higher education. For the student to succeed in a nursing program and meet the outcomes set forth by the accrediting body, the student needs to navigate the college environment. Higher education is vastly different from high school, as it requires concentrated thought on course work, a different format of instructional delivery, and the need for constant studying of complex material (Hystad, Eid, Laberg, Johnsen, & Bartone, 2009). This complex material is not meant to be learned for exams and then forgotten; it needs to be retained for the student's success in his or her chosen profession. Given the nature of secondary education, students assume nursing school would have the same format: a teacher-dominated, passive learning environment. However, the student quickly realizes the differences between previous educational experiences and the nuances of higher education.

Higher education does not depend solely on the instructor at the front of the class discussing what is going to be on the next exam, especially within the nursing curriculum. The acquisition of skills is a fundamental component in educating nurses; therefore teaching methods have evolved (Ricketts, 2011). Students enrolled in college courses learn differently than traditional high school students (Donche, DeMaeyer, Coertjens, VanDaal, & VanPetegem, 2013). There is a positive correlation between instructional strategies focused on discovery of new material and deep learning (Donche et al., 2013). Instructional strategies such as case studies are ideal for creating an

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environment of discovery. Furthermore, faculty need to become more creative in the classroom to engage the student in the learning process. This classroom engagement requires the faculty to allow the student time to think a problem through, make mistakes, and then learn from those mistakes (Gibson, 2010). Engaged students think about a concept on a grander scale and how it relates to reality, as opposed to focusing on narrow facts in a group format (Starko, 1995 as cited in Gibson, 2010). Through focusing on a grand concept, the student can begin to think critically about how the smaller concepts feed into the larger concept. Group work within the classroom is an instructional strategy allowing for discussion between classmates to stimulate the thought process (Billings & Halstead, 2012). The active learning strategies utilized in the classroom are new to the college student, as he or she has routinely been a passive learner in his or her previous educational career.

Stimulating the thought process through the use of active learning strategies is imperative for the nursing student. While traditional lecture is convenient and cost-effective, it does not allow for a student to absorb and retain the information presented (Barrows, 1983). To enhance the critical thinking skills and the retention of information, a problem-based learning approach is beneficial. Barrows (1996) defines problem-based learning as student-centered learning occurring in small working groups that are focused on a particular problem. Not only does this learning style lend itself to critical thinking and clinical judgment, it also assists with socialization of classmates (Kantar, 2014).

The student new to higher education must often deal with the loss of the social and familial support as he or she leaves home for the first time (Hystad et al., 2009). Not only does the student leave the comfort of home, but also, he or she leaves behind an

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extensive network of peers (Vianden & Ruder, 2012). The challenge of establishing a new peer network in a foreign environment can be daunting. In addition to creating new relationships with peers, the student must handle the parental expectations of adult behavior while away from home (Vianden & Ruder, 2012). Non-traditional students must find a balance among work, school, and personal and family commitments (Beggs, Shields, & Goodin, 2011).

The aforementioned nuances of academia create a challenge for one's emotions (Rania, Siri, Bagnasco, Aleo, & Sasso, 2014). For nursing students in particular, the rigor of the coursework increases the stress the student faces, thereby challenging the emotions. The education of nurses requires active learning within the classroom for the concepts to stay with the student through his or her career. Active student participation in the classroom setting allows for not only learning the concept, but also understanding the how and the why of the concept (Keyser, 2000). However, the multi-tasking of active learning can lead to feelings of frustration and anxiety. This can be especially true when the student must attend a laboratory class and a clinical rotation within a healthcare facility, along with attending the didactic portion of the course.

Challenges of nursing education. The stressors of nursing school include the complex clinical rotation, as noted by Salamonson et al. (2015). Clinical nursing education takes place in a healthcare facility (e.g. hospital, rehabilitation center, nursing home). In this setting, the nursing student is responsible for performing nursing skills with actual patients under the direction of a clinical instructor. These nursing skills range from obtaining vital signs to performing physical assessments to administering medications as prescribed by the physician. Nursing students have found their clinical

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rotations to be overloaded with assignments and stressful faculty interactions, specifically because faculty have high expectations of the student who is new to the clinical site (Shaban, Khater, & Akhu-Zaheya, 2012). The stress of being placed in an unknown environment to interact with unknown healthcare staff, and being held to high standards by those healthcare staff, is reported as one of the most hectic experiences in nursing school (Shaban et al., 2012). Additional stress is added due to the students feeling unsure of themselves given they are new to the profession of nursing. While this environment provides the most realistic learning for the student, the student is not often prepared for the reality of clinical education (Levett-Jones, Pitt, Courtney-Pratt, Harbrow, & Rossiter, 2015). The student must learn to navigate the unknown facility, the unknown staff, and the little knowledge he or she has of the nursing profession in caring for the ill. In this anxiety producing environment, the nursing student must learn to adapt using various internal coping mechanisms.

Qualities of a Successful Nursing Student

Given the increased attention paid to the BSN student, there is little research surrounding the persistence of the ADN student. Research has been conducted in the field of retention, persistence, and other personality factors of the nursing student; however, these studies do not delineate the degree of the nursing student (Eley et al., 2012; Jackson et al., 2011; Price et al., 2013). This study serves to add current research about the ADN nursing student and the value he or she adds to the profession.

In a quasi-experimental study focusing on the effects of hardiness training of the BSN student, Jameson (2012) found an increased hardiness in the BSN student along with a moderate perceived stress level. This study further revealed that hardiness training

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did not increase the student's resiliency to stress. Despite the post-test displaying no increase in hardiness of the BSN student, the perception of the experimental group was that hardiness was increased (Jameson, 2012).

Hodges, Keeley, and Troyan (2008) completed a qualitative study surrounding the hardiness of the BSN prepared nurse in acute care. The themes attributing to his or her stress noted in that study were "learning the milieu, discerning fit and moving through" (Hodges et al., 2008, p. 83). While this study focused on post-graduation, the themes are also applicable to the persistence of the nursing student. The student must learn about his or her surroundings in the nursing program, including expectations from faculty and from the hands-on experiences as well as the physical environment. Finding his or her place in a rigorous nursing curriculum stresses the student due to the multiple delivery methods of the education. The BSN student, "struggles to reconcile discrepancies between their own value system's assumptions of professional nursing with the realities of actual bedside practice" (Hodges et al., 2008, p. 87). While this study discusses the BSN student, these same principles could potentially apply to the ADN student.

Krov (2010) performed a quantitative study on BSN students and their resilience to complete the degree. Using the Motivated Strategies for Learning Questionnaire, the Hope Scale, and the Grit Scale, Krov found intrinsic factors attributed to the completion of the degree, as reported by 79% of the participants. Only 47% of the responses were in favor of extrinsic factors motivating the student to complete the degree (Krov, 2010). Price, Hall, Angus, and Peter (2013) conducted a narrative inquiry qualitative study to determine the deciding factors behind choosing nursing as a career. The participants (N=12) reported "the desire to make a difference in people's lives and 'help others'" as

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their motivation to become a nurse (Price et al., 2013, p. 308). Determined, altruistic gestures such as those reported complement the Krov's findings that intrinsic factors were more motivating than external factors such as job stability or monetary gains. It is clear that the nursing student must navigate a host of factors in order to be successful within a difficult program. With the motivation to make a difference in people's lives and helping others, the ADN student will persist through the program in order to achieve their dream of becoming a nurse.

Emotional intelligence. While each state has its own Nurse Practice Act translating the standards of practice and delineating what is expected of each professional nurse, it does not encompass the personality traits or behaviors a nurse should bear (Russell, 2012; White & O'Sullivan, 2012). Nurses must be caring and possess compassion, honesty, and accountability, in addition to being adept at teamwork and effective communication (Pitt, Powis, Levett-Jones, & Hunter, 2014). Nurses must be able to show empathy and caring behaviors toward another person because often the patient and their family look to the nurse for guidance in times of crisis. The nurse is the healthcare professional at the forefront, caring for the patient while translating the medical jargon into terms the patient understands. Eley, Eley, Bertello, and Rogers-Clark (2012) report the opportunity for caring and a feeling that "nursing is my calling" as the two major reasons individuals choose nursing as a career (p. 1550). The desires to care for others or to help those in need have also been identified as reasons for becoming a nurse by Price et al. (2013). It is important for a nurse to possess these emotional qualities; however, a nurse must also possess the intelligence and critical thinking skills to perform his or her duties as well.

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Being knowledgeable about the many facets of patient care and maintaining an empathetic and compassionate manner may be difficult for some students. Nursing requires the student to have a sound sense of self and the ability to deal with emotional fluidity. The student needs to be aware of his or her own self while dealing with a multitude of personalities and emotions. An emotionally intelligent student possesses the following traits: the ability to care, compassion, competence, effective communication, courage, and commitment to the profession (Lyon, Trotter, Holt, Powell, & Roe, 2013). Goleman, Boyatzis, and McKee (2001) note maintaining a positive attitude while exhibiting signs of emotional intelligence creates an environment for professionals to flourish. Having emotional intelligence is linked to high academic performance and positive outcomes within nursing programs (Beauvais et al., 2014; Kendall-Raynor, 2012).

Persistence. Persistence is the tenacity to continue through a difficult and trying time to attain a goal. Constantin, Holman, and Hojbota (2011) define persistence as remaining engaged in an activity despite the possibility of not completing the task. Evans, Baker, and Dee (2016) define persistence in higher education as remaining engaged throughout a course. Evans et al. (2016) discuss persistence in higher education, specifically online or distance education, in terms of the number of students who return semester after semester or year after year. From this perspective, their definition focuses on the statistics rather than the behavioral aspect of persistence.

For persistence to occur, Tinto (1997) believes the student should be at the center of learning and remain actively involved with the overall college experience; the learning does not stop once the student leaves the classroom. It should be noted that while there

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are studies focusing on the persistence of the BSN student, there are very few studies detailing the persistence of the ADN student. The act of persistence is to take the internal determination and create a drive to succeed. An important factor in internal drive is the student's ability to work above his or her potential toward the goal at hand (Duckworth, 2016). Persistence does not come from one particular place; it can be intrinsic, extrinsic, or a bit of both. Problem-based learning lends itself to persistence in that both intrinsic and extrinsic factors are present, intrinsic being the self-directed learning and extrinsic being the small working groups and the tutor who monitors the groups (Barrows, 1983). The knowledge gained through problem-based learning will certainly be applied to future experiences, therefore leading to higher retention (Barrows, 1983). Other concepts that are used interchangeably with persistence are passion, perseverance, or, more recently, grit. While this drive is primarily internal, there are a host of external factors that can affect it: race, age, gender, etc.

There is no evidence of one racial group being more persistent than another (Markle, 2015). However, given most of the nursing profession is female, it is imperative to consider the role gender plays in persistence. Research shows that women who have role conflicts may consider dropping out of higher education but have the internal drive to persist (Markle, 2015; Muller, Dodd, & Fiala, 2014). This internal drive to persist comes from the desire to better herself and, by extension, her family. Women often struggle with academics because they tend to be the primary caregiver for the family while maintaining their work schedule in order to support the household (Walpole, Chambers, & Goss, 2014). Often, women find themselves feeling selfish because they choose to continue their education and not focus solely on their roles within the home

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(Markle, 2015). Men tend not to have these feelings of guilt and selfishness when it comes to furthering their education because they see the end result being worth the struggle (Markle, 2015).

In nursing, males are a minority. Only 9.6% of America's RN population are male; however, this number has risen dramatically from 2.7% in 1970 (US Census Bureau, 2013). Boughn (2001) conducted a qualitative study to determine the reasons why individuals chose nursing and found the men who chose the profession expected financial stability as well as autonomy and power in the workplace. The males within the study reported caring for and helping others as a reason for entering the profession, but were more likely to aspire to leadership roles (Boughn, 2001). Leadership roles offer the autonomy, power, and increased salaries men desire.

Throughout their nursing education and practice, men must persist despite a multitude of stereotypes. One third of male nurses report being questioned about their sexuality, as it is assumed the male nurse is a homosexual, given "real" men do not exhibit caring behaviors (Stott, 2004). In addition to questions about sexuality, the male nurse must also constantly reiterate he is a nurse and not a doctor. Many of the population assume the male nurse is a physician because nursing is traditionally a female role (Villeneuve, 1994). Unfortunately, not only do men face the above-mentioned stereotypes, but they also struggle with academics just as their female colleagues do.

Resiliency. For a student to persist, a degree of resiliency must be present. Resiliency is the process of positive adaptation in the realm of adverse or difficult times (American Psychological Association, 2010). Henderson and Milstein (2003) define resiliency as the ability to rebound from a negative experience with more

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strength because of the struggle. A student can learn to be resilient by adopting new thoughts and behaviors during times of stress (American Psychological Association, 2010; Henderson & Milstein, 2003). Researchers believe the demanding nursing curriculum can aide in creating resilient behaviors in the students enrolled (Hodges, Keeley, & Troyan, 2008; Taylor & Reyes, 2012). By focusing on the end goal of obtaining a nursing degree, the student adapts his or her life to succeed in school. Having resiliency forces one to look at the positive challenges of life instead of the negative (Henderson & Milstein, 2003). Interestingly, the social work profession has a slightly different definition of resiliency; this discipline views it more as engagement in the job along with various methods of coping (McCann et al., 2013). Within the literature surrounding nursing and the concept of resiliency, the most prevalent definition is adapted from the psychological profession, which defines resiliency as a characteristic of adapting to a difficult time.

There are both internal and external protective factors within resilient people (Henderson & Milstein, 2003). These protective factors are characteristics that assist the individual in avoiding the negative connotations of a stressor (Henderson & Milstein, 2003). Internal factors, such as sociability, sense of humor, problem solving and belief in self-control, give the individual a general positive outlook on life (Henderson & Milstein, 2003). The ability to be social and get along with people allows one to gain trust and establish relationships, while the ability to think critically through a problem lends to feelings of self-confidence and self-efficacy. Dweck (2016) notes the student who believes he or she can learn more has increased persistence given the constant self-imposed challenges.

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External factors, such as surrounding oneself with trustworthy colleagues, establishing relationships, delegating appropriately, and appreciating the uniqueness of each team member, couple with the internal factors to make a resilient individual (Henderson & Milstein, 2003). Through creating a positive environment, the individual can maintain an overall positive attitude during times of stress. In addition, the internal factors lend to creating the external factors. For example, having a sense of humor and sociability helps to establish positive relationships. Individuals who value each team member for his or her uniqueness reinforce relationship building. Exhibiting resilient behaviors increases self-efficacy. Having resilience allows for positive outcomes through these internal and external factors (Hodges, Keeley & Troyan, 2008). By demonstrating these resilient behaviors, the nursing student can persist through a difficult curriculum to succeed and pass the national licensure exam.

Self-efficacy. Self-efficacy, or the student's perception of his or her own competency, allows the individual to succeed within academia (Hughes, Galbraith, & White, 2011). Bandura and Locke (2003) believe the individual can produce the effect(s) desired through either internal or external motivators. The nursing student who believes in himself or herself will find a way to succeed whether it be reducing work hours or seeking assistance through tutors. In these instances, the student can control the situation. However, there are times when the student does not have the ability to change his or her particular situation, and therefore, the student with self-efficacy will seek faculty to assist in changing the situation (Bandura, 2012).

According to Bandura (2012), the student can build self-efficacy in four ways. The first method of building self-efficacy is through experience. A student achieving

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success easily and early in his or her academic career will have an increased self-efficacy (Bandura, 2012). Conversely, if the student does not achieve success as easily, he or she can develop resilience and, thus, increase his or her self-efficacy (Bandura, 2012). Modeling is the second way a student can believe in himself or herself (Bandura, 2012). Identifying with a successful peer allows the student to believe that if the peer can achieve success, then the student will be able to do so as well. Continuing in the social realm, persuasion is the third method of increasing self-efficacy (Bandura, 2012). Outside influences who encourage a student's positive sense of self can aid the student's belief he or she will accomplish his or her goal. Positive comments can improve the student's feelings of self-worth.

Finally, the emotions of the student play a role in self-efficacy (Bandura, 2012). Positive thoughts can improve the student's sense of competency. If the student believes he or she can do it; he or she will. Bandura (2012) reports a student's confidence in his or her own self-efficacy can affect whether the student has pessimistic or optimistic thoughts. Thus, the nursing student should surround himself or herself with positive influential people to assist in increasing the internal motivation. In addition, instructors who utilize small groups in an active learning classroom, which promotes a problem-based learning style, will enhance the students' self-efficacy. When an instructor facilitates small groups working on one specific problem, the student is able to discuss, review, and potentially debate with others their view of the situation (Barrows, 1996). Through this constructive dialogue, the student can increase self-confidence by owning the knowledge they contribute to the group.

Motivation. The motivated student will succeed in academia as a result of investing a large portion of time and effort in his or her course work (Pintrich & Schunk, 2002 as cited in Wijnia, Loyens, & Derous, 2011). Motivation, or the influential forces behind the investment of time and or energy, plays an important role in student persistence (Urdan & Schoenfelder, 2006). For example, the student who is determined to become a nurse is more likely to spend extra hours reading, practicing skills, and researching nursing concepts to pass a nursing exam. Additionally, this same student is more likely to seek assistance from tutoring services or faculty in an ADN program. Further, the student who may not have access to a four-year BSN degree may persist through the ADN program to initially gain licensure. After gaining licensure, the ADN graduate can gain employment to obtain experience while continuing his or her education in an RN-to-BSN completion program. Waterhouse and Beeman (2003) note participating in long hours of homework was associated with higher pass rates (as cited in Simon, McGinnis, & Krauss, 2013). The dedicated, motivated student will succeed in the ADN program because he or she takes time to digest the information presented by faculty (Keyser, 2000).

While persistence and motivation are important traits to possess, it is imperative that the student have academic success along with these internal factors. Through the two-year ADN program, the student can persist by using emotional intelligence, self-efficacy, and resiliency. Jackson et al. (2011) noted nursing students who endured a hostile environment in their clinical rotations used those experiences as motivation to become a better nurse upon graduation. Moreover, researchers have determined persistence and

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resiliency are important factors affecting retention of nurses, which will help decrease the impending nursing shortage (Pines et al., 2012).

Nursing Standards

The motivated, persistent students who complete either an ADN or BSN program will take the same national licensing exam. Thus, community colleges and universities look to accrediting bodies for guidance with nursing curricula. One such accrediting body, the Accreditation Commission for Education in Nursing (ACEN) (2017), has established a set of standards for each nursing program. These standards guide administration and faculty of nursing programs toward the common goal of graduating a safe, competent general practitioner.

Outcomes show how a program affects those involved as well as how the program influences the community indirectly (Ryan, 2016). Further, assessment of outcomes provides evidence of program accountability, or whether the student learned what the program set out to teach (Gaberson & Vioral, 2014). Nursing, as a profession, utilizes the accreditation models of program assessment to ensure outcomes are similar across the nation (Gaberson & Vioral, 2014).

ACEN (2017) publishes standards or outcomes for each degree in nursing: associate, baccalaureate, masters and doctoral. Each program has six standards to meet:

Standard 1: Mission and Administrative Capacity

Standard 2: Faculty and Staff

Standard 3: Students

Standard 4: Curriculum

Standard 5: Resources

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Standard 6: Outcomes. (ACEN, 2017)

There are minimal differences in how these standards are represented in ADN programs compared to BSN programs. For example, under Standard 1, the only difference is the ADN program is to be administered by a nurse holding a graduate degree, while the BSN program is to be administered by a nurse holding a doctoral degree (ACEN, 2017). The rest of the standard discusses the assurance that the mission and philosophy of the program reflect those of the governing institution and those in administration are academically and experientially qualified (ACEN, 2017). Standard 2 also differs in the education of the faculty and staff. For the ADN, it is not required for any faculty or staff to hold a doctoral degree. However, the BSN program must have a minimum of 25% of faculty with a doctoral degree or at least enrolled in a doctoral program (ACEN, 2017). The remaining points of this standard include faculty and staff having expertise in the areas in which they teach and participating in ongoing professional development (ACEN, 2017). There is no difference between Standard 3 for the ADN program and the BSN program. This standard speaks to student policies being easily accessible, compliance with Higher Education Reauthorization Act Title IV, as well as technology orientation and requirements (ACEN, 2017).

There are also no differences between the ADN and BSN programs for Standards 4, 5, and 6. Standard 4 requires the curricula to support the achievement of student and program outcomes (ACEN, 2017). Within this standard, the learning environment is discussed as it relates to supporting the learner with evidence-based practice and nationally established patient health and safety goals (ACEN, 2017). Standard 5 discusses the fiscal, physical, and learning resources throughout the program. Standard 6 speaks to

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outcomes and the evaluation of the program and its students post-graduation (ACEN, 2017). Specifically, the standard requires both qualitative and quantitative data collection to ensure the students who have graduated from the program are satisfied with the education received, as well as the satisfaction of local employers who hired the graduates (ACEN, 2017). With the minimal differences between the ACEN's standards for ADN and BSN programs, it would make sense to maintain the ADN as entry level to the nursing profession.

There is another accrediting agency, the Commission on Collegiate Nursing Education (CCNE), that accredits BSN programs and graduate nursing programs. Like ACEN, CCNE provides guidelines to nursing programs toward the common goal of graduating a safe, competent general practitioner. While ACEN has 6 standards that guide nursing curricula, CCNE has four (Table 2). Standard 1 of CCNE (2013) focuses on the mission and governance of the program, including both the parent institution and the nursing program itself. Another difference between the ACEN and CCNE is that CCNE (2013) requires the nursing program to identify professional guidelines (e.g. The Essentials of Baccalaureate Education for Professional Nursing Practice), whereas ACEN requires the program to follow evidence-based practice models. Standard 2 ensures that financial and physical resources of the nursing program are sufficient to ensure the outcomes of the program are met; this is similar to ACEN's Standard 5 (CCNE, 2013). It is within Standard 2 that CCNE requires the nurse administrator to be a registered nurse. CCNE's (2013) Standard 3 focuses on the student and program learning outcomes as well as the methods of teaching that ensure the attainment of said outcomes. This is similar to ACEN's curriculum Standard 4, with the major difference being CCNE focuses on

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professional nursing guidelines. Lastly, CCNE's (2013) Standard 4 focuses on outcomes: nursing program outcomes, NCLEX pass rates, employment after graduation, and faculty outcomes. This last standard is similar to ACEN's Standard 6. As noted above, CCNE has only four standards; however, the standards cover all 6 of ACEN's standards.

Table 2

Comparison of ACEN and CCNE Standards

Standard	Accreditation Commission for Education in Nursing (ACEN)	Commission on Collegiate Nursing (CCNE)
I	Mission & Administrative Capacity	Program Quality: Mission & Governance
II	Faculty & Staff	Program Quality: Institutional Commitment & Resources
III	Students	Program Quality: Curriculum & Teaching-Learning Practices
IV	Curriculum	Program Effectiveness: Assessment & Achievement of Program Outcomes
V	Resources	
VI	Outcomes	

Theoretical Framework

Roy's Adaptation Model. Roy's Adaptation Model (RAM), which focuses on the individual's ability to adapt in times of stress, is the theoretical framework utilized throughout the study (Davidson, 2009). Sister Callista Roy began working on her theoretical framework in 1970 as a result of her graduate nursing education. The resilience of the pediatric population as well as the noted positive interaction and nursing interventions piqued her interest in creating a theoretical framework to explain the

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adaptive phenomenon she witnessed (Roy, 2009). While Sister Callista Roy proposed her adaptation model with the injured or ill in mind, she felt this model was applicable to any individual at any time (Roy, 2009). In this study, Roy's Adaptation Model will be used as a lens to study the ADN student.

According to Roy (2009), a person is an adaptive system with internal mechanisms that drive change as it sees necessary to maintain homeostasis or the state of normalcy. These internal processes are biologic, cognitive, and emotional in nature. The biologic or physiologic aspect consists of hormones and other neurochemicals that serve to protect the individual from stress (Gorman & Anwar, 2014; Roy, 2009). This physiological reaction is known as fight-or-flight; the body senses a threat or increased stress and neurochemicals react to prepare the individual to fight the threat or flee the threat (Gorman & Anwar, 2014). Cognitively, the person can think through the external situation and make a decision to react to the emotions he or she is feeling or change the environment that is causing the distress (Roy, 2009). The concept of cognition was defined by a Swiss psychologist, Jean Piaget, as the "ability to reason, make judgments, and learn" (Gorman & Anwar, 2014, p. 54). Roy believes the ability to exist in an environment requires consistent adaptation, as the environment is fluid. Roy (2009) has defined environment as any and all conditions and circumstances that could potentially affect the individual's growth and development. The adaptive responses the individual experiences through stress serve to promote the integrity of the human as a whole (Roy, 2009).

Within RAM, there are four adaptive modes in which the student can be categorized: physiological of the individual or physical for the group, self-concept for the

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individual or group identity, role function of the individual, and interdependence in groups (Boston College, 2013; Roy, 2009). The physiological-physical refers to the most basic of necessities; the student requires oxygen, food, and sleep to adapt to the environment (Roy, 2009). Nursing students require food and proper sleep to be successful in the program. Healthy behaviors, such as proper rest and exercise, have been reported as beneficial to the student's academic performance (Flueckiger, Lieb, Meyer, & Mata, 2014). Self-concept or the group identity, the second adaptive mode, focuses on the spiritual sense of self and meaning in the world. Self-concept is the view an individual takes of oneself (Locke, 2006; Nurius, 1994). Roy (2009) breaks self-concept into body sensation and body image. Group identity is similar to self-concept, but it reflects how the individuals within a group perceive themselves in that particular dynamic (Roy, 2009). The third mode is role function. Being aware of one's role during nursing school and how it interacts with the surrounding environment can assist with adapting to the stressors that come with it. Lastly, the mode of interdependence represents the relationship of the student with other people within the environment, such as faculty, other students, or patients (Roy, 2009). While it is important for students to have a network of supportive colleagues, academic success is increased when a student has a meaningful relationship with faculty (Baker, 2013).

RAM focuses on the person as a whole, acknowledging that a physical or emotional stimulus affects how one perceives self and thereby copes. Coping mechanisms can be both positive and negative; the level of stress is the deciding factor on whether the individual chooses a positive or a negative mechanism (Goff, 2011). Learned resourcefulness, self-control, and self-awareness are positive coping mechanisms (Goff,

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2011; van der Riet, Rossiter, Kirby, Dluzewska, & Harmon, 2015). The chosen coping mechanism to deal with stress also depends on the person's role within the environment (McEwen & Wills, 2011).

RAM is a beneficial framework for this study as the study focuses on the experiences of the second-year RN student and his or her adaptation to a stressful environment. Much like the nursing profession itself, RAM focuses on the entire individual and the practical application of adaptation in the environment (Roy, 1979).

Constructivism. The theoretical framework of constructivism allows for the building of critical thinking skills in the active learning environment of the nursing classroom (Iwasiw, Goldenberg, & Andrusyszyn, 2009). Constructing knowledge requires consistent evolution of knowledge with each encounter as a result of new discussions, negotiations, or activities (Brown, Collins, & Duguid, 1989). Active learning strategies, such as case studies, give the nursing student the opportunity to learn individually as he or she works through the case and then apply his or her knowledge within a group environment that promotes critical thinking. At this point, the experienced faculty member will guide a classroom discussion to further enhance the knowledge and problem solving skills the students have presented.

The constructivist framework supports Roy's Adaptation Model (RAM) in that there is a level of fluidity with both; the student's ability to adapt depends on a multitude of variables, just as a constructivist believes that learning is not systematic (Duane & Satre, 2014). Learning is different for each student due to his or her previous experiences and current situation (Bozhovich, 2009; Jonassen, 1997). Vygotsky (1984) described this framework as a student working on a problem independently and then consulting with an

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experienced faculty member to further his or her knowledge (as cited in Bozhovich, 2009). Vygotsky (1984) describes the zone of proximal development (ZPD), which is the area of knowledge between where a student begins and where he or she ends up at the end of a curriculum (as cited in Bozhovich, 2009). This ZPD does not have a specific range or time frame, as each student learns at a different pace. Since the attainment of knowledge varies due to the complexity of nursing curricula, the students involved can show varying ZPDs (Bozhovich, 2009). Much like the concept of persistence, the ZPD is dependent on internal and external factors. Within this framework, there is room for failure or unsuccessful attempts at a course. This failure will occur if the student does not have the persistence or motivation to work toward the attainment of information needed to solve whatever problem is at hand (Bozhovich, 2009). Additionally, the student's ability to collaborate with others depends on his or her ability to communicate as well as his or her internal desire to learn from another student or faculty member (Bozhovich, 2009; Duane & Satre, 2014). Vygotsky (1978) believes the social interaction between students and the interaction between student and faculty promotes the acquisition of knowledge and increases the motivation of the students involved (as cited in Duane & Satre, 2014).

The length of problem solving depends on the previously mentioned capabilities, such as working independently and collaboratively, are attributed to the student's individual ZPD (Bozhovich, 2009). Collaboration or working with small groups of fellow students or working with an experienced faculty speaks to the internal and external factors pertaining to this study. As discussed within the second chapter; persistence, resiliency, and self-efficacy are influenced by internal and external forces of the student.

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These factors and the constructivist framework also mirror RAM, which relies on both forces, internal and external, in order for the student to positively adapt to the environment.

Both frameworks, Roy's Adaptation Model and constructivism, support the interdisciplinary approach found in healthcare. They both focus on the multitude of variables that are associated with healthcare. For example, a patient who has surgery is dependent on nurses, doctors, physical therapists and pharmacists. Many variables impact whether the patient has a successful outcome; infection control practices, medication dosage calculations, and timing of therapy are just a few examples. Additionally, whether the patient has the qualities of persistence, motivation, and self-efficacy also affect the outcome. If the patient has the ability to persist through the post-operative therapies prescribed, a positive outcome will be had. These same principles of both frameworks can be applied to persisting through nursing school. RAM focuses on coping mechanisms to maintain a sense of normalcy during periods of stress or change (Roy, 2009). Constructivism depends on communication and collaboration for a student to learn in an active environment (Brown, Collins, & Duguid, 1989). A nursing student must have the internal drive to be successful in a nursing program despite whatever obstacles are present. This nursing student may need to rely on external constituents to motivate during periods of extreme stress. Additionally, the student will need to build on prior knowledge to navigate the present obstacle.

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Methods

Introduction

This study aimed to show the persistence of the third-semester, second-year associate degree (ADN) nursing student at a local community college. With the Institute of Medicine (2011a) declaring an increased need for baccalaureate (BSN) prepared nurses by 2020, the ADN student is in danger of being forgotten. ADN programs are offered at community colleges for a lower cost than traditional BSN programs. In fact, because of the lower tuition, community colleges have not been involved in the controversy surrounding the cost of higher education (Jenkins & Belfield, 2014). The American Association of Community Colleges (2016) reports 12.3 million students were enrolled in the 1,108 community colleges in the fall of 2014. Students choose to seek degrees at community colleges because of the affordability and the ability to work and maintain a household while furthering their education.

The majority of nurses who enter the profession do so with an ADN from a two-year community college (McEwen, White, Pullis, & Krawtz, 2012). This two-year program offers a way to balance the demand for nurses because it is a shorter degree program than the traditional four-year BSN program (Staykova, 2012). As we continue in the 21st century, with the increasing number of individuals seeking healthcare as a result of the change in healthcare coverage and the increasing complexity of patients' health, more nurses will be needed (Institute of Medicine, 2011b). In addition, with 20% of the population being 65 and older by 2030, an increasing number of nurses will be crucial to

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meet the healthcare needs of the aging population (Institute of Medicine, 2011b). If the ADN does not remain the entry level to practice, these factors will increase the impending nursing shortage and risk to the public.

The persistence or tenacity of the ADN student is an important trait to consider, as these students have the desire and drive to move the profession forward. Persistence is defined as the student remaining engaged in a program despite the possibility of not completing the degree (Constantin et al., 2011). Through the research questions in this study, the researcher sought to find the persistence level of the third-semester, second-year associate degree nursing student.

Research Questions

This study serves to answer the following research questions:

1. What is the persistence (defined as the continued engagement to obtain a specific goal despite frustrations, obstacles, and fatigue) of third-semester, second-year associate degree nursing students at a community college in the Northeastern US?

2. What reasons do third-semester, second-year associate degree nursing students give for persisting with a rigorous nursing curriculum?

3. How does the persistence of third-semester, second-year associate degree nursing students affect their academic success, as defined as achieving a minimum score of 78 in previous semesters?

Research Design

This study utilized a qualitative narrative inquiry design focusing on the persistence of the third-semester, second-year ADN student at a local community college.

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Narrative inquiry involves gathering written, oral, or visual narratives of the participants' experience (Trahar, 2009). The participant's story is not to be taken as a simple story; the experience of the participant is meant to strengthen and inspire others (Huber, Caine, Huber, & Steeves, 2013; McGannon & Smith, 2014). Through storytelling, researchers can gain appreciation for what the nursing students have experienced and will become after graduation. For example, a student who struggles through nursing school will appreciate the lessons learned and therefore will inspire others in the profession. Further, by utilizing a narrative inquiry approach, researchers can show the participant's evolution into a professional (Huber et al., 2013). The previous chapter outlined the literature surrounding the nursing student, specifically the variety of pathways to obtain licensure as a registered nurse, the rigorous nursing curricula, nursing standards, and the softer skills of persistence, resiliency, and self-efficacy.

As the ADN student adapts to the nursing curricula, Roy's Adaptation Model (RAM) assists the student with becoming successful each semester. RAM is a framework that supports the student's ability to adapt in times of stress (Davidson, 2009). Roy (2009) believes in using both internal and external mechanisms to maintain homeostasis or the state of normalcy for the student. When faced with a stressor, RAM instills hope for the student to find a positive way to cope (Clarke, Barone, Hanna, & Senesac, 2011). Throughout the program, the ADN student has the ability to persist as a result of various coping mechanisms. The coping mechanisms used by the student during the ADN program were evaluated. External support systems were also evaluated as they related to the student and success in the program. However, not every student has the adaptability to guarantee successful completion of a nursing program. Narrative inquiry allows for the

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researcher to learn about the persistence, coping mechanisms, and success of the ADN student at one community college.

Narrative inquiry was chosen for this study because, as Clandinin (2013) states, "we are, as inquirers, studying ourselves in relation as well" (p. 40). This method begins with an autobiographical discussion of the study, in that there are personal, practical, and social justifications to the research from the researcher's perspective (Clandinin, 2013). As a result of entering the profession as an ADN graduate from a community college, the researcher can attest to the importance of this degree remaining as an option for entry into practice. Rubin and Rubin (2012) note topics often arise from experiences, leaving the researcher feeling frustrated or left out. In this case, the frustration lies with the ADN graduate being overlooked as a valuable team member in the health profession. By disregarding the ADN as entry level to practice, the researcher felt we were negating a large number of well-educated nurses. In fact, 58% of nurses entered the profession in 2015 with an ADN (National Council of State Boards of Nursing, 2016). In addition, dismissing the ADN nullifies the hard work of the nurse educators who teach in the ADN programs. These educators work tirelessly to ensure the curriculum meets the standards of the accrediting bodies governing the nursing programs. While the ADN graduate should continue his or her education as a method of professional and personal growth, the nursing profession needs to continue to recognize the value of the ADN as an entry level to practice. The value of the ADN student came through in the semi-structured interviews used within this narrative inquiry. This methodology allowed for discussion of the quality of each particular student (Huber et al., 2013).

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Researchers using narrative inquiry delve into the participant's world and examine the variables affecting his or her experiences (Clandinin, 2013; Toma, 2011). By establishing a relationship with the participants, the researcher is further extending the constructivist framework (Clandinin, 2013). This is especially relevant given the field of nursing, which is traditionally a hands-on profession. The constructivist framework lends itself to the building of relationships through collaboration with experienced faculty and other students. Through the connection of constructivism and qualitative inquiry, data is collected and interpreted to gain an understanding of the phenomenon, in this study, the persistence of the ADN student (Toma, 2011). The researcher chose not to use phenomenology as a research method given the goal of narrative inquiry, which is the studying of a particular population who have a commonality with the researcher. Phenomenology is more philosophical in nature, whereas narrative inquiry is more about the lived experiences of the participants (Creswell, 2014). Narrative inquiry is a continuous process that allows for education to unfold over time, especially with the interaction between researcher and participant (Huber et al., 2013). This interaction is not unknown to both researcher and participant, as nurses are used to active participation through the problem-based learning utilized within the curriculum (Huber et al., 2013).

Furthermore, narrative inquiry allows for the research problem to be looked at from every direction as a result of the researcher and participants being immersed in the field (Clandinin, 2013; Rossman & Rallis, 2012). The participant's individualized story can be shared with the researcher through narrative inquiry, allowing for a holistic view (Polkinghorne, 2007). Given the holistic nature of a qualitative methodology, it makes sense as a methodology in a holistic profession such as nursing (Toma, 2011). Both a

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qualitative methodology and nursing view the individual as a whole being rather than a sum of its parts. Additionally, the college can use the data collected in the recruitment of future students. By determining the support system of the current students, the college can continue or add to the present support system. The results can also aid the researcher, who is employed in the Nursing department at the college, in the decision-making process for curriculum in the nursing program.

This study examined the persistence of the third-semester, second-year students enrolled in an ADN program. The fall semester of 2017 was chosen to capture data from the students who are entering their third-semester, second-year of nursing school. Semi-structured interviews were conducted to gain information surrounding the students' persistence through a rigorous nursing curriculum. Further, an electronic survey, administered through Qualtrics, utilizing Callista Roy's Coping Adaptation Processing Scale revealed the students' perception of their ability to adapt and cope within the program.

Sample and Setting

Clay Community College is situated on a 100-acre campus in the northeastern U.S. The college is a catalyst for the community; it serves as a gateway to higher education for students who may not have otherwise had an opportunity to attend college. Creswell (2014) states purposefully selecting a site is best done for qualitative research to clearly understand the phenomena of the research questions. This site was useful given its relevance to the research as well as the ability to gain access to applicable participants (Rubin & Rubin, 2012). It was relevant to the study because the college offers a two-year associate degree for nursing. Many of the residents of the county do not have the means

to attend a four-year BSN program; the median household income is approximately $50,000, and the poverty rate is approximately 20%. Further, the majority of the county's residents are white (65.8%), while 20.2% are black and 19% are Hispanic. These county demographics are congruent with the college's demographics, which are discussed later in this chapter. Females are the minority in the county at 48.4%; however, they are the majority on campus. Due to the purposeful sampling, the study gained insight into the associate degree nursing student at a community college in order to show the value of ADN students to the profession (Evans, Coon, & Ume, 2011).

Nursing curriculum overview. The sample chosen for this study were the students currently enrolled in their third semester of an Associate in Applied Science degree. This curriculum consists of four semesters over a two-year period. Basic nursing concepts, or the fundamentals of nursing, are taught during the first two semesters. These concepts include, but are not limited to, safety, infection prevention, pharmacology, and physical assessment. The final two semesters build on the foundation of fundamentals and introduce complex concepts, including, but not limited to, advanced pharmacology, the abnormal physical assessment, and specialty nursing. There are three supplemental courses within the curriculum. The first is held in the first semester; its purpose is to introduce the student to time management skills, effective study skills, and the rigor of nursing curricula. The second supplemental course is held in the third semester; its purpose is to introduce the student to health across the globe. Lastly, the third supplemental course is offered in the fourth and final semester; its purpose is to introduce the student to leadership and management in the profession of nursing. To graduate with

this degree, the student must complete 68 credits, 38 nursing and 30 general education credits.

Demographics. According to the college's institutional profile, there were a total of 3,844 students enrolled in the fall of 2015; 59.8% were enrolled full-time and 40.2% were enrolled part-time. The majority of the students are white (44.6%). Hispanic and black students account for the next two largest classes of students at 28.5% and 23.3%, respectively. Females constitute 61.6% of the student body; this was the only statistic that was not reflective of the county, as females are the minority county-wide. Traditional-aged students were in the majority at the college. Students aged 18 to 24-years account for 65.1% of the total enrollment. Those aged 25 to 34-years account for 20.5% of the enrolled students. The institutional profile does not distinguish county versus out-of-county residents, but it notes 99.9% of the student body are in-state residents.

There are 138 students currently enrolled in the two-year ADN program, 60 in their first year and 74 in their second year. The first-year student demographics match the institutional profile, with the majority of students identifying as white (67%). Black and Hispanic students each make up 13.9% of the first-year student body (Table 3). Females make up the majority of both the first and third semester students in the nursing program. The third semester demographics mirror the overall college demographics as well (Table 4).

Every fall, 60 students are admitted into the first semester of the traditional program. Each spring, the practical nursing (PN) transition students are added into the traditional ADN cohort. The PN transition students do not follow the traditional ADN pathway, as they bypass the first semester of the ADN program given their passing of the

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PN national licensure exam. The number of students admitted through the PN transition route varies from year to year. These students come from the college's PN program, as well as other local PN programs.

Table 3

First-Semester Nursing School Demographics

Demographic	Percent of first-semester students
Male	22.8%
Female	77.2%
White	67%
Black	13.9%
Asian	0%
Hispanic	13.9%
Multi-Racial	5%

Table 4

Third-Semester Nursing School Demographics

Demographic	Percent of third-semester students
Male	18.4%
Female	81.6%
White	68.4%
Black	14.5%
Asian	2.6%
Hispanic	10.5%
Multi-Racial	2.6%

A purposeful sample, or a group of particular participants who have a commonality, were selected to determine the persistence in nursing students who were seeking an associate degree at a local community college (Creswell & Plano Clark,

2011). The sample of third-semester, second-year students served to enhance the case for the ADN continuing as an entry level option to the nursing profession. This sample was chosen as they are the most relevant population to the study (Rubin & Rubin, 2012). At this stage in their education, they have had a minimum of two semesters of nursing school and should have learned to adapt to the rigorous nursing curriculum while maintaining other obligations (e.g. family, work, etc.).

Data Collection

Upon receiving IRB approval, the researcher sent an email to all of the students enrolled in the third semester of the ADN program at the local community college asking for volunteers to participate in the research study. To follow up, the researcher presented this study on a day of class to solicit volunteers. The researcher's involvement in the Educational Leadership Doctoral program at Rowan University was explained in the email and in the face-to-face meeting with the students. The students were assured of confidentiality and the ability to step out of the research process at any time should they choose to participate.

The instrumentation utilized in this study was the semi-structured interview. A qualitative methodology allows the asking of questions surrounding a specific phenomenon in order to gain insight into the participants' world (Clandinin, 2013; Rossman & Rallis, 2012). The researcher in the qualitative study inquired about the causative factors surrounding specific events and became immersed in the environment to truly comprehend the lives of the participants (Rossman & Rallis, 2012; Tuohy, Cooney, Dowling, Murphy, & Sixsmith, 2013). Semi-structured interviews were chosen given the similarity between the researcher and the participants, as the researcher also gained entry

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into the nursing profession with an ADN. Furthermore, narrative inquiry lends itself to this type of interviewing as a method of data collection because of its adaptability and flexibility (Clandinin, 2013; Rubin & Rubin, 2012). For these interviews, the researcher prepared a set of questions in advance; follow-up questions were asked during the interview to clarify thoughts or feelings (Maxwell, 2013; Rubin & Rubin, 2012). It is important to explore the participants' responses in order to identify similar themes (Rubin & Rubin, 2012; Saldana, 2013).

Maxwell (2013) states student interviews should begin with open-ended style questions; however, demographic information was collected prior to the open-ended questions. All interviews were conducted face-to-face, audio recorded, and transcribed verbatim by the researcher. The interview questions were structured to reveal the backgrounds of the participants, any external or internal motivators, the rationale for choosing the ADN program as entry level into practice, and future educational goals.

Prior to the solicitation of participants for the interviews, the third-semester, second-year students (n=74) were emailed an electronic survey consisting of the Coping Adaptation Processing Scale (CAPS) developed by Callista Roy. This tool was designed to "address some of the unresolved issues in understanding and measuring the complex construct of coping" (Roy, Bakan, Li, & Nguyen, 2016, p. 73). The CAPS survey consists of 15 questions with Likert response choices that range from 1 (never) to 4 (always). This survey was translated into the computer software, Qualtrics, for ease of distribution and tabulation of results.

After the CAPS had been sent to the students, a follow-up email was sent asking for participants for the interviews. If the students chose to participate, they were

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instructed to contact the researcher to set up the time and date of the interview, which was done at the student's convenience. The goal was to obtain a minimum of 10 participants for the interview portion of the study. Once the interview was scheduled, the participant was again assured of his or her confidentiality and informed consent was obtained. Permission to record the interview for accuracy was also obtained. The interviews were held in neutral locations on campus, such as a conference room or an empty office in the nursing building. There were 13 interview questions, and the interviews took approximately 25 to 30 minutes to conduct.

There were three open-ended questions for the faculty interviews. To gain access to faculty, the researcher emailed the full-time and part-time faculty at Clay Community College to solicit their participation in the study. These questions led to an open dialogue between colleagues in order to better understand the faculty's perspective of the current nursing student. Prior to the interviews, the faculty participants were assured of their confidentiality. Permission to record the interview for accuracy was obtained. The interviews were held in a neutral location on campus, at the faculty members' convenience.

The recordings were made with a hand-held recording device with the ability for playback. After each interview was complete, the researcher transcribed it verbatim. Once the transcription was verified by replaying the recording, the transcripts were saved to a flash drive, which then was kept in the researcher's locked desk in a locked office.

Data Analysis

The transcripts were evaluated in detail to identify codes and themes throughout all of the interviews. In a qualitative research setting, coding refers to specific words

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and/or phrases that stand out as a pattern to the researcher (Rossman & Rallis, 2012; Saldana, 2013). There are multiple methods for coding; for the first cycle, structural coding was utilized. This method was chosen simply because it is best utilized with investigative reviews (Saldana, 2013). The intent of the semi-structured interview was to gain a perspective of the ADN student along with the reasons the student chose this program as opposed to a BSN program. Structural coding helped organize the data as well as giving the researcher the opportunity to note patterns and or commonalities in the participants' responses on a grander scale (MacQueen, McLellan, Kay, & Milstein, 1998; Saldana, 2013). The process of axial coding was utilized for the second cycle of coding. Axial coding allows for the grouping of similar codes or smaller concepts while placing them into conceptual classifications (MacQueen, McLellan, Kay, & Milstein, 1998; Saldana, 2013). Typically, there are a multitude of codes to be combined under one applicable concept. Boeije (2010) describes the process of axial coding as identifying the codes that appear to be the most important within the study (as cited in Saldana, 2013).

Rigor

Even though the methodology within this study is subjective, or dependent upon the participants' opinions, the answers collected during the interview process need to be addressed in terms of validity (Price et al., 2013). Threats to validity arise when the participants' opinions are misconstrued by the researcher in translation (Polkinghorne, 2007). Validity can be just as subjective as the data itself; if a statement is made with such conviction, people believe it without question (Polkinghorne, 2007). The interviews ended at the point of data saturation, or when the interviews no longer produced new information. The interviews were recorded, proper transcription was ensured, and a code

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book was utilized. Accuracy of the transcription was verified by listening to the recordings and examining the transcripts in detail (Veal, Bull, & Miller, 2012). Lastly, the data disseminated from the interviews will be shared with the local community college via a follow-up report written by the researcher.

Role of the Researcher

The role of the researcher included creating the interview protocols (Appendix A, Appendix C), presenting the appropriate review of literature, securing Institutional Review Board approval to conduct the study, obtaining written consent from the participants, ensuring security of data and confidentiality of participants, providing interpretation of data collected, and using said collected data in the means intended.

Chapter 4

Results

Introduction

The purpose of this study was to examine the persistence of the associate degree nursing (ADN) student enrolled in a two-year program at a community college and the importance of the ADN remaining as entry level to practice. Multiple agencies (e.g. Institute of Medicine, National Council of State Boards of Nursing) are calling for the baccalaureate degree (BSN) to be the entry level to practice; however the American Association of Colleges of Nursing (2012) has reported that 52,922 students graduated with an ADN as opposed to the 27,845 students who graduated with a BSN in 2011. This vast difference in graduates between programs indicates that removing the ADN as an entry level to practice will only serve to increase the pending nursing shortage. Daniel and Smith (2018) report an impending nursing shortage by 2022 due to the increasing need for nurses and the projected retirement of many nurses. Further, they report this shortage will double by 2025. Thus, it is imperative for the ADN to remain as entry level to practice. ADN programs consistently graduate safe, general practitioners that take the same licensure examination that the BSN graduate takes. Persistence to complete the two-year ADN program shows the students' tenacity to overcome what may seem impossible (Constantin et al., 2011).

To determine the persistence of the ADN student, semi-structured interviews and an electronic survey were used. Of the 74 students enrolled in the AND program at the research setting, 51 students completed the survey. The semi-structured interviews of 10 students enrolled in the two-year ADN program were conducted on the college campus in

a neutral location. Lastly, semi-structured interviews of three faculty who teach in the program were conducted. The aforementioned interviews and survey served to answer the following research questions:

1. What is the persistence (defined as the continued engagement to obtain a specific goal despite frustrations, obstacles, and fatigue) of third-semester, second-year associate degree nursing students at a community college in the Northeastern US?

2. What reasons do third-semester, second-year associate degree nursing students give for persisting with a rigorous nursing curriculum?

3. How does the persistence of third-semester, second-year associate degree nursing students affect their academic success, as defined as achieving a minimum score of 78 in previous semesters?

Prior to implementing the study to answer the above research questions, institutional research board (IRB) approval was obtained from all institutions. All those who were interviewed were provided with anonymity in regards to the information they provided. All participants signed informed consent and were assured they could withdraw from the study at any point should they choose. The quotes utilized within this chapter were taken verbatim from the recorded interviews and may include grammatical errors. It should be noted that pseudonyms have been utilized for all individuals and facilities mentioned by the participants to ensure anonymity. The following chapter will be broken down into an overview of the data received from the interviews of both students and faculty as well as the student responses to the electronic survey, Coping Adaptation Processing Scale (CAPS).

Participants

There were a total of 74 students enrolled in the third-semester, second-year cohort at Clay Community College when data was collected. Of those 74 students, 10 self-selected to participate in the semi-structured interviews. Fifty-one of those 74 participated in the electronic CAPS survey that was distributed weekly for six weeks of the third semester. Lastly, of the five full-time faculty and 13 part-time faculty in the program, three faculty participated in the semi-structured interviews. The results of the interviews with the student participants will be discussed prior to the results of the survey. Lastly, the results of the faculty interviews will be discussed.

Data Sources

The 10 third-semester, second-year nursing students who volunteered for to participate in the interviews were solicited via e-mail and face-to-face meetings prior to the start of class. Of the 10 participants, seven were female and three were male (Table 5). The majority, six participants, were in the 25- to 34-years-old category, while three participants were 35- to 44-years-old and one participant was 45- to 54-years-old. All participants were white. These demographic statistics mirror the overall demographics of the nursing program at Clay Community College. Through the initial questioning process, seven of the participants reported working part-time and three reported working full-time; eight of the participants were working in the healthcare field. Further, there were three who reported not having a previous degree, two reported a baccalaureate degree, two reported an associate's degree, and three reported a previous certificate. There was no demographical information collected from the students who participated in the electronic survey.

Table 5

Demographics of Students Interviewed

Gender		Age	
Male	3	25-34 years	6
Female	7	35-44 years	3
		45-54 years	1

The three nursing faculty who volunteered for participation were all female and white. Two were part-time employees, and one was a full-time employee. Clay Community College's nursing program has five full-time employees; one male and four females. Only one of the full-time employees is black; the remaining are white. There are 13 part-time employees with a female majority; only two males are part-time. Of the part-time employees, nine are white, one is Hispanic, one is black, and two are Asian. Once again, these demographics mirror those of the college. The 10 students who volunteered were interviewed on the community college campus at their convenience. The interviews were recorded to ensure accuracy of the data. The interviews were transcribed verbatim.

Interview Emergent Themes

Themes were identified through the use of structural coding as a method of organizing data; axial coding was utilized to then group the similar codes (MacQueen et al., 1998; Saldana, 2013). The structural coding revealed themes such as goals, admission criteria, experience with healthcare, learning environment, practicality, program stressors, self-perception, emotional intelligence/caring, barriers, and miscellaneous (Table 6). The questions within the Coping Adaptation Processing Scale were also coded for the themes of problem solving, self-concern, and self-efficacy. Of the total 25 survey questions, six

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were coded as problem solving, 18 were coded as self-concern, and the last question was coded as self-efficacy.

Subthemes were identified as well. For example, under the theme practicality, subthemes of timeframe of degree, job stability, and finances were noted. Themes generally link expressions put forth by the participants and can be specific or broad in nature (Ryan & Bernard, 2003). Throughout the next paragraphs, details surrounding the themes and subthemes will be discussed.

Table 6

Frequency of Themes – Student Interviews

Theme/Sub-Theme	Frequency
Learning Environment	37
Support	19
Classroom Environment	14
Program Success	4
Goals	36
Admission Criteria	34
Student Preparation	9
Admission Process	16
Delayed Education	9
Program Stressors	32
Abandon Program	14
Stress of Program	18
Miscellaneous	22
Barriers	21
Emotional Intelligence/Caring	20
Experience with Healthcare	18
Practicality	18
Timeframe of Degree	9
Job Stability	6
Finances	5
Self-Perception	17
Purpose or Wanting to Help	12
Caring	8

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Goals. Multiple questions asked of the participants yielded responses that were coded as goals. Specifically, questions such as "What influenced your decision to enter the healthcare field?", "What guided your decision-making process to attend an associate degree program?", and "What has driven you to continue your path to becoming a nurse?" yielded responses in this category. The questions resulted in the participant discussing various goals, whether it was to be a nurse from high school or to continue on after obtaining their initial licensure as a registered nurse. The theme of goals was coded a total of 36 times within the transcripts. Some of the participant responses were:

- I got accepted to the Clay County Vo-Tech LPN program, and then, um, my goal was to immediately transfer here.

- Eventually, I would like to be a nurse practitioner. That is my goal.

- That's always something that I wanted to do, like, eventually I want to be a nurse practitioner, so it's kinda like steps along the way.

The idea that these students are goal driven is important to consider given the rigorous two-year degree that they are seeking. Having a goal to work toward can motivate the student to succeed in higher education.

Admission criteria. To accomplish the goals the student has set, he or she must meet specific admission criteria to enter a nursing program. This admission criteria varies depending upon institution; no two programs have the same set of criteria. The Boards of Nursing in each state do not have a mandated set of admission criteria, nor do the accrediting bodies of nursing programs. Each school bases its admission criteria on the mission and philosophy of the college and the most current literature. Within the

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overarching theme of admission criteria, there were three sub-themes identified: student preparation, admission process, and delayed education. Student preparation was coded 9 times, admission process was coded 16 times, and delayed education was coded 9 times. The comments that were coded with these themes were in response to the interviewer's request to "tell me about the admission process for the associate degree nursing program" and to "discuss the barriers you believe you would face in applying for a baccalaureate nursing program." These direct questions yielded the following responses that were coded as student preparation:

- I had taken a lot of pre-reqs though, even things that weren't necessary. I took, like, Pathology, like, that's not required. Um, I did really good in micro. I got an A and I know a lot of people struggle with that class. Maybe that had something to do with it.

- I even took medical terminology even though I've been in the medical field since '97.

- Well, I had to…I stopped working. I sold my business. I had to get through my pre-reqs because I didn't get through them.

These responses are evidence of student preparation prior to entering the program. Further, it is evidence that the students who applied to the program knew what challenges lay ahead.

Delayed education was another sub-theme that came from these two questions. This sub-theme supports the student preparation sub-theme in that the students may have been aware they could not do both the nursing program and whatever situation they found themselves in at that moment, or the idea of delayed education was a turn off and

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therefore the student applied to another program. The following responses relate to this sub-theme:

- …the goal was to go to nursing school, but then life happened.

- It was a challenge, but then life happens, so I'm on track now, it's just taken a little bit longer.

- And, um, so you know, five years went by and my husband was like you're not satisfied. I know you're not satisfied. You have always talked about being a nurse practitioner and if you want to do that, you just need to start.

- Then he got out of the Marine Corps and we…he stayed down there and I moved back here and that's when I decided to go back to school.

This sub-theme of delayed education speaks to the participants' goal-driven mindset from the previous theme of goals. Even though their goal may have been delayed as a result of life experiences, the participants show the persistence to continue with their education.

The admission process sub-theme relates to both student preparation and delayed education. The participants were aware of the preparation they needed to do in order to apply for the program. Additionally, there may have been a time when they were aware of their limitations and therefore delayed their application. The following responses were coded as admission process:

- Um, you're grade point average has to be at a certain point, and, umm, then there's all kinds of documents, and…

- I actually applied three times at another community college for their RN program. At the time, they didn't have an LPN program. I did not get in because they told

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me that my, umm, TEAS exam, um, even though I passed it, was not high enough. Even though I got As on all my pre-requisites for nursing.

- So, I applied at a bunch of tech schools and colleges to see which one would accept me. And, uh, I actually had a little over two years left so I did some pre-requisites at Gulf and I applied to Gulf's program but they had a waitlist. And, then from what I read, I could get into this program in September.

- I made sure I allowed myself time to take the TEAS twice just in case I didn't score high enough the first time. I think the first time I got a 68, although they told me I could apply with that, uh, I took it a second time. And, I think I got a 76 that time.

The participants' comments above demonstrate how students prepared for admission to the nursing program. These students did not apply to the nursing program as a last-minute decision, but rather thought the process through thoroughly in order to increase their chances of success. Further, the idea of delayed education was not necessarily a positive for every participant, as evidenced by the comments above. In particular, one respondent relayed how they thought they were prepared with the test scores, but found they were not. The three sub-themes of student preparation, admission process, and delayed education support the overarching theme of admission criteria in that the students relied on these three concepts to meet the admission criteria set forth by the nursing program at the College.

Experience with healthcare. The theme of experience with healthcare emerged through questions asking the participants to "explain the process you have gone through to enter the healthcare field" and "what influenced your decision to enter the healthcare

field?" These direct questions were created to gain an understanding of the method by which the student entered the healthcare workforce and/or the thought process behind wanting to enter the healthcare field. The following reflections from the participants came under this theme:

- Not directly. It was more indirectly, I mean, the car accident was what influenced me to go back to school and some peers encouraged me to go into nursing.
- Actually, my mother got sick and it kinda changed my idea about…I was probably going through a midlife crisis about what I wanted to do with the rest of my life. I felt I wanted to take care of people.
- Well, I started in Apple City in housekeeping to get to be a nurse's aide on the floor, so I could get my experience while I went to school for my LPN.
- Well, I went through the LPN program here and was able to get a job at the local hospital as a tech.

As evidenced by the comments above, some participants were hospitalized or had family members that were hospitalized, which influenced their decision to enter the healthcare field. Some participants discussed getting jobs in the hospital environment in order to increase their knowledge base while they worked toward their goal of becoming a nurse. Overall, the theme of experience with healthcare was coded 18 times.

Learning environment. Two of the interview questions led the students to discuss the learning environment in which they found themselves. Question 10 was a direct question, "Tell me about a faculty member or classmate who has helped you with a problem." Question 11 was designed as an indirect method of understanding how the participants learned within the classroom setting to gain their perspective of the learning

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environment. It asked, "What does the active learning environment look like in your classroom?" From the responses the participants gave, the overall theme of learning environment was coded a total of 37 times. This overarching theme can be broken down into the following subthemes: classroom environment, support, and program success.

There were a total of 14 responses coded as classroom environment. This subtheme was derived from the following comments:

- We're pretty much engaged. The instructors are good at that. Asking us questions and a lot of group activities where you have to work together and do these little posters or, you know, so that part is good.

- But, other than that, you know, it's very interactive. It's not just, you know, I'm going to read you these PowerPoint slides. You know, you're going to fall asleep half way through. It's a lot of questions and a lot of people answering and a lot of people with opinions, you know. Just a lot of interactivity with the instructor and not just reading the slides, which is, you know, a lot of what I encountered in LPN school was reading off the slides, you know. I don't think I got a lot, got a lot out of that.

- A lot of the classes are just reading PowerPoints, they aren't really back and forth questions. They have case study type things and Mary and I just, like, talk about it.

- For the last couple of semesters, it's kinda been, like, besides, Dr. Green, it's just been lecturing off of PowerPoints, which doesn't help me. Like, with him, he does like the case studies and stuff like that and it really helps me because, once again, I'm sitting there talking back and forth because it clicks better for me.

- Active learning environment, um, we have a great bunch, um, of students now in my class, and, uh, I think because we participate and we listen, that, that is a very good environment. Yes, this is a good group. Nobody is distracting or anything.

The same two questions brought about the theme of support. Both questions were designed to have the participants explain their experiences. In particular, Question 10 elicited the following responses:

- Oh gosh. Um, the group that I kinda spent a lot of time with in the classroom, I mean, they're just great, you know. Lisa, Dorothy, Mike, Chrissie, they're just an awesome bunch. We are always there for each other. Um, you know, we met last semester and a lot us were taking A&P II together as well so we were, like, all right, when are we going to study for this? When are we doing this? You know, when are we doing that? And we always kinda, like, you know, stuck together and helped each other out.

- Umm, and honestly, like, all of the instructors that I've met have been really great. I mean, Mrs. Baker, was awesome. She got me through the transition program. Ms. Jones got me through it. Linda, my clinical instructor for the first semester. Linda was awesome, uh, Mr. Tom is, uh, amazing. He's the coolest guy ever. You know, I'm very used to the way he is because he is very much like my husband…a paramedic-type person.

- But, yeah, like everybody has been super great. Like, I really, I don't think I came across anyone, you know, that I haven't been like, wow, this place is great. It's really cool.

The theme of support was coded 19 times throughout the interviews with the participants. Support systems included participants' fellow classmates, their family, and their instructors within the nursing program. The support system of the student relates to the theoretical framework within this study, Roy's Adaptation Model (RAM). This framework focuses on the individual's ability to adapt in any given environment. Adaptation to the rigorous nursing curriculum is instrumental in student success. Research Question 3 asks, "How does the persistence of the third-semester, second-year associate degree nursing student affect his or her academic success, as defined by achieving a minimum score of 78 in previous semesters?" The minimum score of 78 is included in the question as a result of Clay Community College's policy of attaining a score of 78 in order to progress to the next semester. While the students did not relate specific scores, one can conclude that the participants have a supportive faculty, cohort, and family in order to assist them with their success as evidenced by making it to the third semester of the program. These individuals are important mechanisms within the RAM framework of interdependence (Roy, 2009).

The above subthemes of classroom environment and support were reinforced by the last subtheme of program success. In response to Questions 10 and 11, participants commented on their particular mechanisms to achieve program success, as defined at the College as achieving a score of 78 or higher as a semester grade. Program success was coded a total of 4 times. Participants responded with the following comments:

- You know, this is going to be so much work. You have to be organized and I'm super organized. I think that helps a lot.

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- I need to see my test. I need to see what I got wrong so I don't repeat, um, those mistakes. So, she definitely helped me out by doing that because if you don't know what you got wrong, how can you keep going? You know, without knowing those errors? I learn from my mistakes. How can you improve?

The learning environment in the nursing curricula is varied given the hands-on practice that must occur in the clinical setting. The classroom experience is not a traditional lecture, as evidenced by the participant responses, but a variety of interactive instructional methods such as case studies, jeopardy games, etc. These methods are utilized to have the student analyze and synthesize the information on a deeper level, rather than simply requiring rote memorization. Further, the nursing curriculum includes hands-on lab where students are practicing not only technical skills, but also communication techniques with interactive simulation mannequins or their fellow students. These two mechanisms, the interactive classroom and hands-on lab, are important to educate the students prior to their clinical rotation within a medical facility where they will interact with an actual patient.

Practicality. Through Interview Questions 4 and 6, the theme of practicality emerged. Question 4 asked, "What influenced your decision to enter the healthcare field?" The open-ended format of the question yielded the following comments:

- Um, because I knew I would have a job because healthcare is so [broad]. And, um, I wanted to get out of the field I was in as a court reporter.

- Um, I figured that there would always be jobs in healthcare.

- I wanted something that was gonna provide job security and that I can get a degree pretty quickly and that was going to make a decent income right out of school. And that's what really pushed me there.

As Beggs et al. (2011) noted, non-traditional students work diligently to find a balance between school, work, and personal commitments. This concept of managing multiple responsibilities at one time was also evidenced by the CAPS survey results. For example, 54% of the participants responded it is exactly true when asked if it is easy to stick to their aims and accomplish their goals. It should be noted that none of the interviewed students are traditionally aged college students (under 25 years of age). Therefore, the sub-themes of job stability, time frame of degree, and finances demonstrate that the ADN student is looking to enter the workforce in a timely fashion while maintaining their employment to provide for themselves and their families. The sub-theme of job stability was coded 6 times, time frame of degree was coded 9 times, and finances was coded 5 times. The main theme of practicality was coded a total of 18 times.

Question 6 asked, "What guided your decision-making process to attend an associate degree program?" Some of the participants' comments were:

- So, I figured if I do the two-year, sit for my boards and hopefully pass and then you can start working immediately.

- Uh, again, it was something that I knew I could accomplish in a short amount of time.

- Versus doing all the book work up front, it's like four years, you know, like some people have to go part-time for their pre-reqs and they can't take

this huge chunk of time. You know, my job is not flexible, that's my situation.

Throughout the participants' responses to question 6, the sub-themes of job stability and time frame of degree were also identified. These sub-themes support the overarching theme of practicality, which is essential for this college. The college is situated in a county that has a 20% poverty rate, which is the highest in the state. The individuals in this county depend on this program to remove themselves from the low socio-economic status of their environment.

These two interview questions serve to answer Research Question 2, "What reasons do the third-semester, second-year associate degree nursing student give for persisting with a rigorous nursing curriculum?" The students persist through the curriculum in order to achieve a long-standing profession under practical terms. The idea of entering the nursing profession for these reasons will be discussed later in this chapter. All of the students interviewed are non-traditional, therefore they cannot afford to take time to devote to a full-time college degree at a four-year university. The students are able to meet their familial obligations while working toward their goal of becoming a nurse. As noted in the answers to Question 6, the students reported the two-year program as a benefit to them in their life at this point in time. The ADN offers a sound curriculum that allows the student to enter the workforce and affords them the opportunity to continue their education while working. It also allows for their employers to assist with paying for their advanced degree through tuition reimbursement programs.

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Program stressors. The theme of program stressors arose throughout the interviews and in response to all questions asked of the participants. Program stressors was coded a total of 32 times. The sub-themes of abandon program and stress of program were also coded. Below are the responses that led to these themes:

- I don't think that, think that I ever wanted to walk way.

- I could never just walk away. I mean, they would have to say Kelly, you're done, you know come back next year.

- There have been times, when you know, I would say it's, like, it was stressful, but I think that if you do it for the right reasons.

- You know, I've had some bad days, but never to the point of questioning my decision or thought, "what am I doing here?"

- So, you know, it's like I know people who have been through the program and I think (sighs), when you know what to expect, at least you have a good idea, you get yourself in this mindset. You know, this is going to be so much work.

Abandoning the program was coded a total of 14 times in comments from students discussing whether they had ever thought about stopping the program. Stress of the program was coded a total of 18 times. The comments above demonstrate that the students experienced stress while in the program, causing them to think they may want to leave the program, but only a few participants in the sample actually left the program due to the stress or lack of success in the program.

Barriers. The last question asked the participants to "discuss the barriers you believe you would face in applying for a baccalaureate nursing program." The emergent theme of barriers was coded a total of 21 times. The relevant responses were:

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- What the workload would be like because it's, with this, you do your pre-requisites and then your RN, but with that you're doing it all at once, so would I be able to work at that pace?

- I don't think I would have had any, but I have so many student loans now that I didn't want to do that.

- I don't think I would have had any other than paying for it.

- I probably woulda never got in. Financially I wouldn't be able to afford it, from the jump, financially I wouldn't be able to do it.

- Time requirements or day requirement and if it would clash with work or not.

- The amount of school work required for those programs, I would have been swamped.

- I don't think that I'd get in. I wouldn't have gotten in a lot of programs because of my low-test scores.

- Probably the structure of the program. And the time requirements to be on campus, and you can't really do that part-time.

The above-mentioned barriers would have precluded these students from attaining their goal of becoming a nurse, fueling the cycle of poverty within the county. Triangulating this theme, the theme of practicality and its supporting sub-themes of time frame of degree, job stability, and finances were discussed by the participants. Within the theme of practicality, the students reported needing to obtain their degree to enter the workforce and achieve a stable career. Students enrolled in the ADN program have other responsibilities; therefore, they need this two-year entry level degree to succeed in their life.

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Self-perception. The theme of self-perception arose within the responses to multiple questions asked of the participants. It was coded a total of 17 times. The participants were willing to discuss their experiences, and the language they used to discuss themselves often demonstrated their low self-perception. Related comments are below:

- Um, I don't think that I'd get in. I wouldn't have gotten in a lot of programs, honestly, I think you guys really took a shot on me because when I sat and added up the points with the rubric, I was like, oh God, I'm not getting in.

- I said I'm not gonna shoot for the stars here, I got in.

- I know that's something that I wanna do, but I can't even fathom that thought. To me, to me it seems like I'm being very presumptuous of myself. It's almost like I don't wanna jinx myself. I'm glad I was, like, I'm glad I did it like this. Like, the LPN set me up for the RN. I don't know if I could've done it if I went straight for my RN.

- Oh, I probably woulda never got in.

As evidenced by the above comments, the students appear to have a low self-perception about their ability or capability to succeed in higher education. It is interesting that the sub-theme of low self-perception came through in the interviews, given that the results of the CAPS survey gives evidence of their persistence through a difficult time. For example, when the CAPS asked about always managing to solve difficult problems if they try hard enough, 54% said it was moderately true and 46% said it was exactly true. The student responses that supported the theme of decreased self-perception pertained to applying to and getting accepted by a BSN program, not the ADN program.

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Emotional intelligence/caring. The theme of emotional intelligence and caring emerged from responses to Questions 4 and 8. Question 4 asked, "What influenced your decision to enter the healthcare field?" This question yielded the following answers:

- Actually, my mother got sick and it kinda changed my idea about…I was probably going through a midlife crisis about what I wanted to do with the rest of my life. I felt I wanted to take care of people.

- I started out with looking for a career that would be consistent, but as I started in the field, I realized how exciting it is.

- I knew I liked to help people. I knew I wanted to help people.

Question number 8 asked of the participants, "What has driven you to continue your path to becoming a nurse?" Some of the responses were:

- And me being in the hospital with her and experiencing things and I wanted to know more. So, it more became a curiosity in that I watched those nurses and it made me say, wow, that is a purposeful field to get in.

- Okay, um, my kids and finances, and just, I mean, nursing is what I know. Like, I'm just good at it. So, it just makes sense because it's where I wanna be.

- I feel like this is where I should've been my entire life. I, like, I just feel, it sounds corny, but I feel this is what I was meant to be doing.

Emotional intelligence and caring were coded a total of 20 times throughout the interviews. This theme encompassed two sub-themes: purpose or wanting to help was coded 12 times and caring was coded 8 times. Goleman (1995) has defined emotional intelligence as the ability to be self-aware of emotions while maintaining the ability to perform a skillset. Caring for others in their time of need can be stressful for the nurse;

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therefore, it is important for the nursing student to practice self-care. Once again, these two questions specifically answer Research Question 2, "What reasons do the third-semester, second-year associate degree nursing student give for persisting with a rigorous nursing curriculum?" The students reported the desire to care for others or innate passion for the profession as reasons for entering the healthcare field and then as motivation to continue in the field. While having the desire to care for others is important in nursing, the concept of self-care is equally important. The nurse needs to be cognizant of his or her own emotions and feelings when dealing with the stressful nature of caring for others.

In this sense, emotional intelligence and caring complements the theme of practicality in that the nursing student is aware of the socio-economic situation in which they live and recognizes it is therefore practical to complete a two-year ADN program to achieve his or her goal of becoming a nurse. This goal attainment translates into self-care as the individual has better means to take care of oneself. However, it is important to consider that caring is a major tenet of nursing as discussed within Chapter 2. It is alarming that the theme of caring was coded only 8 times compared to that of practicality, which was coded 18 times. This leads one to question what type of nurses ADN programs are producing.

Miscellaneous. While some of the participants gave minimal information despite open-ended questions, there were participants that offered more information than what was being sought after. These comments were coded as miscellaneous and totaled 22. The majority of these miscellaneous responses had to deal with outside obligations such as family and health issues the students were having. Some of the comments provided were:

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- Um, okay, well it was kind of an odd process. I had a job for, oh I guess about three and a half years doing procurement for an outsource company and, um, I did love this job, but the department we were working in, um, the department…we were working for Generic foods. Um, they decided to bid out to an outside procurement source, so, um, they were going to lay people off and we were in a meeting and they were talking about it and they said, you know, is there anyone who wants to take voluntary lay off. And there was a couple of us that raised our hands, you know. I said, I don't want to do this anymore, you know, this is not for me. So, I raised my hand.

- But, um, I could do that as an aide, as an L, and still be, um, but as of next Monday, I'll be officially divorced and I'll be a single mom.

- Um, mostly family dynamics. I'm the oldest of 6, so it kinda comes with the territory.

From the above comments, one can deduce that the participants are responsible for outside obligations in addition to attempting to navigate through the rigorous nursing curriculum. These participants are full of strife that may lead to being unsuccessful in the program if they are unable to find the balance between outside obligations and nursing school.

Coping Adaptation Processing Scale (CAPS) Survey Instrument

Callista Roy developed the Roy Adaptation Model (RAM) as a result of her observation that people are an adaptive system with internal mechanisms to help with the change process (Barone, Roy, & Frederickson, 2008). These internal mechanisms are present to maintain homeostasis or a sense of normalcy through the use of biologic,

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cognitive, and emotional processes (Roy, 2009). This tool was utilized for this study because, according to the RAM, nursing is the science and practice that challenges the individual to rely on both internal and external mechanisms to adapt to the environment (Barone, Roy, & Frederickson, 2008). The survey consisted of 25 questions. The first 15 questions were on a four-point Likert scale, with 1 being never and 4 being always. The last 10 questions were also on a four-point Likert scale, with 1 being not true at all and 4 being exactly true. As stated previously, each item was coded as either problem solving (Table 7) or self-concern (Table 8). Problem solving was coded for a total of 18 items and self-concern was coded for a total of 6 items. There was one outlying item that was coded as self-efficacy. Even though the survey response rate of 69% was a limitation, the results show the nursing students do have the persistence to progress through the rigorous two-year ADN program. The CAPS survey serves to answer Research Question 1, "What is the persistence of the third-semester, second-year associate degree nursing student at a community college in the Northeastern US?"

Problem solving. Problem solving is related to problem-based learning, which can be defined as a method of learning that encourages the learner to think critically about the information presented while considering the many facets that can affect or influence the situation (Martyn, Terwijn, Kek, & Huijser, 2014). Barrows (1983) believes that a classroom relying on traditional lecture does not allow for students to retain the information presented. Nursing students must retain the information presented within the classroom in order to be successful in the profession.

The first question in the survey asked the participants whether they can follow a lot of directions at once, even in crisis. To this, 60% responded sometimes. Furthermore,

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65% of students report they always have the ability to see the problem at hand for what it is, as opposed to trying to avoid the problem. The idea of being able to follow a multitude of directions at once while facing a problem straight on speaks to the persistence within this group of students. For example, the students enrolled in a two-year ADN program are in lecture one day a week, a lab setting one day a week, and a clinical setting one day a week, while also studying each day and attending to outside obligations. As mentioned previously, all 10 interview participants reported working while in school. Of these participants, seven are working part-time and three are working full-time. Further, five interview participants discussed their children, which was coded as miscellaneous thoughts. These responses by the participants also give insight to their problem solving ability as they manage their multiple obligations. In fact, when asked if they are more effective under stress, 57% of survey respondents answered sometimes. This particular item was the only item coded as self-efficacy, but it also relates to problem solving. Self-efficacy, or the outcome desired as influenced by the individual's internal or external motivators, plays a role in the student's problem solving (Bandura & Locke, 2003). With self-efficacy being present and positive in nature, the student can succeed within the two-year ADN program. The program obligations and outside obligations serve as motivation for the participants to persist through the curriculum.

The survey results also show that the students have the ability to seek outside resources in order to positively cope with a stressor. This strengthens the sub-theme of support that was coded 19 times. As mentioned previously, the interview participants reported seeking out fellow students, faculty, and family in times of need. These supports can be seen as a positive in the student's life. Additionally, 59% of the survey

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respondents indicated they always try to get more resources to deal with a situation, and 43% indicated they sometimes take strength from spirituality or the success of a courageous person. In addition, 51% responded they sometimes use humor in a time of crisis. Lastly, when asked about being creative and brainstorming for new ideas, the students responded in a positive light as well. For example, when asked about being creative and coming up with new solutions, 49% responded always and 49% responded sometimes. Fifty-five percent indicated they sometimes brainstorm as many possible solutions as they can, regardless of how outlandish they may seem. These results give evidence to the supporting framework of this study in that the students are able to adapt to a stressful situation through using positive coping mechanisms. The participants are able to reach out to their support system in order to handle the stressor as it occurs.

Table 7

Problem Solving Questions from CAPS

Part 1	Never	Rarely	Sometimes	Always
1. Can follow a lot of directions all at once, even in crisis		2%	60%	38%
2. Call the problem what it is and try to see the whole picture			35%	65%
3. Gather as much information as possible to increase my options		2%	25%	73%
6. Try to get more resources to deal with the situation		4%	37%	59%
7. Use humor in handling the situation	2%	18%	51%	29%
9. Take strength from spirituality or the successes of courageous people	2%	27%	43%	27%
10. Can benefit from my past experiences for what is happening now			27%	73%
11. Try to be creative and come up with new solutions		2%	49%	49%
12. Brainstorm as many possible solutions as I can even if they seem far out		6%	55%	39%

Table 7 (continued)

Part 1	Never	Rarely	Sometimes	Always
14. Too often give up easily	59%	29%	6%	6%
15. Develop a plan with a series of actions to deal with the event	2%	4%	55%	39%
Part 2	Not true at all	Hardly true	Moderately true	Exactly true
1. I can always manage to solve difficult problems if I try hard enough			54%	46%
4. I am confident that I could deal efficiently with unexpected events.		4%	48%	48%
5. Thanks to my resourcefulness, I know how to handle the unforeseen situations		6%	60%	34%
6. I can solve most problems if I invest the necessary effort			36%	64%
7. I can remain calm when facing difficulties because I can rely on my coping abilities	2%	4%	42%	52%
8. When I am confronted with a problem, I can usually find several solutions			58%	42%
9. If I am in trouble, I can usually think of a solution			48%	52%

Note. N=51.

Table 8

Self-Concern Questions from CAPS

Part 1	Never	Rarely	Sometimes	Always
4. Generally try to make everything work in my favor		12%	57%	31%
5. Can think of nothing else, except what's bothering me	14%	49%	31%	6%
13. Find I become ill	41%	41%	18%	
Part 2	Not true at all	Hardly true	Moderately true	Exactly true
2. If someone opposes me, I can find the means and ways to get what I want		28%	60%	12%
3. It is easy for me to stick to my aims and accomplish my goals		4%	41%	54%
10. I can usually handle whatever comes my way		2%	38%	60%

Note. N=51.

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In regards to problem solving, it can be noted that students report not having the ability to solve a problem when one presents. As noted in Table 9, approximately half of the respondents responded moderately true to the statements, as opposed to exactly true. While most students feel it is moderately true that they can solve difficult problems if they try hard enough, this result raises the question of whether they are trying their best throughout the nursing program. In addition, the majority of the respondents said it is only moderately true that they have resourcefulness to handle unforeseen situations, further supporting the idea of the students not reaching their full potential

Table 9

Problem Solving

	Not true at all	Hardly true	Moderately true	Exactly true
1. I can always manage to solve difficult problems if I try hard enough			54%	46%
3. It is easy for me to stick to my aims and accomplish my goals		4%	41%	54%
4. I am confident that I could deal efficiently with unexpected events		4%	48%	48%
5. Thanks to my resourcefulness, I know how to handle the unforeseen situations		6%	60%	34%
6. I can solve most problems if I invest the necessary effort			36%	64%
8. When I am confronted with a problem, I can usually find several solutions			58%	42%

Note. N=51.

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Lastly, the majority of the students reported it was only moderately true that they could find several solutions when confronted with a problem. It is interesting to note that there were some positives found in the theme of problem solving. For example, the majority did say it was exactly true that they could stick to their aims and accomplish their goals. It should be noted, however, that there were some students who said it was hardly true that they could stick to their aims to accomplish their goals. Further, the majority of the respondents said it was exactly true that if they invested the necessary effort, they could solve most problems. When asked about their confidence, the results were approximately half moderately true and half exactly true. These mixed results show that some students are utilizing problem solving skills such as resourcefulness and persistence in times of stress.

One of the questions coded as problem solving was asked in a negative connotation in order to ensure the respondents were reading the questions as they went through the survey. The question asked if the participant found themselves giving up too easily, too often. The responses to this question were consistent with the other 18 items. Fifty-nine percent of the respondents said never, which also demonstrates the persistence of the respondents. It should be noted that there were some students who responded that they did find themselves giving up easily. In fact, 6% responded always and 6% responded sometimes when asked if they gave up too easily, too often. That 12% of the respondents give up if a task is too difficult again leads one to question whether the students are reaching their full potential throughout the program. While the percentage is low, one could wonder if the students who find themselves giving up too easily are not giving their all to the various projects and assignments throughout the program.

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Throughout the interviews, the participants responded in a positive manner when asked about stressful situations or problem solving ability. For example, when prompted to discuss a time when they wanted to walk away from the program, five of the participants laughed before answering. This demonstrates the use of humor in times of stress. These participants' responses to the interview questions focused on practical reasons for becoming a nurse, and little discussion was had about the caring aspect of nursing or their ability to critically think or problem solve.

Self-concern. There were a total of six items coded as self-concern in the CAPS. Throughout the interviews, participants demonstrated minimal self-concern, in that the participants discussed more of their familial obligations. There was some discussion about their own health concerns; however, the children of the participants were more of a focus throughout the conversations. In the survey, however, when asked if they can handle whatever comes there way, 60% of the participants responded always. Fifty-seven percent of the participants responded sometimes when asked if they generally try to make everything work in their favor. Additionally, 60% said it was moderately true that if someone opposes them, they could find the means to get what they want. These responses are evidence of the participants' resiliency. Resiliency is the ability to produce strength from a negative event (Henderson & Milstein, 2003). Further, 54% of these respondents said they always found it easy to stick to their aims and accomplish their goals. This resiliency and ability to stick to their aims lends itself to persistence. While the responses to the interviews did not relate self-concern, the survey results show the students were concerned about their own wellbeing.

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There were two questions coded as self-concern that were written in a negative connotation as a means of ensuring the participants were reading the questionnaire. The first focused on the student becoming too ill when experiencing a crisis. Both categories of never and rarely had a response rate of 41%. Interestingly, 18% reported sometimes getting ill. The second question focused on thinking of nothing else except what is bothering them; to this question, 49% responded rarely. Once again, these responses were consistent with the other questions in the survey leading to the conclusion that the participants did read each question within the survey.

Faculty Interviews

Three of the nursing faculty at the community college were interviewed to gain their perspective of the nursing student enrolled in a two-year ADN nursing program. The first question asked about the environment in the classroom, specifically the active learning environment. This question was designed to mirror the question that was asked of the students, which yielded the theme of support. The students responded positively when asked about the active learning environment of the classroom. However, the faculty perception is the opposite. For example, AB discussed students rolling their eyes when they were assigned student-led presentations in the classroom. Her perception of the students' reaction is that they hate getting up and speaking in front of their classmates. She went on to say that the students appear to be "too busy on their computers" to participate in the active classroom. She reports, "the case studies seem to be best, though, because it challenges them to think." Her feelings were that if they could work together in groups from their seats, that they would actively participate; therefore she encourages case studies among small groups in the classroom. CD started her response with, "the

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students do not like it" when asked about the active learning environment in her classroom. She went on to describe the moaning and groaning of the students in the classroom when she presents a game or an activity. However, she described an experience of using case studies as group work and not having time to review all of the cases provided due to the productive discussion in the classroom. EF also reported the negative comments in the classroom when attempting to use Jeopardy-type games or matching games as learning activities. EF did have a positive experience to report, stating that she presents patients that she has taken care of in the hospital. She reports that the students take those case studies more seriously than the games.

The second question asked of the faculty continued the idea of the active learning environment in the classroom but focused more on the student reactions by asking the faculty to describe how the students react to active learning. While some of the student reactions were reported in the responses to the first question, the faculty elaborated in their responses to the second question. For example, AB stated, "Oh my God, they hate it!" She went on to say, "I feel like they just want me to straight up lecture and provide them with what they need to know for the test." Once again, this is contradictory to what the students reported in their interviews. When asked if there were any positive comments to the active learning environment, AB did state that there were some students who were able to understand a difficult concept after working through a case study in the classroom. CD's responses were similar to that of AB's responses. In fact, she stated, "they want to sit in the desk and get spoon fed the information." She went on to discuss that the students do not understand the benefits of an active classroom. While EF's responses to the question were also negative in nature, she felt some responsibility for it.

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She stated, "I find it hard to get the students motivated. There are some that are really involved and ask questions and participate. Then, there are others that I can tell just don't want to be there." She goes on to discuss her frustrations with trying to get the classroom engaged with the topic at hand.

The third and final question focused on the ADN remaining the entry level to practice. AB and CD would like to see the ADN remain as the entry level degree to nursing practice; EF would not. EF reports, "As a profession, we are setting ourselves back by not requiring the BSN as entry level." She went on to explain that all other professions require a bachelor's degree to enter their field, and that nursing should follow suit. She noted that physical therapy is now requiring a doctorate degree as entry level to practice in order to carry their profession forward. AB feels that the students "can barely handle this program, let alone a four-year program. We have some students right out of high school that really struggle with adult learning." Her concern for the students in this area was mirrored by CD, who stated:

> I'm concerned that the people here in this area aren't going to be able to get to a
> BSN school. Our students tend to be the first ones in their families to go to
> college or they're older and changing careers.

She went on to discuss how the students in the area are not able to put their lives on hold while they pursue a BSN at a four-year university. To make her point, she reflected on her own entry into the nursing profession: "If it wasn't for this program, I would have never have become a nurse. I went back to college in my late 20s, and there's no way I could have afforded any other program."

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Structural coding was utilized to find the emergent themes of the faculty interviews just as it was used in the student interviews. There were three prominent themes identified: negativity, student engagement, and frustration (Table 10). Negativity was coded nine times, student engagement eight times, and frustration three times. It was unfortunate to find the themes of negativity and frustration throughout the interviews with the faculty, as these feelings can translate into the interaction between faculty and students. This potential for negative interactions could affect the persistence of the student enrolled in the two-year ADN program. However, as evidenced by the student interviews and the CAPS survey results, it appears to not have affected them.

Table 10

Frequency of Themes – Faculty Interviews

Theme	Frequency
Negativity	9
Student Engagement	8
Frustration	3

The theme of student engagement was counted eight times throughout the interviews. The comments pertaining to this theme focused on the active learning strategies utilized in the classroom by the faculty as a method of engaging the nursing student. Some active learning strategies discussed were case studies, NCLEX style questions, and Jeopardy games. The faculty relayed some frustration with the lack of student participation through comments such as, "I don't get a good response" or "I don't

think the students take those seriously." Not all comments about the active learning environment were negative, though, as one faculty member stated, "One or two will say that they were able to get a difficult concept through a case study or an activity I present." There were a couple of comments regarding the assumed passive learning environment that the students have been exposed to prior to nursing school. These comments were:

- Students really need to learn how to learn at the college level because they're so used to someone telling them over and over when things are due and how things are supposed to be done.

- They're so used to having the teacher talk at them that they expect it in nursing school.

Prior learning experience of the nursing students was not explored in this study.

Conclusion

The findings of this study show that the students enrolled in a two-year ADN program at a local community college in the Northeastern US have the persistence needed to enter the nursing profession through this track. They have the ability to use their resources and coping mechanisms to succeed. In fact, the themes of practicality, emotional intelligence/caring, support, and barriers speak to the persistence of the participants. Practicality, stability, and the length of the program are motivators for the students to persist through a rigorous curriculum to enter the nursing field. However, the students' emotional intelligence and caring appear to be lacking, as evidenced by the low number of coded responses. These findings lead to more questions for future research. Even though emotional intelligence and caring was coded only 20 times and the theme of support was coded 19 times, these themes complement the supporting framework of the

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study. Lastly, the barriers the students report facing give rationale for the theme of practicality. The CAPS survey results give more insight into the students' persistence and problem solving ability to succeed in the two-year ADN program.

While the students reported positive feedback about the program they are enrolled in, the faculty's perception was the opposite. Negative comments were made about the active learning environment in the classroom, yet the students persist through the program. Lastly, two of the three faculty are in support of the ADN remaining as entry level to practice. Those in support of the ADN cite many of the ideas that the students identified as barriers, such as the workload, outside responsibilities, finances and the time factor of degree completion.

Chapter 5

Discussion of Findings

Introduction

There continues to be controversy surrounding the entry-level degree to the profession of nursing (Clarke, 2016). As it stands currently, there are several ways to gain entry into the profession. An individual can become a nurse through a diploma, associate degree program, or baccalaureate degree program. There is a call by many agencies (e.g. National Council of State Boards of Nursing, Institute of Medicine) for the baccalaureate to be the standard degree to enter the profession. However, others are concerned this would limit access to the profession for those of a lower socioeconomic status who would pursue a two-year associate degree at a community college, thus exacerbating the impending nursing shortage. Currently, more nurses enter the profession through an ADN program than through a baccalaureate program (BSN).

The following chapter will discuss this study's implications on practice, policy, and research. The implications on practice include not only allowing the ADN to remain as entry level to practice, but also advocating for the increased education of nurses. This advocacy directly relates to the implications for leadership, which will also be discussed. Increasing the education of nurses, in turn, directly relates to patient and public safety. Nursing leaders can work directly with policy makers to ensure the profession of nursing continues to be dedicated to life-long learning through articulation agreements and tuition reimbursement programs.

The purpose of this qualitative study was to examine the persistence of the ADN student and the importance of the ADN remaining as entry level into the nursing

profession. By allowing the ADN to remain as an entry level to the profession, individuals will be able to achieve their goal of becoming a nurse through a rigorous two-year program as opposed to a four-year program. As discussed in the previous chapters, these individuals face barriers to a baccalaureate degree such as finances, time of degree completion, and familial or work obligations. Further, the participants of this study, students in a two-year ADN program, did show they have problem solving abilities and the ability to persist through a rigorous curriculum. This conclusion was reached through interviews of students enrolled in a two-year ADN program and three faculty who teach in a two-year ADN program. Additionally, the Coping Adaptation Processing Scale (CAPS) survey was administered through the electronic program, Qualtrics, to the entire cohort enrolled in their third semester, second year of the nursing program. This survey was chosen as a method of identifying the level of persistence of ADN students in their endeavor to become a nurse. These research methods were chosen as a way to show the value of the ADN graduate and the importance of this degree remaining as entry level to practice. The students enrolled in the community college setting are pursuing the ADN for practical reasons rather than the caring aspect of the profession. Caring as a concept was discussed through the interview responses; however, the caring discussed was generally more related to the participants' family as opposed to the community. Specifically, these students discussed finances and the time of degree completion as the reasons for entering the profession through a two-year degree.

Though the focus of the participants was on practical reasons for entering the profession, the students did discuss some nursing characteristics as noted by Price et al. (2013). Caring for those in need and wanting to help others were the rationales behind

wanting to enter the nursing field. As noted in the participants' responses, the students discussed needing to provide for their families or the caring of ill family members. It is evident the participants have the capacity to care and provide help to others, therefore, will benefit the nursing profession. Not only do these participants have the ability to persist through the curriculum, but they care about others.

Importance of Study

It was important to examine the persistence of students enrolled in the ADN program in order to show the necessity of the ADN remaining as entry level to practice. The ability to persist through a rigorous two-year ADN program is critical to examine, as it will assist with reversing or stopping the impending nursing shortage. This nursing shortage is a result of the nurses who are reaching retirement age, the increasing number of baby boomers who are living longer due to advances in healthcare as well as the increased number of Americans who have health insurance because of the Affordable Care Act of 2010. If the BSN degree is made the standard entry level to practice, then the number of nurses that are graduating and entering the field each year will decrease. In 2016, it was reported that 81,633 nurses graduated with an ADN while 72,637 graduated with a BSN (Smith, 2017b). Thus, removing the ADN as a pathway to the profession could result in losing thousands of nurses each year.

The US Census predicts that by 2050, 19.6 million workers will be over the age of 65 (Harrington & Heidkamp, 2013). Further, by 2020 it is predicted that half of the registered nurses in the US will be at retirement age, resulting in thousands of nurses retiring at the same time that thousands are being denied entry to ADN programs as a result of the BSN entry level to practice mandate. It is predicted that the number of new

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nurses graduating and entering the profession will not keep up with the number of retirees from the nursing workforce (Auerbach, Buerhaus, & Staiger, 2015b). The American Association of Colleges of Nursing (2015) reported that approximately 69,000 students were denied admission to nursing programs for the academic year 2014-15 for multiple reasons, such as decreased budgets, lack of clinical sites, or insufficient numbers of faculty.

Another factor contributing to the potential nursing shortage is the increasing age of the baby boomers. The Institute of Medicine (2011b) reports that by the year 2030, 20% of the US population will be older than 65 years of age. The US Census reports that by 2035, this population will have reached 78 million, vastly outnumbering young adults (Vespa, 2018). These individuals, born in the years 1945-1964, are living longer as a result of the advances in healthcare (Daniel & Smith, 2018). As the baby boomer generation ages, their healthcare needs will increase, requiring a steady influx of nurses to assist in their care (Barr, 2014). This increase in elderly patients will take place just as more Americans are able to afford health insurance because of the Affordable Care Act of 2010 (Budden et al., 2013; MacLean et al., 2014). While the Affordable Care Act is currently in the midst of a political debate, it still stands that businesses are required to offer healthcare plans through the Affordable Care Act to their employees or face a financial penalty (National Federation of Independent Business, 2015). With this increased population with insurance and the increased population over age 65, physician's offices, clinics, and hospitals are in need of nurses to assist with the influx of patients.

Additionally, the 36-hour work week is adding to this decrease of nurses available to care for this population (Barr, 2014). Many nursing staffs have moved away from the 40-hour work week to a 36-hour work week, which increases the need for more nurses. Stimpfel, Sloane, and Aiken (2012) found that this increase in hours worked per day leads to burn out and intent to the leave the profession. With this being said, the profession needs to maintain a steady stream of qualified, competent nurses. Between the increasing healthcare needs of this generation and the decreased work week, the nursing profession has created new roles which in turn increases the number of nurses needed (Auerbach, Buerhaus, & Staiger, 2015b). An example of these new roles is the nurse navigator, whose focus is to ensure the patient contacts the appropriate physicians for the ailments they suffer. The nurse navigator not only schedules physician appointments, but also coordinates services occurring outside of the physician's office, such as laboratory testing or radiologic exams. The advance practice nurse role has also increased to assist physicians in treating elderly patients who have multiple co-morbidities. This role is found not only in hospitals, but in physician's offices and long-term care settings as well. Due to the demand for these positions and the flexibility of the work schedule, both the nurse navigator and advance practice nurse role are attracting nurses who formerly would have stayed at the bedside in a direct care role.

If the BSN is made the entry level to practice, it will decrease the number of nurses that are graduating each year due to lack of access to BSN programs. For example, the community college where this study was conducted is located within the poorest county of the state. Without the ADN, these individuals may not ever be able to attain their goal of becoming a nurse. In fact, the theme of practicality that arose through the

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data analysis supports this idea. Throughout the interviews, the students discussed the time frame of degree attainment as a major factor in choosing the ADN over the BSN degree. The participants focused on the barriers to a baccalaureate degree such as work and familial obligations that would prevent them from attending college for four years. In the theme of goals, students discussed the idea of graduating from a BSN program at a future date and with the financial assistance of their employer. The two-year ADN degree offered at this community college allows for the individual to break the cycle of poverty by obtaining entry to a lucrative profession and utilizing tuition reimbursement programs from their employers.

Most students reported not having the financial capability to attend a four-year university. In the theme of barriers, finances arose as a reason for students not entering the profession through a BSN program. Enrolling in an ADN program is a financially responsible decision in that the individual can attend college for a lower cost and receive a degree that will allow them to enter a rewarding profession. For example, the National Center for Education Statistics (2018) reports the cost of a 2-year college is half that of a 4-year college. With this being said, students enrolled in the 2-year ADN program are able to achieve their overall dream of becoming a nurse through wise financial decisions.

There is not a wealth of research surrounding the ADN student and the reasons for entering the profession. Research has demonstrated that students enroll in BSN programs because they are attracted to the idea of working in an honorable profession and wanting to help others (Howerton Child & Sussman, 2017; Price et al., 2013). Within this study's results were some concerns that the idea of working in an honorable profession or wanting to help others were not exposed as the main reasons for entering the profession

through the two-year ADN degree. While the research questions in this study were designed to elicit responses focusing on the rationale for choosing an ADN over a BSN program, one would assume the idea of wanting to help others or wanting to work in a noble profession would have come to light through the participants' responses. However, as the results of the study show, the participants discussed practical reasons for wanting to become nurses; more specifically, they discussed financial stability and job security. While some participants did discuss caring, the overwhelming themes of the study were goals, admission criteria, and program stressors. The comments participants made during the interviews focused more on themselves and their families rather than caring for others.

Implications for Practice

The study served its purpose in that it shows the students enrolled in the two-year ADN program at Clay Community College have the persistence required to participate in the rigorous nursing curriculum. The interview responses show that the intention of the student enrolled in the two-year ADN program is to get their degree to enter the nursing field and then continue their education. For example, interview question 12 asked the participants what their educational goals were for the future, and all participants stated they plan to continue their education to achieve at least a BSN degree. While the participants discussed their intent to continue their education, potential barriers to an initial four-year degree were discussed. The BSN degree was not a feasible option for these participants due to their individual circumstances. For example, students discussed familial obligations or work obligations as a barrier to attending a four-year program on a full-time basis. The cost of the BSN education was discussed as well. Some of the

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students have previous degrees and therefore have prior student loan debt, preventing them from taking out additional student loans. The students also spoke of low self-esteem when discussing barriers. Some felt they were not good enough to meet the admission criteria or to continue through the entire program. Several students discussed continuing their education once hired as a nurse in a setting where their employer will provide tuition reimbursement. Pursuing a BSN degree after obtaining initial licensure as an RN typically consists of online or hybrid classes, a format which offers the flexibility the working student needs.

Advocating for increased education of nurses can include encouraging attainment of higher degrees such as a BSN or MSN, but it can also include promoting achievement of national certifications in their specialty areas of practice. The AACN (n.d.) reports a total 73,944 nurses had their adult critical care registered nurse (CCRN) certification in 2017. This number is a 6% increase from the previous year (AACN, n.d.). This is just one example of the many certifications that exist for nurses. In fact, there are upwards of 60 certifications for nurses, according to Lippincott's Nursing Center (Wolters Kluwer, 2018). National certification requires the nurses to continue their education as a means of re-certification. For example, the Board of Nursing in each state has a set requirement for continuing education credits to renew the nursing license. The organization that provides certification also has a set requirement for continuing education credits to maintain the certification in addition to continuing to practice in the specialty area of nursing. If the Board of Nursing requires 30 continuing education credits and the AACN requires 100, then the nurse needs to complete 130. The continuing education credit can be earned through teaching a class in the specialty area, attending a conference, and/or reading

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peer-reviewed journal articles and taking a test. Further, there are organizations that require a specific number of continuing education credits in various areas such as pharmacology or leadership. While these certificates do not count as college credit toward a degree, they increase the nurse's knowledge base for practice, which in turn will hopefully encourage the nurse to pursue a higher degree.

Implications for Leadership

Magnet certification of hospitals is one of the major driving forces behind hospitals hiring only BSN prepared nurses. As discussed in a previous chapter, the AACN does not require a specific number of BSN-prepared nurses, but instead advocates for the overall increased education of the nursing staff. However, of those hospitals with Magnet certification that report having an increased number of BSN-prepared nurses, the statistics do not show the entry level degree of the nurse. For example, a hospital can report having 80% of their nursing staff as BSN prepared, but all of them could have entered the nursing profession as ADN graduates. Hospital administration needs to educate its non-nursing stakeholders about the fact that Magnet ® designation does not automatically mean hiring only BSN-prepared nurses.

The current trend in the Northeastern US is to hire the BSN-prepared nurse before the ADN-prepared nurse. While hospital leadership does need to encourage nursing staff to commit to lifelong learning in order to maintain the profession, hiring only BSN-prepared nurses is not the only way to achieve this outcome. Instead, ADN-prepared nurses should be required to increase their education. Numbers of nursing faculty are decreasing across the nation. The decline in nursing faculty is a result of diminished satisfaction with the role and the disparity in the salary between bedside nursing and the

faculty role. It is important for bedside nursing staff to transition to positions of nursing faculty to share their expertise and knowledge with future nurses. Policy makers within the government and higher institutions need to evaluate their resources in order to address the salary disparity. While nursing faculty typically hold 10-month teaching positions, they find themselves working 12-months due to the intense curricular planning based on the previous year's data collection. The faculty need to meet in order to reflect on past practice and evaluate data so that changes can be made to improve the curriculum and incorporate new innovations in teaching and learning. However, during the 10 months they are working directly with the students, there is little time to meet with their colleagues to discuss the overall curriculum. Thus, a 10-month position requires year-round work; with this in mind, an increase in salary would make the faculty position more attractive. Addressing the salary disparity between bedside nursing and nursing faculty will increase the number of nursing faculty, thereby increasing the number of students that can be admitted to nursing programs (AACN, 2015; Nardi & Gyurko, 2013). With a decreasing number of nursing faculty due to the salary disparity, ADN programs will continue to turn students away. Consider the 68,936 undergraduate nursing students who were turned away in 2014 and the 52,922 nursing students who graduated from an ADN program in the same year; if the salary of the nursing faculty were comparable to the bedside nurse, those thousands of nurses would not be turned away and the profession would not be facing a potential shortage (AACN, 2012; AACN, 2015). Without a serious look at the difference between the salary of a bedside nurse and that of nursing faculty, the ADN could be lost forever due to a lack of resources (Nardi & Gyurko, 2013).

Nursing leaders need to educate graduating nurses on the importance of furthering their education in order to give back to the profession by becoming educators themselves. Current nursing faculty need to share their enthusiasm and excitement for teaching with their students. It is important for nurses to not only further their education for professional development, but also as a means of maintaining the profession. With increased education, the nursing student can become a nurse educator either in a facility, such as a hospital or nursing home, or in higher education. As an educator, the nurse can assist with maintaining the profession by educating the nurses of tomorrow.

Implications for Policy

The research suggests that the ADN program reaches a population of students who are struggling economically, therefore giving them the ability to better themselves. The continuation of the 2-year ADN as entry level to practice effects diversity and inclusion among the nursing profession. This study was performed in a diverse program, even though the demographics of those who self-selected to be interviewed do not reflect as such. The American Association of Community Colleges (2018b) report that the non-white students enrolled in community college has surpassed the white students. The minority nurse is an important member of the healthcare team as patients will identify and inherently trust members of their own community (Gates, 2018). With this being said, the more diverse the profession, the higher the trust of the public leading to a healthier nation overall.

The personalities of the ADN student are consistent with the characteristics of a strong individual, as evidenced through the results of the CAPS survey. Through their persistence and determination, they have the ability to succeed through the ADN program

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and enter the workforce as a nurse. Moreover, these individuals do not wish to stop their education after entering the profession, but have the intent to continue on for a higher nursing degree. In fact, these individuals have indicated they will enter the nursing profession and rely on their employer's tuition reimbursement policy to further their education. These individuals have chosen an educational pathway to not only break the poverty cycle in which they find themselves, but also to enter a noble profession.

An intervention as a result of this research is to continue to advocate for the ADN programs and its graduates. By advocating for these programs, researchers can ensure the public can make an informed decision in regards to maintaining the two-year degree as entry level to practice. For example, consider the status of the community college without these programs. Does the college have other degree programs with the enrollment of nursing or pre-nursing programs? For smaller community colleges, the students who are enrolled in the general education courses are on the path to an ADN program; without this program, general education course enrollment decreases. Local politicians can be petitioned by the public in order to support the endeavors of the community college. As reported by Smith (2018), community colleges are facing decreasing enrollment as a result of decreased governmental funding and the increased focus on outcome measurement. Through contacting local politicians, the public can assist community colleges in lobbying for funding to support the students.

By supporting the ADN as entry level to practice, the public is assisting with public safety as it relates to the safe nurse-to-patient ratio in hospitals and home care settings. Without this degree as entry level to practice, the impending nursing shortage will only increase. This nursing shortage can and will affect the community in that there

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will be an increase in health disparities. For example, there are currently public health nurses working in the community to ensure influenza vaccination clinics are held annually. If there is a nursing shortage, the public health nurses may not be able to hold those clinics. Without access to immunizations, the influenza season may create an increased number of patients admitted to the hospital or being seen in physician's offices or clinics. This increased number of patients affected by influenza can also increase the death rate associated with the disease.

As evidenced by this study, ADN students have the persistence to succeed and the motivation to continue their education. Themes that emerged in the qualitative interviews support the findings from the CAPS survey. Throughout the interviews, the participants described the theme of practicality through stories of needing to complete their education in a timely manner due to their family and work obligations. Further, these participants are looking for entry into a profession that will offer job security and stability in order to support and provide for their families. The CAPS survey results provided in the previous chapter demonstrate that the participants are able to multi-task and seek support systems in order to succeed in the ADN program. During the conversations with the participants, continuing their education came up many times as a common theme. Every participant discussed the desire and motivation to continue past the initial licensure degree.

The need for continuing education is an important implication of this research. Since evidence-based practice leads to a decrease of patient mortality in institutions, encouraging nurses to continue their education is essential. However, students need to be able to access the profession through affordable pathways. Therefore, community colleges need to increase access to the four-year degree through articulation agreements.

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A 3+1 program would be ideal. In a 3+1 option, the student takes the first three years of the degree at the community college at community college costs, and then seamlessly transfers to the university for the fourth year. After the first two years, the student will sit for the licensure exam to gain entry into the workforce. The benefit of these programs is that the junior year of courses, or 300-level courses, are taught at the community college, by the community college faculty, and at the community college costs. Articulation agreements allow for ease of transfer of credits to a BSN program. For example, ADN programs are traditionally 60 credits; BSN programs are traditionally 120 credits. With articulation agreements, the BSN program will take not only the 60 credits from the ADN, but potentially up to another 30 credits from the community college. An increase in articulation agreements allows for the student to continue their education while allowing for their employer to pay for tuition. It also decreases the initial cost of college for the student in the beginning, as they can utilize financial aid, student loans, and scholarships for longer periods of time with the decreased costs.

With imminent legislation to make the BSN the entry level to practice nursing, it was important to conduct this study to show the value of the ADN graduate. The impending legislation could potentially close community college nursing programs, which will in turn decrease the number of nurses entering the workforce and leave many nursing faculty without employment. Legislation similar to what New York passed in 2017 would be a more feasible option for the profession. In December 2017, New York passed a BSN-in-10 law requiring those nurses with an associate degree or a diploma in nursing to obtain their BSN within 10 years of initial licensure (Zittel, 2018). All nurses who already held a license, as well as nursing students who were already enrolled in a

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diploma or an associate degree program when the law was enacted, would be exempt (Zittel, 2018). Enacting this legislation nationwide would increase the education requirements of nurses without contributing to the nursing shortage by limiting access to the profession for the students who are unable to pursue initial licensure with a BSN.

Implications for Future Research

Further research should be conducted at Clay Community College. For example, only 12.8% of the students in the ADN program were interviewed for this study. The theme of caring was not largely discussed by the participants who were interviewed; perhaps this theme would actually be more prominent if more of the cohort participated in the study. Further, the concept of persistence was evident in those who were interviewed, but one may question whether this would have been the case if more of the cohort were interviewed.

For future research, the entire cohort of students should be interviewed, or focus groups should be conducted to learn about the students' reasons for becoming a nurse. In fact, future research should look to developing a tool to evaluate the nursing students' caring and empathy, as these are important characteristics to have within the nursing profession.

Limitations of the Study

Limitations of the study included the electronic survey response rate, the researcher's role within the institution, and curriculum evaluation. Of the 74 students solicited, 51 completed the survey. While Livingston and Wislar (2012) report a survey response rate of 60% as acceptable, Creswell (2014) reports a response rate of 80% as more reliable. The researcher's role as adjunct professor at the community college where

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the research took place was one limitation of the study. Participants may have felt pressure to give answers they felt the researcher wanted to hear as opposed to giving full disclosure. Another limitation is the lack of a detailed comparison between ADN and BSN students in the quantitative realm. For example, having the standardized entry exam scores, nursing exam scores, or NCLEX-RN pass rates of both programs would have been beneficial in making the case for the ADN remaining as entry level to practice.

Conclusion

This study demonstrated that the ADN should remain as entry-level to the nursing profession, as students were shown to be able to persist through a two-year program with the commitment to lifelong learning. This was evidenced through the participants' responses when asked about future goals. Every participant discussed furthering their education past the initial licensure as an RN. The ADN graduate takes the same licensure exam as the BSN graduate, which translates to the ADN graduate having a similar knowledge base as the BSN graduate. Experience as an associate degree prepared nurse can and will enhance the RN-to-BSN education as the individual pursues lifelong learning. The ADN is a safe, competent practitioner that should remain as an entry level option to the profession of nursing.

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Appendix A

Student Interview Protocol

Thank you for taking the time to speak with me about the persistence you have demonstrated in your nursing education thus far. The purpose of this interview is to gain an understanding of the nursing student's persistence in a rigorous curriculum for such a rewarding profession. The interview should take about 30 to 45 minutes and will be recorded to ensure I accurately document your responses. Information retrieved during this interview will remain confidential as it is being used toward by Educational Leadership Doctoral degree at Rowan University. Once again, I want to thank you for taking the time to speak with me about this topic.

First, I would like to obtain some demographical information from you.

1. Which category is your age located?

a. 18-24 years old

b. 25-34 years old

c. 35-44 years old

d. 45-54 years old

e. 55-64 years old

f. 65-74 years old

2. Do you have a previous degree? If so, what type of degree is it?

3. Are you working in healthcare? If yes, is it full-time or part-time?

4. What influenced your decision to enter the healthcare field?

5. Explain the process you have gone through to enter the healthcare field.

6. What guided your decision-making process to attend an associate degree program?

7. Tell me about the admission process for the associate degree nursing program.

8. What has driven you to continue your path to becoming a nurse?

9. Tell me about a time you wanted to walk away from the program.

10. Tell me about a faculty member or classmate who has helped you with a problem.

11. What does the active learning environment look like in your classroom?

12. What are your educational goals for the future?

13. Discuss the barriers you believe you would face in applying for a baccalaureate nursing program.

Appendix B

Coping Adaptation Processing Scale

Directions: Sometimes people experience very difficult events or crises in their lives. Below is a list of ways in which people respond to those events. For each item, please mark the number closest to how you personally respond: 1 = never; 2 = rarely; 3 = sometimes; 4 = always

"When I experiences a crisis, or extremely difficult event, I…"

	Never	Rarely	Sometimes	Always
1. Can follow a lot of directions at once, even in crisis	1	2	3	4
2. Call the problem what it is and try to see the whole picture	1	2	3	4
3. Gather as much information as possible to increase my options	1	2	3	4
4. Generally try to make everything work in my favor	1	2	3	4
5. Can think of nothing else, except what's bothering me	1	2	3	4
6. Try to get more resources to deal with the situation	1	2	3	4
7. Use humor in handling the situation	1	2	3	4
8. Am more effective under stress	1	2	3	4
9. Take strength from spirituality or the successes of courageous people	1	2	3	4
10. Can benefit from my past experiences for what is happening now	1	2	3	4
11. Try to be creative and come up with new solutions	1	2	3	4
12. Brainstorm as many possible solutions as I can even if they seem far out	1	2	3	4
13. Find I become ill	1	2	3	4
14. Too often give up easily	1	2	3	4
15. Develop a plan with a series of actions to deal with the event	1	2	3	4

For the following questions, please mark whether you feel the answer is not true at all, hardly true, moderately true or exactly true.

	Not true at all	Hardly true	Moderately true	Exactly true
1. I can always manage to solve difficult problems if I try hard enough				
2. If someone opposes me, I can find the means and ways to get what I want				
3. It is easy for me to stick to my aims and accomplish my goals				
4. I am confident that I could deal efficiently with unexpected events				
5. Thanks to my resourcefulness, I know how to handle the unforeseen situations				
6. I can solve most problems if I invest the necessary effort				
7. I can remain calm when facing difficulties because I can rely on my coping abilities				
8. When I am confronted with a problem, I can usually find several solutions				
9. If I am in trouble, I can usually think of a solution				
10. I can usually handle whatever comes my way				

Appendix C

Faculty Interview Protocol

Thank you for taking the time to speak with me about the persistence you have demonstrated in your nursing education thus far. The purpose of this interview is to gain an understanding of the faculty's perspective on the associate degree nurse and the active learning environment. The interview should take about 30 to 45 minutes and will be recorded to ensure I accurately document your responses. Information retrieved during this interview will remain confidential as it is being used toward by Educational Leadership Doctoral degree at Rowan University. Once again, I want to thank you for taking the time to speak with me about this topic.

1. How would you describe the active learning in your classroom?
2. Tell me about how the students react to the active learning in your classroom.
3. What are your feelings about the ADN remaining as entry level to practice?