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The role of professional development in adjunct nursing faculty identity salience

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The role of professional development in adjunct nursing faculty identity salience

by

Jared Dean Seliger

A dissertation submitted to the graduate faculty
in partial fulfillment of the requirements for the degree of
DOCTOR OF PHILOSOPHY

Major: Education (Educational Leadership)

Program of Study Committee:
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Iowa State University

Ames, Iowa

2015

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DEDICATION

To my caring and supportive wife, Miranda:
Your love and faith in me throughout this journey
has meant the world to me.
I love you!

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ABSTRACT

The purpose of this mixed methods study was to understand how adjunct nursing faculty integrate their pedagogical professional development (PD) experiences to develop identity salience as an educator, and understand how PD affects their perceptions of commitment, satisfaction, and time spent in the adjunct role. Administrators of nursing programs can use the results as evidence of the importance of providing PD to their adjunct faculty. Ten adjunct nursing faculty who participated in PD were interviewed using phenomenological qualitative methods comprised of interviewing and gathering field notes. The themes emerging from the interview revealed that ongoing PD fosters a teaching identity, reduces adjunct isolation, and leads to higher satisfaction through peer mentoring. The results also showed that a lack of PD lead to a reduced commitment to the adjunct role. In addition, quantitative data were gathered through the distribution of the Adjunct Faculty Identity Salience Survey (AFISS). The AFISS required the participants to answer 68 questions related to how PD affects their role as an adjunct. The data were analyzed using descriptive statistics, crosstabs, correlations, and exploratory factor analysis (EFA). The results generated from the AFISS supported the qualitative findings that pedagogical PD does contribute to salience as an educator. The EFA revealed the extent of the relationship that PD had on the independent variables. A positive, statistically significant relationship was revealed between PD and identity salience, commitment, time spent in the adjunct role, and satisfaction. Professional development had a stronger relationship with identity salience ($r = .560$), commitment ($r = .535$) and time spent in the adjunct role ($r = .665$) than it did on satisfaction ($r = .123$). The results can be incorporated by nursing programs utilizing adjunct

nursing faculty as evidence to support that pedagogical PD does lead to salience as an educator and higher levels of adjunct commitment, satisfaction, and time spend in the role as an adjunct.

CHAPTER 1. INTRODUCTION

Adjunct clinical nursing faculty serve a non-traditional role in the academy. An adjunct nursing faculty member is typically hired by a nursing program on a semester-to-semester basis depending on the needs of the institution (Anibas, Brenner, & Zorn, 2009). In addition to their employment at schools of nursing, many adjunct nursing faculty are employed as practitioners at healthcare institutions (Duffy, Stuart, & Smith, 2008; Forbes, Hickey, & White, 2010). The current trend for nursing programs is to hire adjunct faculty who have Master of Science in nursing (MSN) degrees and are employed full- or part-time in other nursing jobs but have motivation to work as an educator (West, Borden., Bermudez, Hanson-Zalot, Amorim, & Marmion, 2009). The motivations for a qualified nurse wanting to teach as an adjunct in a school of nursing are varied. Some of these factors include: A desire to want to teach, aspirations to become a full-time educator, and/or a need for additional income (Carlson, 2012).

The increased utilization of adjunct faculty in nursing programs is partly due to the demographics of nursing faculty. The American Association of Colleges of Nursing (AACN, 2013) reported that nursing schools in the United States turned away 79,659 qualified applicants due to an insufficient number of faculty, clinical preceptors, and budget constraints. Berlin and Sechrist (2002) reported the percentage of nursing faculty over the age of 50 was at 70.3% in 2001, and had grown by 20% over the previous decade. In 2009, the National League for Nursing (NLN) corroborated this trend by reporting 93% of nursing faculty were 46 years of age or greater (NLN, 2011).

Historically, nursing education institutions have encouraged hiring adjunct faculty who are established practitioners with specific expertise that can be brought into the educational arena (Fagan-Wilen, Springer, Ambrosino, & White, 2006). Many of the nursing adjunct faculty teach clinical groups of nursing students (Beitz & Wieland, 2005). The use of adjunct nursing educators in a clinical setting does help mitigate the effects of the shortages that are plaguing nursing programs because teaching in a clinical setting provides direct patient care while concurrently teaching nursing students (Mann, 2013). The advantages of nursing programs utilizing adjunct nursing faculty include the practical expertise they provide to students and the direct link they provide between the educational institution and the healthcare institution (Beitz & Wieland, 2005).

Nursing educators possess the knowledge related to their degree in nursing, but often lack formal pedagogical skills or preparation for the educator role (Benner, Surphen, Leonard, & Day, 2010). As a result, most nursing faculty are considered to be novice educators because they lack training in pedagogical techniques. Novice faculty lack adequate preparation for the expectations of being an educator and cycle through multiple identities in that role (Siler & Kleiner, 2001). The lack of teacher preparation combined with inadequate faculty development can result in “resentment, disenchantment, and hostility towards the educator role and the academic system” (Locasto & Nochanek, 1989, p. 80). Adjunct faculty can also have feelings of general isolation from the program they are teaching in (Fagan-Wilen et al., 2006). These feelings of isolation, resentment, and hostility can result in faculty turnover, burnout, and a decline in the quality of the educational program (Locasto & Nochanek, 1989).

Because adjunct nursing educators lack experience in pedagogical theory, nursing programs and administrators provide professional development (PD) opportunities related to pedagogical techniques (Diegel, 2010). Most pedagogical PD content includes topics related to curriculum development, student communication, grading, and classroom management (Wonacott and the National Dissemination Center for Technical Education, 2002).

Pedagogical PD provides an opportunity for professionalism in the classroom and provides a more cohesive work environment that supports the development of all faculty (Elmore, 2007).

This chapter is organized to introduce the topic and provide the foundation on why research needs to be conducted. The problem statement, purpose of the study, research questions, significance of the study, theoretical framework, and definition of terms are presented. The research methodology in this study was developed from the research questions and the purpose of the study.

Statement of the Problem

Despite the rapid expansion of the utilization of adjunct faculty in higher education (Leslie & Gappa, 2002), there is little evidence about the factors influencing the role identity of adjunct nursing faculty (Anderson, 2009). Adjunct nursing educators are currently working, or have experience working, as practicing nurse clinicians. Understanding if nursing adjuncts have a primary professional identity as a clinician or an educator is an important factor in determining performance as an educator. Since adjunct nursing faculty members typically have little or no formal teaching or classroom preparation, the emphasis on PD from institutions with nursing programs is high (Shearer, 2008). Research is needed

to understand how these PD experiences contribute to clinical adjunct nursing educators' identities and understand how professional identity contributes to commitment towards the role as an educator. Specifically, being able to recognize if an adjunct identifies as a practicing nurse or an educator has implications for how administrators can provide the development necessary to best utilize their adjuncts.

Purpose of the Study

The purpose of this concurrent dominant-less-dominant study (i.e., qualitative dominant method with a minor quantitative method) was to understand how adjunct nursing faculty incorporate PD experiences into shaping or altering their professional identity and to understand how professional identity influences their perceptions of commitment, satisfaction, and time spent on the job (Creswell, 2009; Currall & Towler, 2003). In this study, a phenomenological approach was used to explore the influence pedagogical PD has on identity salience. Since more nursing programs are becoming dependent on adjunct faculty members who are working in dual roles, recognizing the primary role the adjunct relates to is important because nursing programs and administrators will be able to take advantage of the salient identity. The participants were purposely selected to obtain rich and thick data to answer the research questions.

Concurrent to the qualitative study, a minor method included the distribution of a survey to measure the relationship between PD, and commitment, satisfaction, and time spent in the adjunct role utilizing quantitative analysis. The quantitative methods permit analysis of data representing a larger population of adjunct nursing faculty than is possible using a qualitative approach. The reason for combining both qualitative and quantitative data was to

better understand the research problem by converging the rich thick data obtained from the interviews with broad numeric data to help inform nursing education practice.

Administrators of nursing programs that employ adjunct faculty can use this information to better understand the critical relationship of professional identity to the commitment and job satisfaction of adjunct faculty. Furthermore, this knowledge will assist administrators to better incorporate pedagogical PD programs designed to develop the professional identity of the adjuncts. Additionally, nursing programs can utilize the results to ensure they are meeting the mission of the program and are providing quality learning experiences for nursing students.

Research Questions

The central focus of this study was to understand the role PD plays in an adjunct nursing faculty's identity, commitment, satisfaction and time spent in the adjunct role. The following questions guided the researcher in the collection and analysis of data. The central research question for this study was:

Central RQ 1. How do the experiences provided through pedagogical professional development relate to identity salience among adjunct nursing faculty?

The following qualitative research questions were addressed in this study:

Qualitative 1. How do adjunct nursing faculty describe the role of professional development in their commitment to the role of an educator?

Qualitative 2. What meaning do adjunct nursing faculty gain from participating in professional development that allows them to be more satisfied as educators?

The following quantitative research questions were addressed in this study:

Quantitative 1. What effect does pedagogical professional development have on the identity of adjunct nursing faculty and their commitment, satisfaction, and time spent in that role?

Quantitative 2. What is the relationship between commitment, satisfaction, time in role, and identity salience when controlling for the effects of pedagogical PD?

Significance of the Study

After reviewing the previous research on this topic (see Chapter 2), it became evident that a gap exists in understanding how PD influences the identity of adjunct nursing educators. Anderson (2009) maintained that “minimal research has examined the phenomenon of transition from clinician to academic educator” (p. 204). As previously identified, due to the current operating conditions of nursing programs, nursing school administrators are increasingly utilizing adjunct faculty that are also concurrently working as a nurse in a healthcare facility.

The findings of this study may provide a better understanding of the phenomenon of the influence pedagogical PD has on adjuncts and its effect on the professional identity of adjunct nursing educators. The qualitative methodology of this study allowed for the generation of rich descriptions of how this phenomenon shaped the identity of the participants. The survey provided for data gathering and analysis on the effects of PD on professional identity across a larger sample of nursing faculty. As a result, new perspectives on how adjunct nursing faculty view their role as an educator as a result of participating in

PD were developed; these perspectives can, in turn, be utilized for the improvement of this practice through enhanced PD.

This research study was conducted to reveal the following changes in the practical implementation of policy and practice in nursing programs:

- Critical analysis of the pedagogical PD institutions offer to their adjunct nursing faculty.
- The provisions of adequate pedagogical PD to make the adjunct's educator role as the most salient identity.
- Understanding of relationships between pedagogical PD and identity to predict how committed, satisfied, and how much time adjunct nurse educators are willing to dedicate to that role.
- Improvement in the retention for adjunct nursing faculty to provide quality learning experiences for students.

Theoretical Frameworks

A theoretical framework connects the topic to the research questions and guides the methodology. The literature on nursing identity revealed two primary frameworks previously used for research on this topic: Symbolic interactionism and identity theory. Both of these frameworks have a specific purpose within this study. Identity theory is the theoretical lens through which this research project was constructed through and symbolic interactionism is the theoretical perspective of the qualitative methodology (discussed in

Chapter 3). The conceptual model for the quantitative method is the Model of the Adjunct Role developed by Kuchera and Miller (1988). This model is described in detail later in this chapter.

Identity Theory

The literature provided information regarding theories and factors that impact the identities of working professionals. Identity theory is concerned with some empirical issues that revolve around choices made during situations in which reasonable alternative actions are available to the person (Stryker & Serpe, 1980). Specifically, role performance is particularly problematic because situations are not pure with respect to the roles and positions that are appropriate to them. Identity theory addresses this issue with respect to behavior consistency (and inconsistency) as persons move from situation to situation, resistance to change, explanation of alternatives when persons face conflicting role expectations, and allocation of scarce resources (Stryker & Serpe, 1980). An in-depth review of the literature on identity theory is provided in Chapter 2.

Conceptual Model, Quantitative

Using identity theory, Kuchera and Miller (1988) developed a quantitative model for the adjunct role presented in Figure 1.1. This model showed the opportunity structure and how it related to commitment, satisfaction, identity salience, and time in role. In this model, satisfaction is dependent upon identity salience, commitment, and opportunity structure. In my research study, opportunity structure is depicted as pedagogical PD opportunities.

The Kuchera and Miller (1998) model was used to construct the survey instrument to measure how PD (independent variable) affects commitment, satisfaction, identity salience,

and the time in role (dependent variables). If the participants develop strong pedagogical skills through PD, then their commitment, satisfaction, and time spent as an adjunct

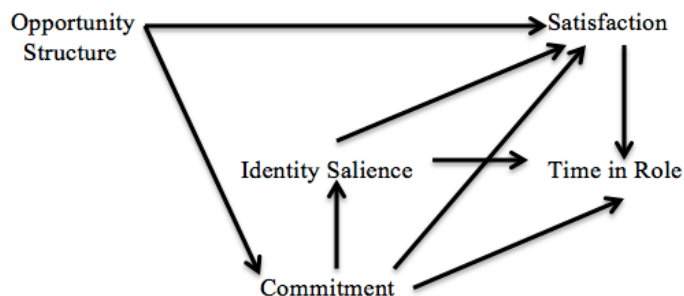


Figure 1.1. Model for the adjunct role

increased. The working hypothesis for the quantitative methodology is positive PD experiences result in the adjunct educator identity being more salient over the nursing identity. This in turn increases commitment, satisfaction, and time spent in the role as an educator.

Definition of Terms

The following terms were defined for use in this research:

Adjunct Faculty: An individual working at a college or university who does not have permanent or full status at that institution. Job duties are typically limited to teaching and office hours for students (Wallin, 2004).

American Health Sciences Education Consortium (AHSEC): Organization of 27 nursing and health sciences institutions with direct ties to a hospital or larger healthcare organization (AHSEC, 2014).

Career and Technical Education (CTE): Historically known as vocational education, CTE programs are technical in nature and teach specific job-related skills to students.

Nursing is a CTE program (International Technology Education Association, 2003).

Continuing Education: Typically a non-credit course offered for adult learners that teaches a specific skill or topic (Reese, 2010).

Contract Faculty: Non-tenured, temporary faculty working less than full-time (Fagan-Wilen et al., 2006).

Expendable Academics: Refer to adjunct faculty definition.

Faculty Development: Refer to professional development definition.

Full-time Faculty: Faculty who have a full-teaching load and can be either on a tenured or non-tenured track (Wallin, 2004).

Identity Saliency: The most prominent professional identity a person identifies with (Kuchera & Miller, 1988).

Non-Tenure Track Faculty: Faculty members that can either be classified as full-time or part-time status that do not pursue tenure (Wallin, 2004).

Part-Time Faculty: Instructors classified as less than a full-time teaching responsibility that are compensated at a rate below full time faculty (Wallin, 2004).

Professional Development: Advancement of expertise or skills in a particular profession through a continuing education program (Wonacott et al., 2002).

Temporary Faculty: Full-time appointees that are only retained for a short period of time without expectation of continuing employment (Wallin, 2004).

Workforce Development: Provisions in the Workforce Investment Act (WIA) of 1998 that stipulates state control over delivering employment and training services to local citizens through federal funding (USDOL, 2010).

Summary

The increased utilization of adjunct nursing faculty by nursing schools has necessitated understanding the significance of how pedagogical PD affects their professional identity. Due to the demographic trends of probable nursing and nurse educator shortages, the tendency of increased adjunct utilization is likely to continue. Due to the lack of qualified nurses and nurse educators available, many are working dual roles as a clinician and an educator. Many nursing schools are transitioning their adjuncts into the academy with pedagogical PD.

This study investigated the phenomenon of how pedagogical PD influences the professional identity of adjunct nursing faculty. Identity theory was the theoretical lens through which the qualitative paradigm was conducted, and the conceptual model presented by Kuchera and Miller (1988) was used as the framework for the quantitative data gathering and analysis.

Nursing programs and higher education administrators can use the results of this research project to better understand how PD affects their adjunct nursing faculty. If administrators understand the significance of how professional identity affects an adjunct's satisfaction, commitment, and desire to continue to work as an educator, they can more effectively manage their PD programs to allow the adjuncts to grow their identities as educators.

CHAPTER 2. LITERATURE REVIEW

This chapter explores the literature focusing on adjunct nurses, professional development (PD), professional identity, and the theoretical framework guiding this study. The purpose of this chapter is to ground this study in the literature by exploring professional nursing identity and professional development to uncover the roles they play in an adjunct nursing educator's experiences as an educator. This literature review is organized into three sections: (1) definitions of adjunct faculty and pedagogical PD; (2) perceptions of professional identity by adjunct faculty; and (3) the frameworks used to study adjunct faculty. A map linking the topics and authors is shown in Figure 2.1 to help visualize and organize the literature.

Definitions of Adjunct Faculty

Higher education institutions use various terminology to define adjunct faculty; therefore, in this study it was important to uncover the relevant descriptors used for adjunct faculty members. Wallin (2004) stated it is challenging to define who adjunct faculty members are because multiple terms exist. Those terms include part-time faculty, contingent workforce, expendable academics, non-tenure track faculty, and adjunct faculty (Wallin, 2004). Wallin did not elaborate any further on adjunct faculty definitions.

Monroe and Denman (1991) provided a definition of adjunct faculty members working at two-year institutions. This definition is important because many nursing faculty are found in two-year community colleges or nursing schools. The authors stated adjunct faculty could be called part-time faculty, non-tenure faculty, or adjunct faculty and an

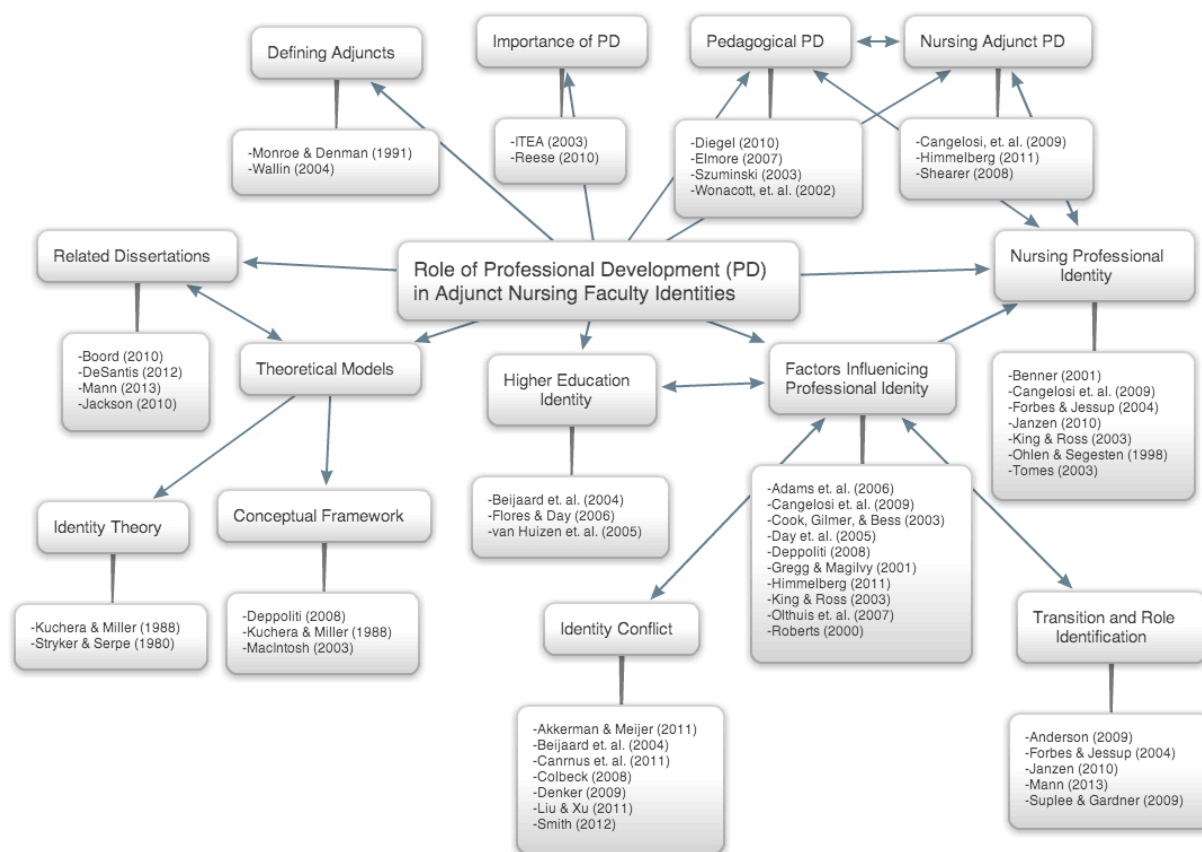


Figure 2.1. Literature map related to professional development and adjunct nursing identity

adjunct faculty's job responsibilities include teaching, syllabus preparation, and being available to address any student concerns (Monroe & Denman, 1991). Adjunct faculty do not participate in student advising, curriculum development, committee appointments, or supervision of internships (Monroe & Denman, 1991).

The publications describing the definitions of adjunct faculty were limited to those of Wallin (2004) and Monroe and Deman (1991). Based upon the paucity of literature available, the research participants for the current study were nursing instructors who teach a class, on a limited or part-time basis, and do not participate in any advising, committee work, or curriculum development. Participants who met these criteria were defined as adjunct

faculty in this research, even if their employer used a different descriptor (e.g. non-contract faculty, temporary faculty, etc.).

Importance of Professional Development

Professional development is crucial for faculty members to develop the skills necessary to be successful in the classroom (Reese, 2010). Post-secondary PD for career and technical education (CTE) educators (including nursing) and adjuncts is a continuous process of growth and lifelong learning that continues for the educator's entire career (International Technology Education Association, 2003). The International Technology Education Association (2003) stated:

Effective professional development experiences foster collegiality and collaboration: Promote experimentation and risk taking; draw their content from available knowledge bases; involve participants in decisions about as many aspects of the professional development experiences; and integrate both organizationally and instructionally with other staff development and change efforts. (p. 39)

Pedagogical Professional Development

Since PD was identified as an area of importance to CTE adjuncts, a review of PD activities related to this subject was performed. Wonacott et al., (2002) stated that teaching is an exceptionally difficult field to enter and master, usually taking five to six years of experience for any CTE teacher to get established as a competent and effective instructor. To help CTE adjuncts become effective and competent, pedagogical PD should incorporate content from the following areas: Curriculum, lesson plan design, teaching methods, student communication, and classroom management. In order to help facilitate development of these

skills, a faculty mentor should be assigned to work with adjunct faculty (Wonacott et al., 2002).

Diegel (2010) conducted a phenomenological qualitative study on adjunct nursing PD and identified one of the most important aspects of an adjunct faculty member's job is teaching students. Diegel explained that the adjunct's deans and/or division chairpersons played a vital role in providing the necessary support and pedagogical PD opportunities. Diegel reported that the adjunct faculty ranked the teaching evaluation they received from their dean as one of the most important forms of pedagogical activities they encountered.

Another pedagogical skill identified as a crucial area for adjunct PD is the preparation involved to teach a course (Szuminski, National Dissemination Center for Technical Education, 2003). Areas to focus on include lesson design, preparing student assessments (quizzes and examinations), class objectives development, and syllabi preparation. Szuminski (2003) pointed out that in order to make these PD activities successful, the adjunct's peers and superiors must provide positive psychological support (either formal or informal).

Elmore (2007) discussed how CTE faculty professionalism was affected by pedagogical PD. Since most CTE/nursing faculty, both full-time and adjunct, do not have a background of working in higher education, proper classroom etiquette might not be fully understood or practiced (Elmore). If an adjunct faculty receives pedagogical PD focusing on curriculum design, teaching methods, student evaluation and assessment, and communication, it provides the backbone of professionalism in the classroom and on campus, which tends to provide a more cohesive work environment that supports the development of all faculty (Elmore).

Based on the literature on pedagogical PD for adjunct faculty, it may be concluded that training in curriculum design, lesson plan development, in-class teaching, communication, peer mentoring, and feedback from superiors are important for adjuncts. Peer mentoring was mentioned in the literature as important in pedagogical PD but it was not defined clearly; therefore, additional information on peer mentoring was investigated in the next section.

Nursing Adjunct Professional Development

A search of the literature on PD for adjunct nursing instructors was performed since the primary participants in this research study were nursing adjuncts. The external operating environment of the nursing profession directly influences nursing educators and their training. The most recent evidence suggested a national shortage of nurses that could continue to rise to over 260,000 in the next 15 years (Himmelberg, 2011). Experienced registered nurses are required to teach in nursing programs; therefore, the increasing shortage of staff nurses will also contribute to a shortage of nursing educators. Nursing programs are currently feeling the effects of the nursing educator shortages because the shortages are preventing them from admitting more students due to the lack of faculty (Himmelberg, 2011). Nursing programs are increasing the number of adjunct faculty members to compensate for the shortage of nursing educators, a process that is similarly employed by community colleges in other CTE programs. Adjunct nursing faculty teaching in both bachelor of science in nursing (BSN) and associate degree in nursing (ADN) programs must hold a Master of Science in Nursing (MSN) degree to meet nursing accreditation standards which limits the potential pool of adjunct faculty even further (Friedel, 2012; Shearer, 2008).

Another contributing factor to the shortage of nursing educators is that Master's-prepared nurses can make an average of \$30,000 per year more working as a practitioner compared to a nursing educator (Friedel, 2012).

Like other CTE adjuncts, adjunct nursing faculty typically have little or no formal teaching or classroom preparation so the emphasis on PD is high (Shearer, 2008). Shearer (2008) identified two specific skill sets necessary for the success of adjunct nursing instructors: Clinical nursing expertise and incorporation of effective teaching strategies. If adjunct nursing faculty do not possess these skills, they could be ineffective in instructing students to gain the skills and knowledge necessary to be successful in the nursing field (Shearer).

One of the successful PD activities offered to adjunct nursing faculty is an orientation program at the beginning of each semester (Shearer, 2008). The outcomes of the adjunct nursing orientation sessions are: A shared vision of the mission and goals of the institution/program, collaboration among adjunct and full-time faculty, and opportunities for pedagogical instruction (Shearer). The orientation and support activities provided by an institution allow for the empowerment of adjunct nursing faculty (Himmelberg, 2011).

Another activity that was apparent in the adjunct nursing PD literature is mentoring. The process of mentoring nursing adjunct instructors includes a full-time instructor who helped the adjunct nursing faculty understand the culture and system of the institution while serving as an instructional resource for the adjunct (Himmelberg, 2011). Mentoring is a popular PD activity offered to adjunct nursing faculty because it is a cost-effective activity and the ratio of full-time nursing-to-adjunct nursing faculty supports the mentoring (Cangelosi, Crocker, & Sorrell, 2009).

The Clinical Nurse Educator Academy (CNEA) was the final adjunct nursing PD activity that was explored. The purpose of the CNEA is to prepare clinical nurses to be either full-time or adjunct nursing educators (Cangelosi et al., 2009). The CNEA comprises four days of extensive training and skill development held during the summer months at various locations throughout the United States (Cangelosi et al., 2009). Participants of this academy have described that it is a very effective PD activity, but it requires significant travel, time off work, being away from their families, and money to attend (Cangelosi et al., 2009). The CNEA is an off-campus activity; therefore, the opportunity for adjunct nursing faculty to attend the conference is severely limited. However, further research should be conducted on the specific activities that take place during the academy to determine their effectiveness if incorporated as an on-campus PD activity.

Nursing Adjunct Professional Identity

A mature professional identity has an impact on the nursing profession because it results in increased confidence, acquisition of social capital, and feelings of being valued (Frankland, 2010). The relationship between confidence and identity can lead to purpose and empowerment (Roberts, 2000). The definitions and influences of the factors affecting professional identities were reviewed in the literature. The literature exploring both nursing identity and educator identity and the factors influencing those identities were explored separately. A summary of the findings shows the relationship between nursing identity and adjunct identity.

Foundations of Professional Identity of a Nurse

The literature on nursing identity identified several definitions for the phenomenon of a nurse's professional identity. Öhlén and Segesten (1998) conceptualized the professional identity of a nurse from a theoretical perspective that focused on interaction, growth, and maturity. This qualitative study revealed the professional and personal identities of a nurse are integrated with one another and consist of a subjective and objective component (Öhlén & Segesten). The subjective component was the person's personal experiences as a nurse and the objective component was how other people view the person as a nurse. The future professional growth of a nurse is developed in a socio-historical context through an intersubjective process of socialization, growth, and maturity (Öhlén & Segesten). As a result, nurses can adopt and develop new roles based upon a firm professional identity (Öhlén & Segesten).

King and Ross (2003) conducted a constructivist phenomenological qualitative study that focused on how health care professionals build their identities and relationships. The authors argued that identity issues have not been fully recognized in the past and that failing to address role identity can lead to less effective collaboration in the workplace. The researchers identified professional identity as a phenomenon constructed as an ongoing process where people recreate their identity with every social encounter (King & Ross). The themes that emerged from the interviews included the following: Role erosion, public perceptions, role uncertainty, relationships, and quality of communication. King and Ross indicated that the main implications of their study included providing more multidisciplinary training, professional education, and more education of the public on the nursing profession.

The literature also revealed that part of the professional responsibilities of being a nurse is teaching (Bastable, 2008). Nurses have a primary responsibility of educating patients on their condition, medications, discharge instructions, and follow-up visits. The craft of patient education has changed significantly in the past 20 years to include education on disease prevention and health promotion (Bastable). Because patient education has evolved over the past several decades, registered nurses must be able to adapt that information to patients of different cultures, languages, and willingness to learn (Swartz, 2012). Teaching is not only a part of a nurse's craft; it is also a part of one's professional identity as a nurse.

Factors Influencing Professional Identity

The literature revealed that professional and individual factors influence the professional identity of nurses. The professional factors are explored first. One of the first professional factors is the construction of the nursing student's nurse identity during nursing education (Spouse, 2000). Nurse educators help construct the students' identity of a nurse through mentoring, role modeling, and education (Cook, Gilmer, & Bess, 2003). The construction of student nurses' identities influences what they accept as their professional identity and how they behave in the clinical setting (Day, Field, Campbell, & Reutter, 2005). Professional identity must be formed early and purposely in the students' curriculum to provide a foundation for what a nurse is (Cook et al., 2003).

Deppoliti (2008) stated that relationships provide a contextual dimension to the development of professional identity and are critical for transitioning into practice. A major component of relationship building in the nursing profession is through mentoring

(Himmelberg, 2011). Mentoring allows for the collaboration of a novice nurse with an experienced nurse to develop the skills necessary to be an effective nurse (Cangelosi et al., 2009). As mentioned earlier, mentoring is a common PD activity provided to many adjunct nursing faculty members to get them acclimated to the educator role.

King and Ross (2003) uncovered *role erosion* and *role extension* as coexisting features of practicing nurses' nurse identity. Role erosion occurs when changes in the operating environment (e.g., policy changes, personnel changes, practice changes, etc.) affect the duties of the nurses that influence their identity. Role extension occurs when nurses are required to do things beyond what is typically expected in their role as a nurse. In times of increasing nursing shortages, role extension and erosion are likely to continue to influence nursing identities.

Individual factors also influence nursing professional identity. A nurse's age, ethnicity, family upbringing, and life experiences provide a lens through which nurses identify themselves (Roberts, 2000). Nurses view themselves as unique individuals and the prerequisite for developing their nursing identity is their personal identity (Olthuis, Leget, & Dekkers, 2007). The reasoning behind this approach is that an action performed as a nurse has a direct influence on a person's self-esteem (Olthuis et al., 2007). Gregg and Magilvy (2001) also stated that actions people perform as nurses are ways to integrate the nursing identity into their self-identity.

Gender differences are another individual factor influencing nursing identity. Males and females have a different association of professional identity and may develop and experience professional identity differently (Adams, Hean, Sturgis, & Clark, 2006). The National League for Nursing (NLN, 2009) stated that 94 percent of adjunct nursing faculty

members were female and six percent were male. Gender stereotypes, including feminine and masculine traits, affect intergroup relations wherein the professional identity is created (Adams et al., 2006). Other qualities like communication and power can be directly influenced by gender differences in the socialization process that could affect identity as well (Roberts, 2000).

In summary, the literature on nursing professional identity uncovered several qualitative studies that explored the foundations and the factors influencing this concept. Nurses' professional identity is created through professional training, interpersonal interactions, and self-development. A significant finding that was applied to the design of this study is the information on gender. The idea of gender issues playing into professional identity is interesting because nursing is thought to be a predominantly female profession. The gender influence on professional identity will be considered when selecting the participants for this research study and will be discussed further in the participant selection in Chapter 3.

Professional Identity in Higher Education

The traditional role expectations of a teacher are an important factor in understanding an educator's professional identity. One definition of a *teacher* stated that the identity of a teacher is not a unique identity but that teachers are expected to behave in a professional manner that is prescribed, yet teachers differ in how they are attached to those characteristics (Beijaard, Meijer, & Verloop, 2004). Teaching identity has a significant impact on the teaching practice because it is the foundation for the actions of each teacher. Beijaard et al. (2004) mentioned that professional identity does vary from teacher to teacher. The teaching

profession is comprised of different definitions of professional identity because multiple avenues exist to become an excellent teacher (van Huizen, van Oers, & Wubbels, 2005).

Several articles identified a conceptual model for identifying the professional role of an educator. Beijaard et al. (2004) identified four features of a teacher's professional identity:

- It is a continuous process of interpretation and reinterpretation of experiences.
- Both the personal values and context (e.g., what is expected of a teacher) of a teacher are implied by professional identity.
- Multiple sub-identities of teachers exist.
- Professional development is an important element of a teacher's identity.

Based upon this research, a conceptual model of how a teacher forms a professional identity and how she/he progresses through their professional identity is shown in Figure 2.2 (Beijaard et al., 2004). This model illustrates that identity formation is a process of knowledge formation by a continuous integration of concepts relevant to teaching (Beijaard et al., 2004). Additionally, the model shows that teachers begin their practical knowledge in quadrant one followed by passing into and out of the other three quadrants. For teachers working in higher education, Beijaard et al. (2004) recommend a focus on faculty research and publication to enhance the professional identity of a teacher.

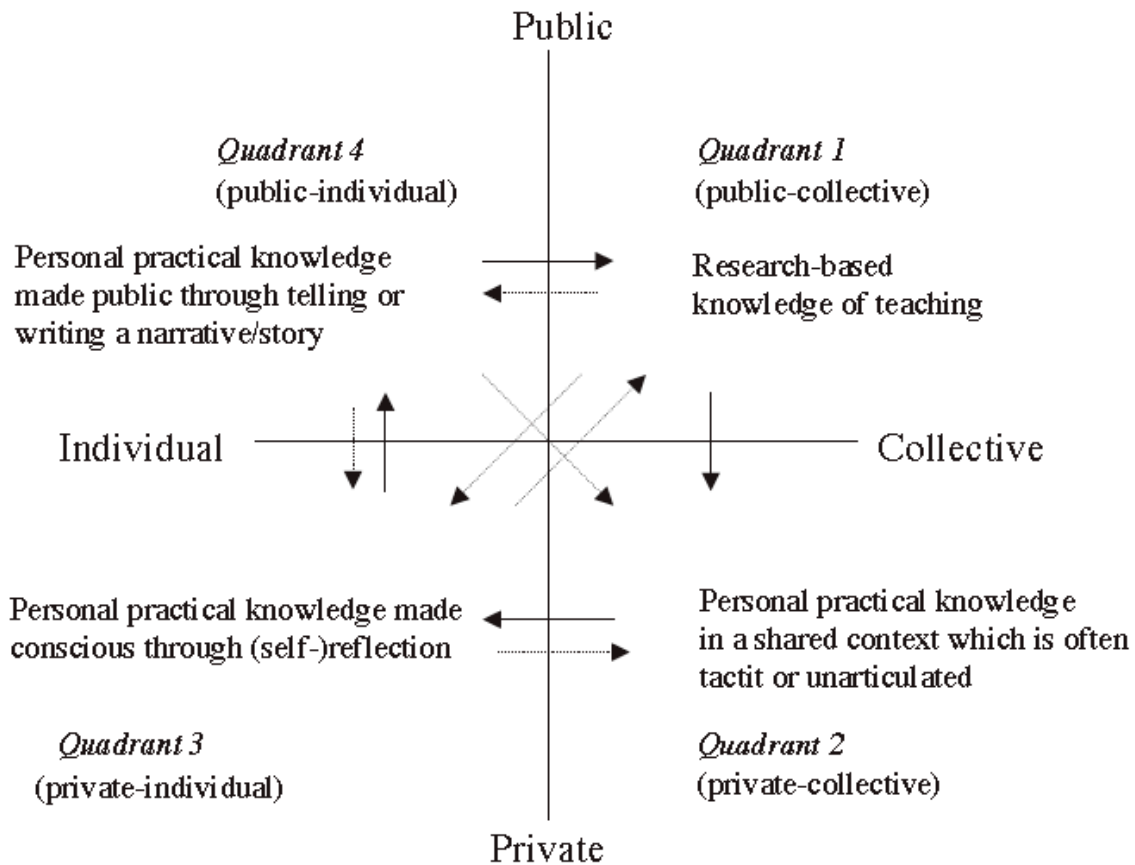


Figure 2.2. Representation of professional identity formation from a teacher's knowledge perspective (Beijaard et al., 2004)

Another conceptual model investigated in a qualitative study by Flores and Day (2006) described the complexity of the evolution of a teacher's professional identity. This model focused on four features: (a) pre-teaching identity; (b) context of teaching; (c) past influences; and (d) reshaped identity. The model suggested that the construction of a teacher's identity needs to focus on the connections between personal history, classroom reflection, support from peers, and continuous PD (Flores & Day).

In summary, the professional identity as a teacher was described with a variety of definitions of teachers because excellent teachers can apply different approaches to their profession. Because of this, a teacher can have multiple sub-identities (discussed in the next

section). Some commonalities that are shared by excellent teachers are the need for reflection, peer support, and PD. Professional development and peer support was also identified in the literature as part of the identity development of a nurse, so commonalities exist between the two professions.

Identity Conflict and Sub-identities

Since the current research study investigated adjunct nursing faculty as having a previous identity as a practicing nurse, it is possible that role conflict and sub-identities were present. Professionals who identify with two or more roles at the same time are likely to have internal conflict that manifests as stress (Colbeck, 2008). The internal conflict requires the person to balance the demands of the roles combined with other external influences (Akkerman & Meijer, 2011).

Identity conflict can occur at the following levels: Personal, community of practice, and professional identity (Denker, 2009). The personal level identity conflict can be that of a parent, spouse, child, coach, and so on. At the community of practice level, a teacher feels the pressures imposed by working at a post-secondary institution, which include tenure requirements, committee assignments, and other expectations of working in the academy. Finally, professional identity conflict can occur during times of career change or promotion within an organization.

The literature addressed how people may cope with the dilemma of having conflicting identities. Liu and Xu (2011) conducted a narrative inquiry study that resulted in what they called Game Theory where the teacher follows the expected practices of the educational institution (i.e., they play the game). Teachers that follow the Game Theory typically get

disconnected and become largely uninterested in teaching and eventually give up (Canrinus, Helms-Lorenz, Beijaard, Buitink, & Hofman, 2011).

A possibly more viable alternative to Game Theory was described as having an identity that is similar to a chameleon (Smith, 2012). Smith called this *flexian*, which is defined as the teacher adapting to the expectations of the role and institution. Adapting to the role rather than just going along with the expectations enables teachers to remain credible and successful because she/he is more true to her/his work. This mechanism allows for a more successful alternative than the Game Theory approach.

The concept of sub-identities is related to identity conflict because multiple identities exist, but does differ from the standpoint where the sub-identities are not antagonistic. For most teachers, sub-identities are ranked in terms of their importance to the person (Beijaard et al., 2004). An interesting finding from the literature on sub-identities is when an individual has an identity that is more central (or core) to the person it is more difficult for the individual to change or lose that identity (Beijaard et al.).

The discovery that a core identity is difficult to change was particularly salient to the current research which investigated how adjunct nursing faculty who have worked as practicing nurses identify themselves. It was assumed that the identity of being a nurse is core to the participants so it is possible that it is difficult for them as adjunct faculty to incorporate the identity of an educator or they could suffer from identity conflict.

Transition and Role Identification

The utilization of expert practitioners in the role of nurse educators has increased in the last decade due to shortages (Janzen, 2010). Nurses choosing to pursue the role of an

educator are challenged to transition from being an expert clinical nurse to an inexperienced educator (Mann, 2013). It is crucial to understand what novice nurse educators need in their educator roles and to support their needs. Several authors have published works related to the transition from clinical nurse to educator.

Anderson (2009) conducted a qualitative study investigating the transition by an expert nurse clinician to a novice academic educator. This study used naturalistic inquiry to guide the 18 semi-structured interviews. Anderson identified six emerging themes, each representing a phase in the transition to the expert educator role:

- Contemplating the change
- Transitioning to the work-role transition
- Feelings of being overwhelmed as an educator
- Adjusting to the role by soliciting feedback
- Identifying and initiating change
- Integrating expertise and striving for excellence

The participants in this study did not follow a linear progression through the six identified phrases; instead, they moved around between phases, sometimes regressing to a previous phase. Anderson (2009) concluded that the participants were living two identities through this process, one as a nurse and the other as an educator. Listening, learning, and feedback from others facilitated the transition process. Finally, Anderson concluded that a disconnect exists between the expectations of novice faculty and the reality of their experience. This was identified as an area that needs to be addressed.

Orientation and mentoring assists in the transition process from clinician to educator (Suplee & Gardner, 2009). Orientation programs need to address the culture of the college,

the faculty role, and program specific needs (Suplee & Gardner). Networking and mentoring needs to focus on academic support and feedback on teaching performance. The outcome of using orientation and mentoring is increased effectiveness in the classroom and clinical teaching, a smoother transition into the role of an educator, and possibly increased productivity (Suplee & Gardner).

Janzen (2010) described the transformation from expert practitioner to a nurse educator as a multidimensional process that reflects the following about the person:

- It is a developmental process that includes goal setting, identity formation, and values.
- The culture, values, and norms of the academe provide a level of influence.
- Skills are acquired as nurse educators learn about students and themselves.

The framework that Janzen used in her study was a model for transitional actualization where the self undergoes a transition followed by role actualization. It is very common for novice nurse educators to pass back and forth in their roles as practitioners and educators until role actualization occurs and they identify as an educator (Janzen).

Forbes and Jessup (2004) conducted a study following an expert registered nurse during the role transition into an inexperienced advanced practice nurse. The findings of this study showed that novices fail to anticipate the feelings that follow growth as they progress through the stages of skill acquisition. The feelings that were identified explained the uncertainty and anxiety the novice nurse that should develop into confidence and certainty as experience is gained. Forbes and Jessup also revealed that expert knowledge does not automatically transfer to a different role with different expectations.

The literature on the transition process and role identification provided useful information about how nurses transition from the role of expert clinician to novice educator. Several support mechanisms were identified in the literature to ease the transition from nurse to educator. Nurses need development (e.g., orientation, mentoring, and education) to build the skills necessary to identify as an educator.

Frameworks for Studying Adjunct Nursing Faculty

Several authors have provided frameworks for studying adjunct nursing faculty. Since this dissertation is a dominant qualitative study, the frameworks for the qualitative data gathering were deeply researched. Deppoliti (2008) and MacIntosh (2003) each used a grounded theory approach to study nursing identities and to create conceptual models.

Deppoliti (2008) explored professional identity development in nurses with three years or less experience. The study focused on exploring the experiences that caused the participants to construct their nursing identity. Deppoliti (p. 258) identified five passage points nurses progress through during their transition into practice: Finding a niche, orientation, the conflict of caring, taking the licensure examination, becoming a charge nurse, and moving on. As a result, three themes were linked to the five passage points: Responsibility, learning and perfection; negotiation for power and authority; and fragmentation/split in nursing.

MacIntosh (2003) also used grounded theory to develop a conceptual model for how nurses experience their development as professionals. MacIntosh identified that reworking the nursing professional identity consisted of three phases with multiple sub-phases:

- Phase one: The nurse lacks insight into personal performance (or other's feedback on performance). In this phase, concentrating on technical tasks without reflection is apparent.
- Phase two: The nurse realizes her/his practice as a nurse and the discrepancies between personal performance in the clinic and what is expected by the practice standards are balanced. This means the nurse is more capable of performing in accordance with the professional standards.
- Phase three: Personal standards of practice are developed and a cycling through engagement of professional activities occurs. Mentoring is a main influencing factor in developing the personal standards of practice.

MacIntosh stated that “expectations, perceived status, and supportiveness” (p. 739) are direct influences on these three phases and are directly linked to education and practice standards of a nurse.

The grounded theory frameworks from MacIntosh and Deppoliti were utilized in the design of the current study to explore the development of the professional identity in adjunct nursing faculty. Although identity theory was the theoretical lens for the qualitative component, both of these frameworks helped to connect the methodology to the theoretical framework. A dominant qualitative approach with a minor quantitative component was used to address the research questions and problem. A detailed account of the methodological approach is presented in Chapter 3.

Morse (1991) described methodological triangulation as an approach to conducting research about the nursing profession. She discussed that the advantages and disadvantages of this approach, which involves the use of at least two methods (usually qualitative and

quantitative) to address the research issue. The methodological triangulation can result in the data being collected either simultaneously or sequentially. The benefit to utilizing methodological triangulation is a comprehensive approach used to investigate the research problem to provide reliable results (Morse). A key point emphasized by Morse was that utilizing the methodological triangulation with a dominant qualitative approach is an inductive process where the theoretical drive is the result of the findings.

Theoretical Framework

Creswell (2009) discussed the use of theory in a mixed methods research design. For the qualitative design, the theory is used inductively to discover an emerging theory or pattern. For the quantitative paradigm, theory is used deductively to test the theory and verify relationships. Identity theory is the theoretical framework that was utilized in this study. Kuchera and Miller (1988) conducted a quantitative study on the effects of the academic job market on adjunct faculty using the identity theory (the main findings of this study are discussed later in this section). Identity theory grows out of social interactionism where people come to know what and who they are, or development of the “self” emerges through interactions with others (Stryker & Serpe, 1980). What this means is that people become objects to themselves through the attachment of symbols that have meanings grown out of those interactions.

One of the central concepts of identity theory is identity salience (Kuchera & Miller, 1988). The more salient an identity is in relation to other identities, the higher in the hierarchy that identity will be. Research has shown that the more salient the identity, the more likely it is that opportunities will be sought to perform the role that underlies the

identity (Stryker & Serpe, 1980). Stryker and Serpe researched identity salience and found that, when it was used in conjunction with other identity theory variables, it was an accurate predictor of performance in the religious role. In the current study, identity theory was used as a predictor of adjunct nursing faculty performance if their adjunct identity was more salient than their staff nurse identity.

Stryker and Serpe (1980) designed their study around three major classes of theoretical variables: Commitment; identity; and role performance. The results showed that commitment was directly and positively related to identity salience and both commitment and identity salience were positively related to the time spent in the role (Stryker & Serpe). This study failed to show a correlation between commitment and performance. Even though the results did not support this relationship, Stryker and Serpe attributed it to failing to measure satisfaction in terms strictly relevant to the theory, and they did not suggest any changes to identity theory as a result.

As mentioned earlier, Kuchera and Miller (1988) used identity theory in a quantitative study on the effects the perceptions of the academic job market had on adjunct faculty. Their study used a 59-item survey that focused on four main areas: Information related to activities as adjunct faculty; issues focusing on their non-college work; housework and child care issues; and demographic variables (Kuchera & Miller). The results of the study revealed that, the more negative the participant's perception of the full-time job market, the less satisfied they were in the adjunct role and the less time they spent on the job (Kuchera & Miller). Kuchera's and Miller's work generally supported identity theory. In this study, it was assumed if the variable of perception of the full-time job market is replaced with perception of PD opportunities, information about identity saliency, job satisfaction and

time spent on the job can be gained and provided to the institutions employing adjuncts. The results of these research studies were utilized to develop the methodology for this study that is described further in Chapter 3.

Summary

This literature review focused on the concepts related to the topic of study for this dissertation providing a foundation to conduct research that is grounded in previous research. The literature provided several conceptual definitions for how nursing identity and teacher identity are formed and affected by PD. Most of the research conducted has focused on full-time faculty members, not adjuncts. This gap in the literature will be the focus of this research project because of the increasing use of adjunct faculty in nursing programs. The core findings of this literature review include the following:

- Adjunct faculty are defined as instructors who teach a class on a limited, or part-time basis, but do not participate in any advising, committee work, or curriculum development.
- Adjunct faculty need pedagogical PD related to lesson plan development, in-class teaching, communication, peer mentoring, and feedback from other instructors.
- Orientation programs and peer mentoring were identified as success factors for adjunct nursing faculty.
- Orientation, education, and mentoring were identified as facilitators as nurses transition from expert clinicians to novice educators.
- Identity salience directly relates to seeking opportunities to better perform in the role.

CHAPTER 3. METHODOLOGY

Overview

The purpose of this study was to investigate the phenomenon of professional development (PD) experiences on adjunct nursing faculty identity saliency to determine their perceptions of commitment, satisfaction, and time spent on the job. Chapter 1 provided an overview of the nature of the problem and purpose of the study. The methodological approach to this study was a dominant-less dominant mixed methods design described by Currall and Towler (2003) and Creswell (2009). With this approach, the dominant method guiding the data collection was a phenomenological qualitative approach utilizing semi-structured interviews and the smaller component was a quantitative survey. The timing of the data collection was concurrent as data from the interviews and surveys were collected at the same time. The concurrent data collection approach is very common in health sciences research (Creswell).

This study investigated the central phenomenon of how PD affects the professional identity in adjunct nursing faculty. Utilizing a dominant-less dominant approach, each research method permitted the study of a different aspect of the phenomenon (Howe, 2008). It is crucial in a mixed methods design to clarify what each research method is investigating (Howe). The qualitative method investigated the lived experiences of the participants' interaction with the phenomenon, and quantitative method measured the phenomenon's effect on specific variables.

Morse (2008) provided a descriptive notation and criteria for selecting the appropriate methodological technique for a mixed methods approach with simultaneous triangulation.

According to Morse, determining if the research problem is primarily addressed by either a qualitative or quantitative approach can be made utilizing the following criteria:

- The problem is immature due to a lack of previous research or lack of theory.
- An available theory may be inaccurate, inappropriate, or incorrect.
- A need to investigate a phenomenon and develop a theory exists.

If these criteria are relevant, the research study is primarily qualitative; whereas, if they are not relevant, the study needs to be primarily quantitative. For this study, all three of the criteria were appropriate for the research problem; therefore, a primarily qualitative methodology was used. Because a dominant qualitative approach was appropriate, the notation used was QUAL+quant (Morse, 2008). This notation implies the qualitative method (QUAL) is the dominant methodology and is conducted simultaneously (+) with the minor quantitative (quant) methodology. The purpose of using the QUAL+quant approach is to enrich the description of the experiences of the participants (Morse).

This research study was situated in the context of higher education and intended to address a current problem faced by many educational institutions. The research participants had a strong background in the nursing profession. It was important to address this in the design of this study because literature from both higher education and nursing was used in the development of the study.

This chapter provides a guide to understand the research design of this study and the contribution of each method in investigating the central phenomenon. The research questions, participants, data collection, analysis, goodness/trustworthiness, and anticipated ethical issues are presented. Because the dominant design is qualitative, the historical

context of the philosophical background of the epistemological and theoretical perspective is also described in this chapter to provide a foundation for the methodological approach.

Research Questions

The central focus of this study was to understand the role PD plays in an adjunct nursing faculty's identity, commitment, satisfaction and time spent in the adjunct role. The following questions were intended to guide the researcher in the collection and analysis of data. The central research question for this study was:

Central RQ 1. How do the experiences provided through pedagogical professional development relate to identity salience among adjunct nursing faculty?

The following qualitative research questions were addressed in this study:

Qualitative 1. How do adjunct nursing faculty describe the role of professional development in their commitment to the role of an educator?

Qualitative 2. What meaning do adjunct nursing faculty gain from participating in professional development that allows them to be more satisfied as educators?

The following quantitative research questions were addressed in this study:

Quantitative 1. What effect does pedagogical professional development have on the identity of adjunct nursing faculty and their commitment, satisfaction, and time spent in that role?

Quantitative 2. What is the relationship between commitment, satisfaction, time in role, and identity salience when controlling for the effects of pedagogical PD?

Methodological Approach

A methodological congruence ensures that the purpose of the study, research questions, and methods are all interrelated (Morse & Richards, 2007). The following section outlines the methodological approach to this study to ensure that all aspects of the study were related and flow dynamically from start to finish. The qualitative methodology is described first, then followed by a description of the quantitative methodology.

Qualitative Approach

This research study incorporated a dominant qualitative approach to help answer the central research question as well as the qualitative questions. Utilizing a qualitative research approach required incorporating specific philosophical assumptions, strategies of inquiry, and data collection, analysis, and interpretation for the topic being researched (Creswell, 2009). The following sections describe the qualitative approach that were used in this study.

Epistemology: Constructivism

The design of the qualitative methods followed the ETMM (epistemology, theoretical perspective, methodology and methods) model described by Crotty (1998). Epistemological and theoretical perspectives need to be evident in all aspects of the design of research project (Jones, Arminio, & Torres, 2006). For this research, constructivism was the epistemological foundation because the adjunct nursing faculty develop knowledge and identity from their experiences of engaging in PD (Crotty, 1998). Using this epistemological foundation, the interplay between the participants and researcher is central to the construction of the participant's life experiences between the participants and the researcher (Crotty).

The main premise of the constructivist philosophical assumption is that humans construct meanings as they engage and interact with the world they are interpreting (Crotty, 1998). The constructivist philosophy is that the world did not hold any meaning before consciousness capable of interpretation existed. Other authors further defined the constructivist approach. A unity must exist between the knowers (ourselves) and the objects or things we come into contact with (Moustakas, 1994). When that unity occurs, knowledge lies in the subjective sources of the knower because it is connected to phenomena of the experience.

A constructivist approach was employed in this study. The adjunct nurses' meaning of their experience with how PD affected their professional identity was investigated under the philosophical assumption that the participants constructed their meaning through the experiences they were interpreting. A theoretical basis was investigated to understand the participants' experiences related to the epistemology.

Theoretical Perspective: Symbolic Interactionism

The constructivist epistemology for this research underlies the theoretical perspective for this research study which is symbolic interactionism (Merriam, 2002). The theoretical lens for this study identified in the literature review was identity theory. Identity theory was developed from symbolic interactionism. Symbolic interactionism's interpretive approach focuses on three premises: Humans act towards things based on the meanings those things have for them; meanings arise out of social interaction; and meanings are created and changed through a process of interpretation (Esterberg, 2002, p. 15).

Using symbolic interactionism as the theoretical perspective assumes the researcher begins the study by selecting a theory or preconceived notion of how the world works (Esterberg, 2002). This perspective requires that the researcher's emphasis needs to be on how the participants construct and interpret social reality. Making meaning of how participants experience the social reality requires that very specific questions be asked: What do the social realities mean; how can they be interpreted; and what assurances exist that the data is quality that can be interpreted to produce reliable results (Esterberg)? The researcher is directed to the aspect of the social person being identified as the "self" as the key conceptual variable in the explanation of social behavior (Stryker & Serpe, 1980, p. 199).

Identity theory grew out of social interactionism because it builds upon the assumptions, definitions, and propositions of it (Stryker & Serpe, 1980). Stryker and Serpe summarized how the social interactionism framework led to the evolution of identity theory:

- Behavior is dependent on a world that is classified with names and those names carry physical and social meaning.
- When terms are learned through interaction, positions are the symbols used for designation of behavioral expectations and roles.
- People that act in the context of specific behavioral patterns invoke expectations in relation to other people's behavior and apply names to the others.
- People also apply names to themselves creating the "self" image where expectations of their own behavior are created.
- When someone enters a situation, the participant defines it by applying a name to the situation that results in a definition by which their own behavior is organized.

- Behavior is a product of the role-making process that was initiated by the defining situations.
- The social structure determines if a role is “made” or “played” by a participant (p. 205).
- When roles are made rather than played, changes can occur in the character of definitions that can lead to changes in the larger social structure where the interaction takes place.

Symbolic interactionism and identity theory are closely related and they were the theoretical lenses through which the qualitative paradigm of this study was designed and carried out. The results of the qualitative methods of this study were generalized to include the broader theory of symbolic interactionism and identity theory.

Methodology: Phenomenology

The essence of this research study was to understand the meaning of the interaction of the participants with PD and how they constructed their identity as a result of participating. Phenomenology was the methodology chosen (Creswell, 2013) because it allowed participant entry into the conceptual world to uncover their everyday experiences with PD (Merriam, 2002). The data gathering for this phenomenological methodology was through semi-structured interviews and field observations of the interview participants (Merriam).

The origins of phenomenology are rooted in transcendental philosophy where all objects of knowledge must conform to experience (Moustakas, 1994). The subjective sources (self, imagination, and apperception) of the self are where the knowledge of an object resides (Moustakas). Since experience and knowledge are linked to the phenomena, a unity

must exist between the knowers (ourselves) and the objects that appear in the surrounding world.

Using a constructivist epistemology does not take into account how a person's cultural heritage can pre-empt the task of meaning-making which contradicts the definition of constructivism (Crotty, 1998). Phenomenology invites us to take into account how heritage makes meaning by allowing us to “engage with the phenomena in our world to make sense of them directly and immediately” (Crotty, p. 79). Due to the previous knowledge people possess, those experiences have to be bracketed to give people the opportunity to experience the phenomena without inhibition.

In phenomenological research, the researcher has a clear and defined role. Moustakas (1994) describes the main responsibilities of the researcher:

- Avoid making suppositions.
- Find a specific topic to focus on with a fresh, naïve approach.
- Construct the research problem and questions to guide the study.
- Produce findings that provide a foundation for reflection and future research.

Of critical importance is the ability of the researcher to bring a neutral or unbiased approach to the study. Phenomenology is intended to gain an understanding of the participant's experience with a phenomenon and the researcher utilizes *epoché*, or abstaining from bringing any of presuppositions, biases, or preconceptions into the study (Moustakas, 1994).

The measures in place to maintain the researcher's neutrality are described in further detail in the positionality section of this chapter.

Analyzing phenomenological data consists of reviewing the interview transcripts to identify significant statements made by the participants (Creswell, 2013). These significant

statements provided an understanding of the participants' experiences with the phenomenon. After the significant statements were identified, they were used to write a description of what the participants experienced that Creswell (2013) called either *imaginative variation* or *structural description*. After the imaginative variation or structural description is developed, the researcher makes a composite of that information to present the "essence" of the phenomenon (Creswell).

The remainder of this chapter describes the research methods in place that investigated the phenomenon of PD affecting adjunct nursing educator's professional identity.

Methods Qualitative

The researcher completed human subjects training and received Institutional Research Board (IRB) approval prior to conducting the study (see Appendix A). To address the central and qualitative research questions, semi-structured interviews and field notes were collected on adjunct nursing faculty members. The selection criteria for the participants are listed in the next section. A semi-structured interview was chosen because this approach allowed the participants the ability to express their opinions with their own words and allowed the researcher flexibility to ask questions based upon the answers of the participants (Esterberg, 2002). The interview guide, shown in Appendix B.1, was developed using the approach described by Esterberg (2002), Moustakas (1994), and Seidman (2006).

Moustakas (1994) stated that participants in a phenomenological research study should be asked two broad questions:

- What are your experiences in relation to the phenomenon?

- What situations have influenced your experiences with the phenomenon?

Additional open-ended questions may be added to the interview guide, but these two questions are central to understanding the participants' experiences with the phenomenon. Two related qualitative studies investigating nursing identity were used in constructing the interview guide. As mentioned in Chapter 2, MacIntosh (2003) investigated how nurses experience their development as professionals, and Deppoliti (2008) studied professional identity development in nurses with less than three years of experience. Permission from both researchers to utilize their interview guide in the construction of the interview guide for this study was obtained (Appendix B.2).

For phenomenological interviews, Seidman (2006) recommended researchers need to conduct three separate interviews with each participant. The first interview is intended to focus on the life history of the participant. The second interview involves the participant recounting the details of the experience with the phenomenon. The final interview requires the participants to reflect on the meaning of the experience.

Although much consideration was given to the three-interview approach, it was determined that for this research study it was not feasible to conduct three interviews with the participants. The participants were working both as a nurse and an adjunct, therefore the schedules of the participants was considered in the design of the interview. As a result, a two-interview approach will be utilized. The first interview gathered the background/demographic information and the participants' experience with the phenomenon. The second interview asked the participants to reflect on the meaning of their experience. Seidman (2006) stated that the researcher needs to space each interview from three days to

one week apart. During the first interview, the participant and the researcher agreed upon the date of the second interview that fell in the timeframe that Siedman recommended.

In addition to the interviews, field notes were compiled during the interviews. Field notes provide a record of the observations made on the participants during the interview (Esterberg, 2002). The field notes were analyzed in conjunction with the interview transcripts. That process is described in detail later in this chapter.

Participants

Purposive sampling was used to select the participants for the qualitative component of the study. Polkinghorne (1989) recommended that between 5 and 25 participants should be included in a phenomenological study. As a result of this recommendation, interviews were conducted with 10 participants for this study. If the 10 participants did not provide data saturation to produce good and trustworthy results, additional participants would be included.

To determine the participant sample, previous research on adjunct nursing was consulted. The research conducted by (Anderson, 2009) used purposive, maximum variation sampling based upon the following demographics: (a) educational preparation as a clinical nurse specialist or nurse practitioner; (b) first or second year of teaching full-time; (c) no formal teaching experience; (d) no academic preparation as an educator; and (e) recognition as an expert with at least five years of clinical practice as a registered nurse.

For this research study, the criteria for purposive selection used by Anderson (2009) were modified and the requirement of being a full-time teacher was replaced with adjunct teacher. One additional criterion was added: Participation in at least one pedagogical PD course within the last twelve months.

Although the gender of the participants was not mentioned in Anderson's study, it does need consideration in this study. According to the National League for Nursing (NLN, 2009), 94% of adjunct nursing faculty members were female and 6% were male. Since the gender gap is significant between males and females, for the semi-structured interviews males were excluded from the selection criteria. The rationale behind excluding males was that, since 10 interviews were being conducted, inclusion of one male participant would not be representative of the current demographics in the adjunct nursing profession. In addition to not be representative of the demographics in nursing workforce, males might have different identity salience compared to females based upon the gender differences identified in the literature review (Adams et al., 2006). As a result, for the interviews the experiences of only female adjunct nurses were considered. It is suggested that future research can be conducted on the identity salience of male adjunct nursing faculty.

All participants of this study were recruited from an institution participating in the American Health Sciences Education Consortium (AHSEC) or a two-year community or technical college. The AHSEC group was formed in 1998 with the mission to advance quality hospital and healthcare system related health sciences and nursing education in the United States (AHSEC, 2014). Twenty-seven institutions are members of the AHSEC group. Each ASHEC institution was researched through the Integrated Postsecondary Education Data System (IPEDS) database to ensure similarities among the institutions. A summary of the IPEDS analysis is shown in Table 3.1. The criteria for institutions to participate in the AHSEC group are they must be educational institutions that have a direct affiliation to a

Table 3.1 Characteristics of the AHSEC institutions

Institution Name	Carnegie Classification	Student Enrollment, Fall 2012	Total number of faculty, Fall 2012	Number of adjunct faculty, Fall 2012
Allen College	Other; health professional schools (OHPS)	543	74	34
Aultman College of Nursing and Health Sciences	Associate's; Private not-for-profit	343	19	3
Baptist Memorial College of Health Sciences	Private, not-for-profit	1,043	63	2
Bellin College	OHPS	271	27	9
Bryan LGH College of Health Sciences	OHPS	714	79	34
Cabarrus College of Health Sciences	OHPS	499	63	12
Carolinas College of Health Sciences	Associate's; Public special use	440	47	17
Clarkson College	OHPS	1,204	68	17
Cox College	OHPS	849	66	3
Florida Hospital College of Health Sciences	Private, not-for-profit	2,293	67	154
Good Samaritan College of Nursing and Health Sciences	Associate's; private not-for-profit	335	36	10
Indiana University Health	Public, not-for-profit	n/a	n/a	89
Jefferson College of Health Sciences	OHPS	1,048	171	74
Kettering College	OHPS	980	53	3
Mercy College of Health Sciences	OHPS	846	122	68
Mercy College of Northwest Ohio	OHPS	1,205	187	114
Methodist College	OHPS	528	58	25
Mount Carmel College of Nursing	OHPS	1,056	78	31
Nebraska Methodist College	OHPS	878	61	10
Our Lady of the Lake College	OHPS	1,748	135	82
Resurrection University	OHPS	473	22	3
Saint Anthony College of Nursing	OHPS	311	29	20
Saint Francis Medical Center College of Nursing	OHPS	638	62	23
Southeast Missouri Hospital College of Nursing and Health Sciences	Associate's; private not-for-profit	207	22	2
St. Luke's College	Associate's; private not-for-profit	203	43	21
St. Vincent's College	Associate's; private not-for-profit	824	82	69
Trinity College of Nursing and Health Sciences	OHPS	232	20	3

hospital or healthcare system. The researcher had a direct affiliation with a participating AHSEC institution therefore to avoid a conflict of interest, participants from that institution were excluded from the study.

In addition to the AHSEC institutions, two-year community and/or technical colleges were included to recruit participants for this study. Approximately two-thirds of the faculty at public community colleges across the United States are adjunct (Wallin, 2007). The large percentage of adjuncts employed by the two-year colleges provided access to a large number of participants. All the public community colleges contacted for this study were from the Midwestern United States including the following states: Illinois, Iowa, Kansas, Kentucky, Minnesota, Missouri, Nebraska, South Dakota, and Wisconsin.

An email was sent to all nursing program directors or adjunct coordinators working at the identified institutions to identify possible participants (Appendix D.1). Dr. Jerry Durham, Vice-President of the ASHEC organization, provided the PD coordinators' contact information to the researcher for the ASHEC institutions. The publically available state board of nursing website for each state previously identified provided the name and contact information for the community/technical colleges.

Participants for the interviews were contacted based upon the order in which they are returned to the researcher. The first 15 qualified interview candidates were contacted via email with interviews being setup with the first ten respondents and the remainders being placed on an alternate list. The email that was sent the interview participants is shown in Appendix D.2. Twelve interviews were scheduled with only ten interviews taking place after two participants declined to participate.

Each interview participant was provided with an information sheet prior to her participation in this study (Appendix D.4). This information sheet explained the participant's rights related to participating in this study. The privacy and confidentiality of each participant was protected at all times. All participants had the ability to end their participation in the study at any time. Each participant had the option to contact the researcher with any questions prior to, or after participating.

Data Collection

Since the design of this study was a dominant-less dominant approach, both the qualitative and quantitative data were obtained simultaneously in this study. Due to the physical distance between the researcher and the pool of participants, the interviews were conducted electronically either via telephone or video conferencing (e.g., Skype®). Video conferencing was the preferred method for conducting the interview so the researcher could look for visual clues and non-verbal communication. If the participant did not have access to the appropriate technology to perform video conferencing, a telephone interview was conducted. The audio for each interview was recorded for transcription purposes. The interview participants were required to acknowledge information related to the study and their rights and responsibilities of being a participant that was emailed to them prior to the interview (Appendix D.4).

Conducting interviews utilizing information and communication technologies (e.g. Skype®) is an emergent method, so a widely accepted critique of this method does not currently exist (Salmons, 2012). An E-Interview research framework (Figure 3.1) that

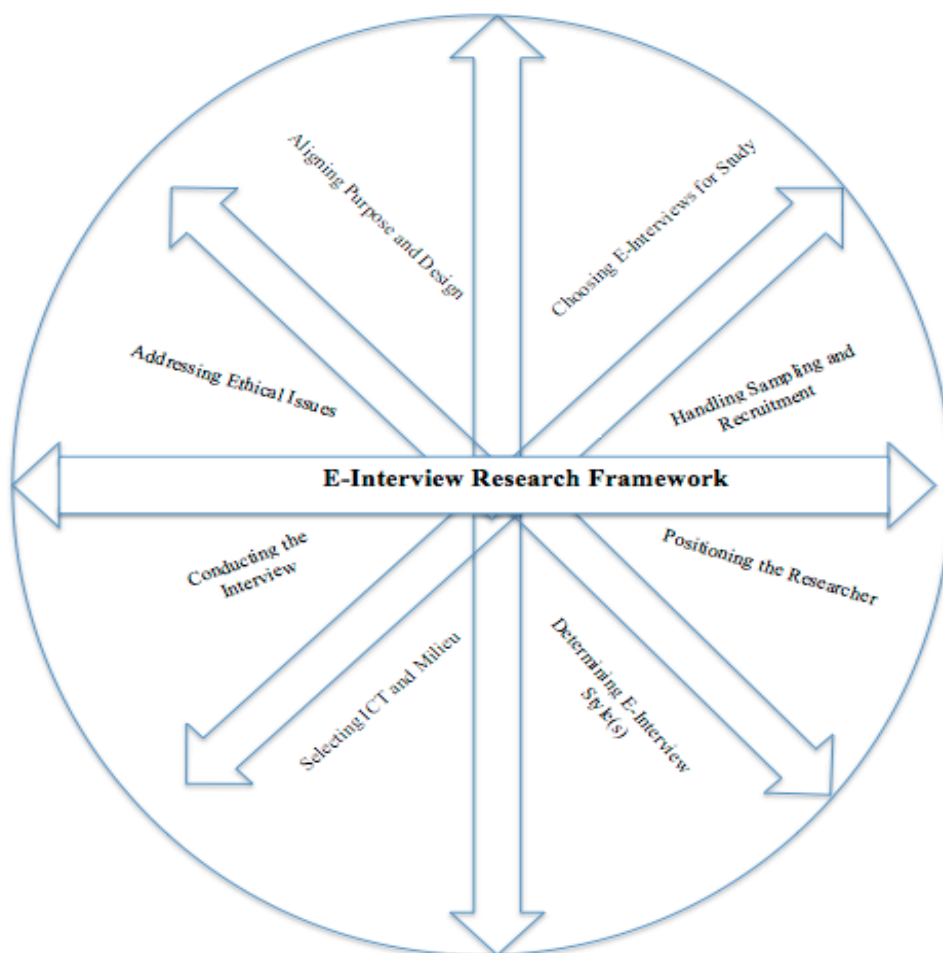


Figure 3.1. E-Interview research framework (Salmons, 2012)

contains eight categories of key questions to be considered by the researcher was used in the design of this study (Salmons, 2012).

The E-Interview framework is similar to those utilized for traditional face-to-face interviews except it involves determining the technology used to conduct the research. Salmons (2012) stated that the technology intelligence quotient of the participants does need to be considered when conducting electronic interviews. If the participant is not comfortable utilizing a videoconferencing technology, it could distract them from answering the interview questions. This was addressed by asking the participant at the beginning of the interview

how comfortable they are conducting the interview via videoconference. Accommodations were made for participants not comfortable with electronic interviews by selecting a different delivery method (i.e., telephone).

Data Analysis

For the qualitative component, the data analysis occurred in tandem with the collection of the data. The audio recordings were transcribed after each interview was completed. Each recording was transcribed within 72 hours of the interview. The method of collecting and analyzing the information simultaneously allowed for the emerging themes and categories to become apparent throughout the collection process. The analysis of the transcripts followed a very prescriptive analysis. Miles, Huberman, and Saldana (2014) provided the foundation of the qualitative data analysis of this study that included first and second cycle coding and displaying the data.

After the transcribing is complete, hard copies of each interview were created for the coding and analysis process. The coding for this project was divided into two major stages: First cycle and second cycle coding. First cycle results in assigning codes to chunks of data (Miles et al., 2014). First cycle coding has three elemental methods that provided the foundation of the analysis: Descriptive methods; in vivo methods; and process coding (Miles et al.).

Descriptive coding uses a word or short phrase as a summary label for the data contained in the transcription. This allowed for creating an inventory of the major topics that can be indexed and categorized during subsequent transcription analysis (Miles et al., 2014). In vivo coding utilizes words and phrases in the participant's own language as codes. This

type of coding allows for the use of indigenous terms of the participant's culture or subculture (Miles et al.). If multiple participants use similar phrases repeatedly it indicates patterns and regularities in the data. Process coding uses gerunds to describe actions intertwined with the dynamic of time (Miles et al.). Process coding was especially useful in extracting participant action and the resulting consequences of those actions.

For this research study, these three elemental methods of coding were applied to the data for the first cycle of analysis after each interview is transcribed. Applying the first cycle of coding immediately after the transcription is complete allowed for the data to be developed while it was still fresh in the researcher's mind. This process of analyzing the data concurrently with the data collection allows the researcher to be aware of emerging themes from the voices of the participants as future interviews are being conducted (Miles et al., 2014).

After all of the interviews were completed, transcribed, and analyzed utilizing first cycle coding, second cycle coding was applied to the data. Second cycle coding utilized the broad segments identified during the first cycle coding and summarized them into smaller categories and themes called pattern codes (Miles et al., 2014). The pattern codes are explanatory and ultimately identify the emerging themes, configurations or explanations from the data. The pattern coding results in four interrelated summarizers (Miles et al., 2014): (a) categories or themes; (b) causes/explanations; (c) relationships among people; and (d) theoretical constructs. Since this study was a phenomenological study to understand how the participants' experiences with PD affected their professional identity, utilizing the recurring phrases from the in vivo coding was crucial because they represented the participants' own words.

After the pattern codes were developed, they were mapped to visually display the data for analytic analysis. The data were applied to a matrix display to allow for a condensed array of the data for reflection, verification, and drawing conclusions (Miles et al., 2014). By placing the data in a matrix display, the most salient findings from the data were apparent in a concise, organized manner. The matrix did not contain any quotes or content-heavy responses; rather it will contain short statements and themes.

Because the methodology of this research project was phenomenology, specific data analysis related to this methodology needs to be considered. The significant statements and themes that emerged from the first and second cycle coding needed to be written up as a description of the context that influenced how the participants experienced the phenomenon (Creswell, 2013). A very significant consideration of the data analysis is the concept of *epoché* where the researcher sets aside any personal experiences to permit a fresh perspective of the phenomenon being researched (Moustakas, 1994). The researcher's experiences are bracketed as described in the positionality section later in this chapter. By bracketing personal experiences, the researcher investigated the phenomenon as the participants have experienced it.

After all of the qualitative data were transcribed, coded, and analyzed for emerging themes, they were merged together to produce a contextual description of how the phenomenology was experienced. This written narrative ends with the reader having a better understanding of the essential, invariant structure of the experience that recognizes a single unifying meaning (Creswell, 2013). The narrative containing the rich and thick description of the participants' experiences is provided in Chapter 4.

Design Issues

A certain level of goodness and trustworthiness needs to be inherent in a qualitative study so the results have a scholarly level of quality. This study incorporated several measures to address the anticipated criticism of the design. Creswell (2013) provided a detailed model for validating and evaluating qualitative research studies. The main premise behind evaluating a qualitative study entails the researcher having a deep understanding of the research topic through multiple external sources and self-reflection that is documented in the written findings. The following sections provide a description of the steps taken to ensure the accuracy of the study. Creswell (2013) calls these “validation strategies” (p. 250).

Goodness

Merriam (2002) described the goodness of a qualitative study as ensuring the results of the study are consistent with the data collected. An issue with achieving goodness in a qualitative study is uncovering the meaning experience with multiple participants. Because every participant has different knowledge, experiences, and interpretations, it was challenging for the researcher to gather consistent and uniform data that can be accurately interpreted.

For this study, the goodness of the interviews was achieved by selecting participants from multiple locations. The participants were interviewed on two separate occasions utilizing a semi-structured approach. The delivery of the questions was consistent among the participants although additional questions were asked if the responses lacked consistency or additional information was needed. Merriam (2002) provided additional strategies for

achieving a good study that are described in detail in the following sections:

Trustworthiness, triangulation, and generalizability.

Trustworthiness

Several authors defined trustworthiness in qualitative research. Creswell (2013) described trustworthiness as validating the research study to assess the accuracy of the findings. Lincoln and Guba (1985) defined trustworthiness as the researcher being able to convince audiences that the findings of the study are worth paying attention to or incorporate into their practice. Several techniques were incorporated into this study to ensure the results are trustworthy. Four self-reflective questions were followed throughout the data gathering, interpretation, and reporting of the results as the basis for the trustworthiness (Lincoln & Guba, 1985):

- (Truth value): How can confidence in the truth of the findings be established?
- (Applicability): What can be done to determine how the findings can be applied to other contexts or settings?
- (Consistency): What can be done to ensure the findings can be replicated if the study was repeated with similar participants in a similar context?
- (Neutrality): How can it be established that the participants determine the findings and the biases, motivations, and perspective of the researcher is excluded?

These questions helped guide the design of this study and are apparent in the data analysis and conclusions of the study.

Another measure used to ensure the trustworthiness of the study was spending prolonged time in the field with the participants and the data gathered. By spending adequate

time in the field with the participants in their setting, an in-depth understanding of the phenomenon is created (Creswell, 2009). Having this in-depth understanding lead to a higher level of accuracy and validity in the results of the study. For this study, the researcher spent prolonged time with each interview participant and extended time reading and listening to the interview transcripts.

The final measure used to create a trustworthy study is the use of triangulation. An in-depth description of the triangulation methods is described in the next section of this chapter.

Triangulation

Triangulation refers to the use of multiple and different sources, methods, investigators, and theories to provide evidence that supports the data gathered (Creswell, 2013). For this research study several methods were incorporated in the triangulation process: (a) member checks; (b) peer review and debriefing; (c) rich, thick descriptions; (d) clarifying researcher bias; and (e) multiple sources of data.

Member checks were implemented in this study for each interview performed. Member checks consisted of sending a copy of the transcribed interview back to the interview participant for verification the document contains authentic information that are in the words of the participant (Merriam, 2002). At the conclusion of each interview, the participants were notified that they were receiving a copy via electronic mail of the transcription of their interview within seven days of its conclusion. Each participant received a transcript for each interview they completed. Each participant had the right to change their

response, omit data, or completely opt out of the study. The participant was instructed to notify the researcher via electronic mail of any changes she wished to be made.

The next type of triangulation to be used in this study was peer review and debriefing. Lincoln and Guba (1985) defined that peer reviewers keep the researcher honest and ask thought provoking questions about the methods, meaning, and interpretation of the data. For this study, a committee of faculty mentors served as peer reviewers to provide guidance and feedback through all aspects of the study. These faculty members comprise the researcher's Program of Study (POS) Committee. Before the data collection occurred, the POS Committee analyzed the proposal and made recommendations and suggestions to improve the study. Peer reviews are a form of an external validity that can contribute to a degree of generalizability of the findings (Creswell, 2013).

Rich descriptions are used in the final report from the data recorded from the qualitative interviews. This technique allows the readers of the results to be transported to the setting of the research and conveys shared experiences in the discussion (Creswell, 2009). Using rich descriptions allow the results to be more realistic and can add to the validity of the findings (Creswell, 2009). For this study, detailed description of the participants' stories and the settings they occurred in are apparent in reporting the final results.

Another aspect of triangulation used in this study was addressing the bias of the researcher in the results. In qualitative research, the researcher is an instrument in the collection and reporting of rich, thick data (Creswell, 2013; Xu & Storr, 2012). Because the human element was involved during the data collection of the interviews, a possibility of researcher bias exists. Merriam (2002, p. 26) stated that researchers needed to explain their "position vis-à-vis" the topic being researched which is commonly referred to as reflexivity.

By clarifying the researcher's position, the reader can better understand how the researcher reached the conclusion in their research. The positionality of the researcher is described in detail later in this chapter.

The final use of triangulation in this study was utilizing multiple sources of data. In this dominant-less dominant study, the data collection was via semi-structured interviews, field notes, and a survey. All of the sources of data will be analyzed to build a coherent justification of the themes and findings (Creswell, 2009). Establishing the results based upon multiple data sources added to the goodness and trustworthiness of the study.

In summary, incorporating multiple triangulation techniques from the beginning of this study addressed the design issues inherent with a dominant qualitative study. All of the measures discussed were intended to make this study accurate, authentic, and credible. The techniques discussed were apparent during the collection and analysis of the data, and discussion of the findings.

Generalizability

Generalization in qualitative research is typically very limited because it is not intended to generalize findings outside of the participants being researched (Creswell, 2009). Utilizing a small, purposive sample is not the same as quantitative generalization (Merriam, 2002). Lincoln and Guba (1985) offered the following advice for anyone wishing to generalize a qualitative finding to a similar context: "The responsibility of the original investigator ends in providing sufficient descriptive data to make such similarity judgments possible" (p. 298). Utilizing the triangulation methods described earlier does provide a basis

for the sufficient descriptive data needed for the readers to make a determination if the findings can be transferred.

Kvale and Brinkmann (2009) provided some guidelines for producing generalizable findings from interview studies. They provided three forms of generalization from using interviews: Naturalistic generalization; statistical generalization; and analytical generalization. Naturalistic generalization is dependent on personal experience and is developed for the person as the function of the experience (Kvale & Brinkmann). For statistical generalization to be applicable, the interview participants need to be selected at random, therefore it was not appropriate for this study. Finally, analytical generalization is where a reasonable judgment is made by taking the results of one study to be used as a guide to what could occur in a different situation (Kvale & Brinkmann).

Analytical generalization is based upon the similarities and differences between the two situations derived from assertational logic. This type of generalization is drawn from an interview regardless of the sampling and mode of analysis (Kvale & Brinkmann, 2009). The foundation of analytical generalization is the generation of rich and thick contextual descriptions of the findings that include the researcher's argumentation for the transferability of the findings to other subjects and situations (Kvale & Brinkmann).

Even though this study was a dominant qualitative study, it did incorporate a quantitative survey distributed to a larger sample than the interview participants. Utilizing a quantitative instrument in this study allowed for a larger degree of generalization to other populations than does the qualitative information by itself. If the research questions in this study are adequately supported by the data, the results can be applied to other populations of

adjunct faculty at other institutions like community colleges and other public institutions. The quantitative methods are described in the next section.

Quantitative Approach

In addition to the dominant qualitative methods, a quantitative survey was utilized in this study. The quantitative data was used to supplement the qualitative interviews by providing a measure of triangulation lending to the overall goodness and trustworthiness of the study. The following sections describe the quantitative methods used in this study.

Methods

An online survey was delivered concurrently with the qualitative methods to a selected sample of adjunct nursing faculty. Conducting online surveys offers distinct advantages for reaching the target sample than traditional paper and pencil surveys (Sue & Ritter, 2007; Tourangeau, 2013). The rationale for conducting a survey is to gather information about how PD affects adjunct identity from a larger sample than would have been possible from conducting individual interviews. Since adjunct faculty typically do not spend extended periods of time on campus, the advantage of using a survey is that it allowed the participants the flexibility to complete the survey at their own convenience. Another advantage was the survey provided quicker turnaround time over conducting individual interviews. Information from Creswell (2009), Sue and Ritter (2007), and Tourangeau (2013) was used in the development of the survey method plan. The survey instrument, shown in Appendix C.1, was designed based upon the literature on this topic. The questions in the survey were developed to address the variables identified in the Statement of Problem section in Chapter 1.

The survey instrument was designed from reviewing previous literature related to this topic to ensure the validity and reliability of the instrument. Two quantitative studies incorporated survey instruments in their investigation of identity theory and adjunct faculty. Stryker and Serpe (1980) designed their study around three major classes of theoretical variables: Commitment; identity; and role performance. Permission from the authors was sought to utilize their survey questions, but they did not respond to mailed and electronic requests. To meet the purpose of this research study, the survey questions from Stryker and Serpe's study were modified to specifically address adjunct nursing faculty members.

Kuchera and Miller (1988) used identity theory in a quantitative study on the effects of the perceptions of the academic job market had on adjunct faculty. This study used a 59 item survey that focused on four main areas: Information related to activities as adjunct faculty; issues focusing on their non-college work; housework and child care issues; and demographic variables. Attempts were made to contact the authors for permission to use sections from their survey for this dissertation but both had retired from their academic positions and did not reply to mailed inquiries.

Kelly (2006) conducted a quantitative study using role theory as her framework to investigate clinical faculty in baccalaureate nursing programs. This study showed that nurses teaching in a clinical role identified that development related to study concepts and areas of educational content were supportive (Kelly). The author developed the *Clinical Faculty Role Questionnaire* (CFRQ), which was a 64-question survey to assess the dimensions of the clinical faculty role. This survey contained a section on how PD affected clinical teaching. Permission from the author was obtained to utilize questions from the CFRQ (Appendix

C.2). Several questions from the CFRQ were relevant to this research study and are identified in the survey instrument in Appendix C.1.

Another section of the survey for this study was constructed from a title containing validated scales for organizational research (Fields, 2002). A chapter of this book addressed quantitative survey tools related to job roles and job ambiguity. Several survey questions from this book were related to answering the research questions of this study.

The survey developed for this study is called the *Adjunct Faculty Identity Salience Survey* (AFISS). The survey was divided into seven different categories: Demographic information; commitment questions; salience questions; job satisfaction questions; factors affecting adjunct identities; professional development; and role ambiguity (time spent on the job). The survey was directly used to answer research question 4 and 5 and provided supportive data for the interviews that answered the central research question.

Population

The target population for this study was adjunct nursing faculty members teaching nursing students while concurrently working as a practicing nurse. The sample of participants was purposely limited to adjunct nurse instructors working at ASHSEC institutions or two-year community/technical colleges offering nursing programs. Another advantage of recruiting participants from the ASHEC institutions and community colleges was that those institutions have extensive nursing and health sciences programs so it helped reduce the possibility the participants were adjunct teaching in classes or programs outside of nursing.

The participants were recruited by electronically contacting the adjunct faculty coordinators from the selected institutions (Appendix D.1). Unlike the interview participants, male participants were included in the survey since it is inclusive of a larger population. Each participant was contacted electronically and provided information about the study (Appendix D.3). Similar to the interview participants, the confidentiality and privacy of the survey participants was protected at all times. Each participant could end their participation in the study at any time and could contact the researcher with any questions prior to, or after participating.

To achieve a high survey response rate, Dillman's (2009) guide for online survey implementation that was followed for this study. Dillman provided five recommendations for maximizing the survey response rate among participants. Three of the five recommendations were implemented for this study: (1) Respondent-friendly survey instrument; (2) Making four contacts with each participant; and (3) Personalization of correspondence.

The AFISS was designed to be respondent-friendly for all of the participants. The survey was constructed to be visually comprehensive for easy question response. Each participant was sent a pre-notification correspondence, the correspondence containing access to the survey, a reminder correspondence two-to-four weeks after the initial survey, and a thank you correspondence to everyone that completed the survey. Finally, each correspondence was personalized by addressing the participant by name (if it was made available to the researcher).

Data Collection

The quantitative survey was delivered electronically via email to all identified participants. The delivery tool used was Qualtrics through Iowa State University. Utilizing Qualtrics provided a secure delivery method to help ensure the protection of the participants and the data. The survey participants were required to acknowledge information related to the study and their rights and responsibilities of being a participant shown at the beginning of the survey (Appendix D.5). Utilizing the Qualtrics software ensured that participants could only take the survey once per email address it was delivered to. This prevented the possibility of ballot inflation by the same participant taking the survey multiple times (Sue & Ritter, 2007).

Another advantage of utilizing Qualtrics was the system sent notification emails to the participants that had not completed the survey. The literature on online surveys was vague in terms of how long to keep the online survey open to gather responses. Tourangeau (2013) stated to keep the survey open for only the time necessary to gather the desired response rates. Dillman (2009) recommended that the survey should be available to participants for at least 8 weeks with correspondences sent to the participants at specific intervals. As a result the survey was open for approximately three months (October 1 through December 19). The cut-off date of December 19 was the end of the fall semester, a date when the fall contracts of the adjuncts expired. The survey was not open past December 19 because of the possibility of losing participants due to the conclusion of their fall contract.

Strategies to increase survey participation were described by Dillman (2009), Sue and Ritter (2007), and Tourangeau (2013). Reminder emails to participants can increase participation rates by 25 percent versus not sending a follow-up (Sue & Ritter, 2007). The

optimal time to send a follow-up reminder email to the participants is one week after the survey is launched with the optimal time of day to send the email is between 7:30 and 8:30 a.m. or between 3:30 and 4:30 p.m (Sue & Ritter, 2007). The four recommended correspondences previously described by Dillman were incorporated into this study. Surveys not completed by the deadline were included in the final data analysis with any missing data omitted.

Instrumentation

Quantitative data was collected through delivery of the 68 item AFISS. The survey was developed by the researcher after an extensive review of the literature on previous research conducted on this topic. The survey was comprised of 67 closed ended items and one open ended question. The demographic questions did not lead to the use of a single format. A combination of dichotomous, multiple answer, and free text questions was used. With the exception of two items in the survey, all of the items related to variables being measured are a Likert-type multiple-choice response with the participant only able to select a single answer. Two items measuring identity salience require the participant to rank the answers in terms of their importance.

The survey was designed to measure salience, commitment, satisfaction, and time in role. Kuchera (1987) provided definitions that each variable measure:

- *Salience*: A hierarchal arrangement of work role from most important to least important. Survey questions 7 and 8, and 34 through 53 gathered information to determine the participants' perception of what identity is most salient to them.

Questions 7 and 8 require the participants to rank order their answers in terms of what

identity is most salient to them. Questions 34 through 42 measured salience on a Likert scale of 1 to 4 from strongly disagree to strongly agree with an option of selecting “does not apply” that is excluded as a coded variable. Questions 47 through 53 measured salience on a Likert scale of 1 to 4 from not helpful to extremely helpful with an option of selecting “does not apply” that is excluded as a coded variable.

- *Commitment*: The importance of interactions with other adjuncts, full-time faculty, and the students. Questions 1 through 6 measured commitment on a Likert scale of 1 to 4 from strongly disagree to strongly agree with an option of selecting “does not apply” that is excluded as a coded variable.
- *Satisfaction*: The importance that salary, benefits, office space, and participation in non-academic college activities. Questions 9 through 33 measured satisfaction on a Likert scale of 1 to 4 from strongly disagree to strongly agree with an option of selecting “does not apply” that is excluded as a coded variable. The satisfaction questions were asked twice with the participants asked to respond to their satisfaction as adjunct nurse faculty and their satisfaction as a nurse.
- *Time spent in role*: The number of courses taught, contact hours, course preparation time, and office hours. Questions 54 through 67 measured time spent in role on a Likert scale of 1 to 4 from strongly disagree to strongly agree with an option of selecting “does not apply” that is excluded as a coded variable.
- Question 68 is an open-ended question that allowed the participants to share their experiences as how identity salience was influenced by professional development.

Although the survey was constructed by combining sections of several validated surveys from the literature, the original validity and reliability did hold true for the new

instrument (Creswell, 2009). As a result, the validity and reliability needed to be tested for the AFISS. Several authors provided recommendations for the procedures necessary to ensure the validity and reliability of inferences made from instrument data (Creswell, 2009; Taylor, 2013; Traub, 1994).

Validity

For survey research conducted in the social sciences, the results need to produce meaningful and useful inferences from the answers recorded by the participants (Creswell, 2009). To ensure the results contribute to the body of knowledge to the field being studied, the instrument needed to be valid and reliable. The instrument validity for this study was established through content validity, face validity, and construct validity (Taylor, 2013).

Content validity evaluates the appropriateness of the survey instrument, content, and format to ensure the survey instrument measures what it intends to (Taylor, 2013). Because the AFISS instrument was developed using several validated instruments, a single survey addressing all of the items contained in the AFISS was not found in the literature. Since a comparison to a single existing survey was not possible, an alternative content validity measure was needed.

To establish the content validity, an expert panel of external reviewers evaluated the survey instrument to ensure it is measuring the content it is intended to measure. Dr. Ruth Kelly, a nursing researcher who developed the Clinical Faculty Role Questionnaire, and Dr. Jackie Meyer, a nursing researcher who developed the Survey of Part-time Baccalaureate Clinical Nursing Faculty, evaluated the instrument used for this study. The expert panel

determined that the AFISS is the best fit to measure the identity salience, commitment, satisfaction, and time spent in the role.

Face validity was used to determine if each question reflects what it is intended to measure (Bryman, 2012). To establish face validity, the AFISS was pilot tested by a group of adjunct nursing faculty and feedback was solicited. The feedback obtained from the pilot test group was used to ensure the questions were formatted properly and the wording was not confusing. The AFISS was sent to pilot test group of 30 adjuncts randomly selected from the participant list described in the next section of the study. A total of 10 responses were recorded. As a result of the pilot test several grammatical changes were made to the AFISS prior to the research proposal approval by the researcher's POS Committee. The participants of the pilot test group were excluded from participating in the final survey for this study.

Finally, construct validity was established for the AFISS. Construct validity is where a hypothesis from a relevant theory is applied to the instrument and tested against the theoretical model (Bryman, 2012). For this study, identity theory is the theoretical model being used that states the more salient a professional identity is to a person, the more dedicated they are to fulfilling that role. To establish a construct validity, the hypothesis to be tested is nursing adjuncts that participate in pedagogical PD will identify salience as an educator and be more satisfied, committed, and spend more time in their role as an adjunct. If the hypothesis is supported by the data gathered from the instrument, the construct validity is established. If the results reject the hypothesis, either the theory or the deductions made might be misguided, or the instrument is an invalid measure of the concept (Bryman, 2012).

Reliability

Traub (1994) and Creswell (2009) defined reliability as the consistency of a measure or a concept. To establish reliability, the stability of the participants' answers do not fluctuate over time (Bryman, 2012). To establish stability, a test-retest correlation was performed (Creswell, 2009). The pilot test participants were asked to retake the AFISS approximately five to seven days after it is originally completed. The responses from the original test and the second retest were correlated to evaluate the stability of the answers. A total of 6 participants retook the AFISS and the results were evaluated utilizing SPSS.

Another component of developing reliability is ensuring that there is consistency in the administration of the survey and the scoring of the results (Creswell, 2009). Delivering the survey to all of the participants at the exact same time and exporting the raw scores into SPSS for analysis achieved this.

Data Analysis

The data analysis of the quantitative survey occurred at the conclusion of the data gathering. The survey results were loaded in the Statistical Packages for the Social Sciences (SPSS ®) software Version 22, for analysis. Professional development was treated as the independent variable and commitment, satisfaction, time spent in the role, and identity salience are the dependent variables. Several statistical analyses were performed on the data. Creswell (2009) provided the criteria for selecting the statistical tests to be run on the data. A group comparison is needed between the independent and dependent variables with the scores being continuous (a Likert Scale is used in the survey instrument). If the results were normally distributed, a t-test, analysis of variance, analysis of covariance, and correlations

were performed. Descriptive statistics were generated from the survey to provide additional data to supplement the qualitative data. Cross tabulations were performed to investigate the relationship between several variables and two groups of interest, the participants that identified their salient identity as a nurse and those that identified their salient identity as an adjunct.

The quantitative analysis followed the theoretical model developed by Kuchera and Miller (1988) described in Chapter 1. Their model used path analysis/structural equation modeling to determine the relationship between the opportunity structure, commitment, satisfaction, identity salience, and time spent in the role. For this study, the original model from Kuchera and Miller was modified to replace opportunity structure with professional development. The updated model is reflective of the relationship between the independent and dependent variables for analysis (Figure 3.2). The inclusion of this updated model is to provide a visual representation of the relationship between the variables. This study is not intended to test a new model, rather the model is used for visual representation of the variables. In addition to the statistical tests previously mentioned, a bivariate correlation among composite variables was performed to analyze the relationships between the independent variable and the dependent variables.

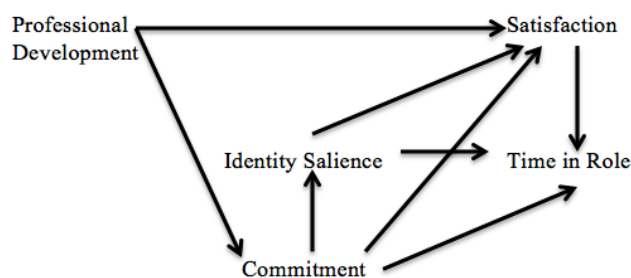


Figure 3.2. Relationship among independent and dependent variables

Exploratory factor analysis

Exploratory factor analysis (EFA) is a statistical method used to identify the factor structure for a set of variables (Stevens, 2009). An EFA was used in this study to determine how many factors exist for each composite variable as well as the factor loading patterns for the measured variables. Stevens (2009) stated that performing an EFA is “more of a theory-generating than a theory-testing procedure” (p. 345).

Kuchera and Miller’s updated model for the adjunct role with the variables to be analyzed is shown in Figure 3.3. In this diagram, the variables were replaced with coefficients (e.g., professional development corresponds with X_1). This diagram shows the linkage between the relationships of the variables. An EFA was performed to produce composite variables to perform correlations between the variables shown in Table 3.2.

In the updated model for the adjunct role, a direct relationship between PD and identity salience is not recognized. To measure the relationship between PD and identity salience, the correlation coefficients of the two connecting variables via the intervening variables is performed. In this study, the effect of X_1 on X_4 via X_2 was calculated by

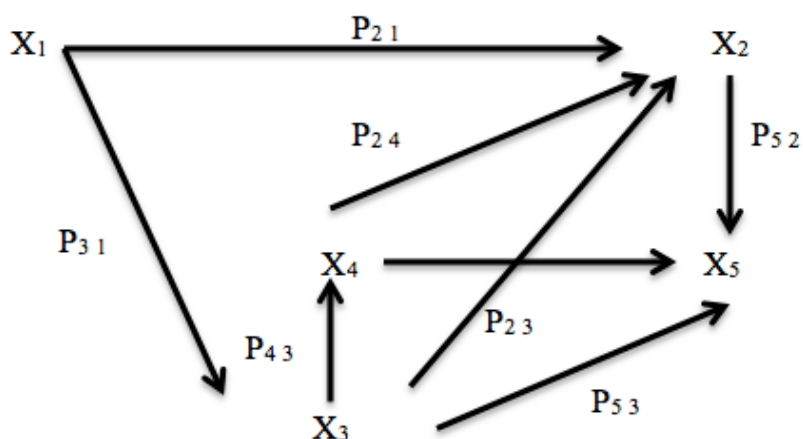


Figure 3.3. Composite variable correlation coefficients map

Table 3.2. Correlation matrix of composite variables

	Professional Development (X ₁)	Satisfaction (X ₂)	Commitment (X ₃)	Identity Saliency (X ₄)	Time in Role (X ₅)
Professional Development (X ₁)		P ₂₁	P ₃₁		
Satisfaction (X ₂)					P ₅₂
Commitment (X ₃)		P ₂₃		P ₄₃	P ₅₃
Identity Saliency (X ₄)		P ₂₄			
Time in Role (X ₅)					

multiplying (P₂₁) by (P₂₄) and the effect of X₁ on X₄ via X₃ was calculated by multiplying (P₃₁) by (P₄₃).

To perform the analysis for the coefficients map shown in Figure 3.3, SPSS was used to generate the value scores through EFA. Olobatuyi (2006) provided a detailed protocol for performing this analysis using SPSS. This protocol was used to generate the correlation of composite variable results. All results of the statistical analysis of the AFISS are presented in Chapter 4.

Ethical Issues

Conducting research using human subject participants needed to include considerations of the ethical issues of the research project. Miles et al. (2014) stated that qualitative research projects need to be evaluated by the researcher for the following ethical situations: Worthiness of the project; competence of the research team; informed consent; costs and benefits; harm and risk; honesty and trust; privacy, confidentiality, and anonymity;

and use and misuse of the results. This research study followed the ethical evaluation described by (Miles et al.).

The research topic of investigating how PD affects adjunct nursing faculty identity was a study worth the time and energy to conduct. The research topic and the results can provide a significant contribution to the body of knowledge in the nursing and education fields. Because this topic provides a positive contribution to the field, all resources dedicated by the researcher, participants, and other stakeholders are considered worthwhile.

The researcher completed all the necessary course and institutional requirements to be admitted to candidate status for the degree of doctor of philosophy. The courses taken to achieve that status provided the educational foundation to conduct sound and ethical research. In addition to the coursework, human subjects protection training has been completed. The researcher formed a committee of five faculty members at Iowa State University to serve as mentors on this study. The researcher had the knowledge and resources in place to competently conduct this research study.

Information regarding the study was given to each participant (both for the survey and the interviews) before data were collected. The benefits and risks of participation were explained and each participant had the opportunity to print and retain an information sheet. The information sheet contained a description and purpose of the study as well as contact information if the participant had any questions.

The risks associated with this study were particularly minimal. The participants were asked about how they constructed their professional identity after participating in PD. The biggest risk associated with this study was the possibility of having an emotional association with a personal interaction or an event that could have helped shape that identity. It was not

the intent of this study to have the participants recall any emotional trauma associated with their professional identity. The benefits of participating were that the participant's experiences contributed to a better understanding of the phenomenon of how PD affected their identity.

Participation in research study was completely voluntary and would not have an effect on the status of any adjunct faculty member at the institution where they work. To protect the participant's rights, all information was kept confidential and secure. All participants were 18 years of age or older at the time of the research. The survey did not collect any identifiable information and the results were compiled into an SPSS file on a password-protected computer. Once the results were exported into SPSS, the original data containing the participants' email addresses were destroyed. The interview participants were given the option to end the interview at any time they choose and they had the ability to member-check their data to ensure they were accurately represented.

The researcher conducted the research with honesty and integrity. The participants were selected based upon pre-determined selection criteria and participants were not excluded based upon a personal choice from the researcher. The interviews were recorded, transcribed, and sent back to the participants in order to allow for member checks. The voices of the participants were not modified in any way. The integrity of the data and analysis were previously described in the goodness and trustworthiness of the study.

This research project required Iowa State's Institutional Review Board approval that was obtained prior to data collection (Appendix 1). All guidelines and requirements of the Iowa State IRB were followed throughout the duration of the data collection, analysis, interpretation, and reporting of the results.

Positionality

The positionality of the researcher is crucial to ensure the goodness and trustworthiness of the data. My career journey started in a hospital-based health science program. After graduation, I spent eight years working full-time as a healthcare practitioner providing direct patient care. After working as a practitioner for several years, I pursued an opportunity to start a career as an educator in a healthcare educational program at a hospital-affiliated college. As a full-time faculty member working in higher education, I have many experiences with PD. I have been working full-time as an educator for the past six years and, during that time, I began to realize that my identity had shifted away from being a practitioner to an educator. Even though I have experience working and teaching in healthcare, I am not a nurse.

Although my experiences are from a full-time faculty perspective, I have never worked as an adjunct instructor so I do not have an understanding of how adjuncts are affected. Over the last several years my institution has hired several adjunct faculty, including adjuncts to teach in the educational program of which I am the director, so I do work directly with adjunct instructors. Because of my personal experiences, I am biased in my thinking about how a PD program affects professional identity. Before beginning the research, it was important to understand that my position on PD needs might not be the same as those of adjunct faculty.

I have had a variety of experiences with PD throughout my career as an educator. Being enrolled in a Ph.D. program is a PD activity that has tremendously shaped my professional identity. It is important to understand that my experiences can be drastically different than the participants of this study. The PD activities of an adjunct faculty might not

be the same as what I experienced as a full-time faculty member and may have had a different effect on professional identity.

It is also important to identify my insider/outsider positionality in this study. Several authors define *insider positionality* as the stance of a researcher who shares her or his participant's ethnicity, race, gender, socioeconomic status, career, or place of employment (Asselin, 2003; Mercer, 2007; Rubin, 2012; C. West, Stewart, Foster, & Usher, 2013). Researchers having an *insider positionality* are called native researchers, indigenous researchers, or practitioner researchers (Kanuha, 2000; Moore, 2012; Workman, 2007). Essentially, the researcher shares some aspect or trait of the participants in the topic being researched. Since the researcher shares many of the traits of the participants, the differences between the two are not seemingly obvious. This can be both an advantage and a disadvantage to the research process and is addressed later in this paper. Usually insider positionality is synonymous with ethnographies, but being an insider can extend to other methodologies and qualitative settings.

Conversely, *outsider positionality* is the researcher's stance when gender, socioeconomic, and/or ethnicity are different from the participants' (Mullings, 1999; Rubin, 2012; C. West et al., 2013). Outsider positionality has also been referred to as "objective" research (Chavez, 2008, p. 474). Researchers having an outsider position are often thought to have neutral insights with no preconceptions or vested interests in their research. Acker (2001) used the term external-outsider to describe a researcher from a different community than their participants.

For this research study, I considered myself to have an outsider positionality. The study participants were adjunct faculty and nurses. I have not experienced working as an

adjunct and my background is not in nursing. The study participants came from outside of my institution that further distances my positionality. Having an outsider positionality provided a more objective perspective to the research and allow me to maintain neutrality that further contributes to the accuracy of the study.

Because of my experiences, it was important to recognize how crucial it is to ensure the authenticity of the participants' voices during the data collection and analysis. As mentioned earlier, several steps were implemented to ensure that the data gathered were authentic and trustworthy. Triangulation, bracketing, member checks, and peer debriefings were utilized to deemphasize any of the bias that I bring into this study.

Delimitations

Several delimitations of this study were identified and considered prior to its implementation. Adjunct nursing educators concurrently working as practicing nurses and who had received pedagogical PD were selected as participants. Adjunct nursing educators that were only teaching, adjuncts nurses that had not participated in PD, and other health profession adjuncts were purposely excluded from this study. The rationale behind the purposive selection of the participants is to have participants with similar education, work experience, and PD opportunities.

Another delimitation of this study included the institutions from where the participants are employed. The participants were selected from a participating American Health Sciences Education Consortium (AHSEC) school or two-year community/technical colleges. It was more likely that adjuncts working at an AHSEC institution or a two-year community/technical college would also be employed as a practicing nurse at the healthcare

facility. This institution selection criterion does not include any four-year private or public institutions.

Limitations

The limitations of the study were carefully analyzed at the conclusion of this study. One of the main limitations of the qualitative methods of the study were the findings would not be generalized to a larger population because the number of cases was gathered through purposive sampling. Even though the sample size was appropriate for the study, it may not be a true representation of all adjunct nursing educators concurrently working as staff nurses.

Another limitation to this study was the participants were from different institutions; therefore, the quality and types of the pedagogical PD delivered might not be consistent between sites. Even though PD is part of the central phenomenon affecting professional identity, the actual quality of the individual PD programs was not being explored. Another limitation was the participants' location in relation to the researcher. It was anticipated that the participants worked in various locations of the country that would preclude the researcher from meeting face-to-face with the participants. To overcome the geographic distance, electronic video conferencing (e.g., Skype ®) was used as the communication medium.

Performing Skpye ® interviews resulted in the researcher not having direct contact with the participants. This limited the amount of interpersonal interaction and subtle non-verbal cues from the participant may have been missed. Several steps were implemented to overcome this limitation and were discussed in this chapter in the data collection technique section. Another limitation of the qualitative component was the use of semi-structured interviews as the main data collection instrument. Interviews are subject to the participant's

recollection of their experiences and their willingness to share the intimate details of their experiences.

The quantitative survey does have limitations as well. The survey was distributed to 467 participants during early October. October traditionally is mid-term in nursing programs and completing the survey might not have been a priority, thus producing a lower rate of return. Another limitation of the study was the possibility of survey fatigue. If the participants have received other surveys in the same time frame of this survey they might not have chosen to participate.

Obtaining access to adjunct nursing faculty was a limitation to the quantitative methods. A total of 167 institutions were invited to provide access to their adjunct nursing faculty. A total of 34 institutions provided access (20%). As a result, the AFISS was delivered to only 467 adjunct nursing faculty with 101 completing the survey (21.6%). The overall number of responses and response rate was lower than anticipated. As a result of the small sample size, proposed statistical testing using Path analysis/structural equation modeling was not performed. The number of responses received favored the use of an exploratory factor analysis and composite variable correlations over testing the model theory.

Summary

The purpose of this study was to understand how adjunct nursing faculty incorporated PD experiences into creating their professional identity that influences their perceptions of commitment, satisfaction, and willingness to time spent on the job. To address the problem statement and research questions, a dominant-less dominant approach was used that consisted primarily of qualitative semi-structured interviews with a minor quantitative survey. For the

qualitative methods of this study, identity theory and symbolic interactionism were the theoretical lens by which the study was conducted. Kuchera's and Miller's (1988) model for the adjunct role was used as the theoretical framework for the survey.

This study was designed based upon relevant literature from both the higher education and nursing professions. The data gathering instruments were extensively evaluated to ensure the data collected was accurate and authentic. The design also carefully considered the ethical concerns with performing research on human subjects and incorporated several safeguards to protect the confidentiality and safety of the participants. The findings of this study are discussed in Chapter 4.

CHAPTER 4. RESULTS AND ANALYSIS

Qualitative Results

The results of this dominant-less dominant study are presented separately by presenting the results of the qualitative methods (dominant) first, followed by the quantitative methods (minor). The methodology of the qualitative methods was a phenomenological approach to understand the essence the role pedagogical professional development (PD) played in adjunct nursing faculty member's identity salience. The participants were extensively interviewed and they were allowed to share stories of how their professional identity was shaped by experiencing PD related to their adjunct role. The qualitative methods were guided by the central research question, as well as two specific qualitative questions:

Central RQ 1. How do the experiences provided through pedagogical professional development relate to identity salience among adjunct nursing faculty?

The following qualitative research questions were addressed in this study:

Qualitative 1. How do adjunct nursing faculty describe the role of professional development in their commitment to the role of an educator?

Qualitative 2. What meaning do adjunct nursing faculty gain from participating in professional development that allows them to be more satisfied as educators?

The following sections of this chapter present the findings of the interviews with the narratives of each participant, the emerging themes from the data coding, and how the information related to the research questions that guided the study.

Participants

Qualitative data were obtained from semi-structured interviews with 10 adjunct nurse educators. The participants were selected via purposive sampling criteria to ensure that each participant had previously (or is currently) worked as a nurse, was currently working as an adjunct nurse instructor, and had participated in pedagogical PD. Each participant was selected from a participating American Health Sciences Education Consortium (AHSEC) institution or a Midwest 2-year community or technical college. Each participant was from a different institution that provided a diversity of pedagogical PD experience.

Individual Narratives

The following narratives describe the individual voices of each interview participant. The purpose of presenting a detailed narrative of each participant is to provide a context for the data gathered during the interviews and to provide rich details of each encounter. To ensure the goodness and trustworthiness of the data, member checks were performed on the data and each participant approved the following data. To protect the confidentiality of each participant, pseudonyms were used. Each participant was given the option to select their own pseudonym, and if they declined, the researcher assigned one.

Jennifer

As a child growing up, Jennifer's career ambitions started with a desire to become a teacher. She came from a very supportive family that did not push her in a specific career direction:

When I was a child, I wanted to be a teacher like my father. My family was very supportive of anything I wanted to do for a career so that helped me out a lot. I actually did a lot of things [career-wise] before I decided to go on to

nursing school so when I finally decided to go to nursing school they said 'well, we think that is what you should have done from the beginning.'

Jennifer described some of her role models growing up and two of the biggest influences on her were her grandmother and a great aunt. Jennifer's grandmother encouraged her to make her own choices and figure out what she wanted to do for herself. Her great aunt had a career as a nurse, which probably did have an influence on her career, even if it was not immediately realized. Jennifer went on to describe how her life experience played in her career path that eventually led to nursing.

I was in the military and my military experiences defined who I was and gave me the confidence to be able to do whatever I decided in my mind that I wanted to do. Eventually from my military experience, even though I wasn't a nurse yet, I worked next to the emergency department and people that came in [for the emergency department] would come to my office for help and I didn't know what to do. I did not like that feeling so I thought, 'hey, I am going to learn what to do.'

I think that I always knew that I wanted to help people, but I didn't know exactly what capacity or what direction that would be. It took me a while to actually gain the confidence to know that I would be good at nursing. I was getting ready to end my military career and I was getting ready to move back home. It was then that I decided that I wanted to become a nurse and when I went back home that is what prompted me to go back to school.

After Jennifer enrolled in a nursing program after finishing her military career, she described the first moment that she truly felt like a nurse was at her graduation from nursing school. She shared all of the trials and tribulations of nursing education with a very special group of classmates and it did not hit her until they were at the graduation ceremony that she was a nurse and was ready to go out and make a difference in peoples' lives.

Jennifer went on to describe the people that had a positive influence on her that helped shape her identity as a nurse. She again mentioned that her great aunt who worked as a nurse was employed by the state. The influence Jennifer's aunt had was through her

description of all of the opportunities available for nurses after graduation. The director of the nursing program Jennifer attended was another major influence on her.

The most direct impact [on shaping my identity as a nurse] would be my director of nursing. She directly showed me what being a nurse is. When I think of a nurse, I think of her picture.

Jennifer's identity as a nurse was affected by another life experience that started out as a tragic event.

A family friend had gotten into a car accident and came into the emergency room and I was working that night. Out of that accident, the [friend] ended up being okay and I was able to see them live out a productive life. I think that really defined me as a nurse because [I realized] I have the ability to make a difference in peoples' lives and I can make positive changes.

Next, Jennifer described what her personal definition of professionalism is. She said that being professional is all about seeing different points of view and not always agreeing with those sides. However, for her to be professional she understands that the different points of view exist and she needs to determine how to work best with people that have different viewpoints.

After discussing her childhood ambitions and how her education shaped her nursing identity, the conversation changed to a discussion of how she viewed herself as a nurse as a new graduate from nursing school and how she feels about herself now.

When I first graduated from nursing school and started my first job, I was scared to death, very timid, and afraid to make a mistake. I think this came from a combination of my nursing education and something internal in me that I needed to prove myself. I knew that the stakes of being responsible for peoples' lives and the mistakes that could be made are very high and I respected that.

Today, although I am still very conscientious about making mistakes, I am much more verbal and confident. I am more aware of the need for advocating for the patients and their families whether it is to a doctor or someone else. I try to be very compassionate to my patients.

After discussing Jennifer's nursing background, she began to describe herself as a nurse educator. Jennifer's experiences as a staff nurse prompted her to consider a career as a nurse educator. With her role as a nurse, Jennifer had a responsibility of training new nurses at her job. She liked the feeling of satisfaction that came from watching new nurses become acclimated with their new surroundings. Jennifer tried to work with the new nurses by utilizing a calm and reassuring demeanor that resulted in positive feedback. It was at this point that Jennifer seriously considered taking a role as a nurse educator to work with nursing students. She saw a position posted for an adjunct nurse educator position, applied for it, and got the job. In her time working as an adjunct, working with students has had an impact on her professional role.

The biggest thing on me has been the impact that you [an educator] can have on so many different people. As a nurse, yeah, you have an impact on your patients but as an adjunct instructor you have an impact on the student nurses that are going to graduate. They [the student nurses] are going to impact other people so it is almost like a domino effect on how many people you are going to impact positively.

The college where Jennifer works offers professional development meetings at the college during every quarter. At those quarterly meetings, the college provided Jennifer and the other adjuncts at least an hour-and-a-half of discussion related to teacher improvement. Jennifer described that the most relevant concept that she gained by attending the meetings is that it alleviates the sense of being alone while working as an adjunct.

The thing that I took most out of those meetings is that as adjuncts, we are not alone and you are not out on an island. The people at the meeting are there for you to reach out to and network with if you want to improve or change things related to your position. Attending these meetings helps with my confidence and it helps deal with difficult students. It has had a huge impact on me and that is why I continue to stay on as an adjunct with the college that I am currently working for because you are not alone there.

If I didn't have those types of sessions and I wasn't able to know that I had the support to help me trouble-shoot problems that arise, I probably would not teach. Before I started, I anticipated all of the good things about teaching but I didn't anticipate the trouble students because in my mind, a nursing student is somebody that wants to be there. It is hard sometimes to see somebody that doesn't fit that role.

Jennifer described how important her quarterly meetings are to her in terms of helping to shape her identity as an adjunct. One of the most important aspects to her is being able to collaborate with other adjuncts and full-time instructors working at her college.

I think that the camaraderie of the educational team has helped shape my identity as an educator. A lot of times as an adjunct professor, the students will come and complain about their other professors that they have daily. Those quarterly meetings give you an opportunity to get to know those people so you can honestly defend them or rightfully talk to the student about [their professors].

Because Jennifer's colleagues are important to her in terms of developing her identity, she described the most important people that she has met through her adjunct role. She identified the students she teaches as the most important people she associates with her adjunct role because of the impact or the positive potential that they can have on society. Because of her strong bond with the students, Jennifer described how witnessing students becoming successful made her feel.

It is the best feeling in the world to see a student succeed. To see them, especially if they struggled a little bit, overcome and be successful and good at their practice is just an amazing feeling. I am not even sure if I can really describe it.

Additionally, Jennifer described what it was like to watch students struggle and the effect that has on her in terms of her role as an educator.

Well, if they struggle and then eventually get it that is one of the best feelings. But if they struggle and then are ultimately unsuccessful, that wears you down as a teacher. It makes you feel responsible for their failure and wonder if

there are things that you could have done to help them improve or teach differently to help them be successful.

Even though Jennifer mentioned the students as the most important people that she has met through her work as an adjunct instructor, she did describe her relationships with the other colleagues at the college. Jennifer estimated that she had met over one hundred different people associated with the college (does not include students) in her role as an adjunct. Of all of those people, she said that she has not developed any close, personal friendships with any of them. If she did not return to her position as an adjunct, it is highly unlikely that she would maintain any personal contact with any of the people at the college.

Jennifer was given a scenario where she was meeting someone for the first time and could only tell that person one thing about what she does for her career: *“I would start by introducing myself and telling them my name and I would simply tell them that I help people.”*

She went on to clarify that as a nurse, she helps people when they are sick and in their worst situation. She really tries to send them out in a better or improved situation. As an instructor, the students come in to the nursing program and do not know very much about the profession and she can help them transition to where they are actually in a better position when they graduate.

A second scenario was presented to Jennifer where she was searching for a job and was offered a job as an adjunct and a job as a part-time nurse. With all factors being help equal, Jennifer described her thought process as to which position she would accept.

I would accept the adjunct nurse position because as an adjunct instructor I can do all of the things I could do as a staff nurse. You also have the student component with it. I can insert IVs with the students and do everything that I would as a staff nurse with the students.

Jennifer described she is very satisfied in her role as an adjunct instructor and that satisfaction depends on success. Particularly, the success of the students drives her satisfaction as an adjunct instructor. If the pass rate on the national certification exam is lower for a particular cohort or if they struggle in the classroom, she is not satisfied. Jennifer identified another measure of her success as the students' desire to learn. If the students do not demonstrate a willingness to learn, it causes her to be dissatisfied.

Jennifer did have personal goals that she set for herself before starting her role as an adjunct nursing instructor. Her primary goal was to give each student the opportunity to improve themselves regardless of their background or what brought them to the nursing program. Being very fair and non-judgmental was the goal that Jennifer strived to achieve because all students have the potential to be successful and she wanted to make sure they had the opportunity to prove themselves. Overall, she stated that she meets her goal about 80% of the time, but some classes or cohorts of students really make her question if being an adjunct instructor is meaningful and making a difference in the nursing program.

Jennifer shared a few final comments at the conclusion of the interview. She felt that colleges should do more to make adjuncts feel important and the best way to do that would be to acknowledge the adjuncts and emphasizes their role is just as important as the full-time professors. Having adjunct recognition would substantially improve her satisfaction as an adjunct. Ultimately though, Jennifer said she has to keep reminding herself that she is working as an adjunct instructor for the students.

Jayne

Jayne had an aspiration to become a nurse ever since her childhood. Her first memory of the nursing profession came from seeing commercials on television about nursing in the Peace Corps. Those advertisements gave her the impression that nursing was a very honorable profession. As a result, Jayne began an educational journey that eventually led to her career as a nurse.

I was the first person from my family that even went to college. I started as a medical assistant and gradually worked my way up to keep going back to school to be a nurse. I started off with an associate's degree and continued on and eventually got my master's in nursing.

Jayne did not recall any defining moments in her life that triggered her desire to become a nurse. She recalled a strong desire to enter the nursing profession from a very early age and no experiences she encountered changed that desire.

Along her journey, Jayne had several role models and a strong support system for encouragement. Jayne was very quick to mention that she had numerous teachers through grade school and high school who had a positive influence on her. Jayne also mentioned that her parents were very supportive of her career choice but did not push her down any specific route.

Jayne went on to describe the journey through her nursing education. After high school she enrolled in a one-year medical assistant program and worked at a physician's office for several years. During those early years, Jayne discovered she wanted more than just working in an office and that strengthened her desire to return to school and become a registered nurse. This desire continued to push her to continuing her education and eventually earning a Master's in Nursing degree.

When relating the path through her nursing education, Jayne recalled the experiences that framed her sense of being a nurse. The stories that she shared revolved around some challenging clinical experiences that had a profound effect on her early nursing identity.

At the beginning of my nursing school experience, I had some rather difficult clinical situations. I started out at the county hospital and I also had patients at the VA hospital and then I was at the military base. I had some really unique clinical opportunities and a lot of my colleagues didn't make it through the initial phases.

Just walking into the county hospital, there was an environment and an odor. I kind of thought going through that whole process they were trying to weed people out because several people quit after the first few rotations. I think even making through those rotations and the things that happened to me in clinicals and being able to work through that made me feel like this is the right career path and I can do this!

Eventually, Jayne ended up spending about 20 years as a labor and delivery nurse and that every day of that experience provided her with very positive memories of being a nurse. Being able to watch babies come into the world and taking care of people at the happiest times in their lives is the best memory Jayne had of being a nurse.

Jayne described that people react very positively when she tells them that she is a nurse. She stated that nursing has been the number one profession in the world for several years according to the Gallup Poll. Because people react positively to nurses, Jayne also believes that most people ask nurses questions out in public that they wouldn't ordinarily ask non-nurses.

Because Jayne mentioned that nursing had been ranked as the number one profession in the world, she was asked to describe what her definition of being a professional was.

Being a professional means that you have expertise in your field and there are a variety of ways that you stay professional and keep your expertise. This has a lot to do with continuing education, joining professional organizations,

networking with other colleagues in your profession, and being certified in your specialty.

Jayne described how she developed her sense of professionalism from the time she was a new graduate up to her current role. After graduating from nursing school, her first job was working for a physician's office because of her family situation of just giving birth to a child. From her early experiences as a medical assistant, working in a physician's office was not her goal and she eventually transitioned into a nursing job at a hospital. During that first job, Jayne described that her supervisor, who coincidentally is still her supervisor today, really mentored her because she needed a lot of help.

Growing from those early years and getting the help she described, Jayne developed into one of the leaders of her organization. Today, Jayne describes the pride she has to be in the position of a team leader in labor and delivery, Magnet program director, and adjunct nursing faculty.

Jayne has been an adjunct nurse faculty member for almost two years now. Her desire to help and mentor people led her to the path of nursing educator. In her graduate studies, Jayne underwent a Capstone project that focused on mentoring in nursing retention. This experience helped transition her into her adjunct nursing role.

I love to mentor and help people and I just felt like in my role as an adjunct faculty I could mentor other students. I can help them with leadership concepts, which is mostly what I teach. I have a fondness for mentoring and helping people.

Early in her story, Jayne described how some of her role models growing up were teachers. She was asked to elaborate if their influence had any effect on her decision to go into teaching.

Part of being a nurse is teaching. Nurses teach patients, they teach each other, sometimes nursing students are with you, we have medical students too. I never really thought a lot about teaching per se or teaching in a nursing school just because I was so in love with the practice [of nursing]. Teaching never really entered my mind until after I received my Master's degree and was asked to teach. Teaching was not a desire when at first when I thought about nursing as a career.

Because teaching was not at the forefront of Jayne's mind when she entered the nursing profession, she described the experiences that impacted her the most in terms of being an adjunct instructor. The most profound experience that had a positive impact on Jayne was a student that struggled in one of her classes and later went on to excel in nursing.

I have a lot of experience with writing and I think that I have pretty proficient writing skills. One of the things that bothered me at first [about teaching] was peoples' lack of writing skills, especially in the graduate program. I had a student that had a really difficult time with my grading because she had never received anything less than an "A" before and I told her she needs to work on her writing skills. She had a very difficult time with me and my grades. After the class was over, she emailed me about advice on something else and looking for resources in the organization. I was so touched by the fact that she could overcome the criticism received in my class and better herself and then realize that I can help her with other things.

During that conversation, Jayne mentioned that her students had difficulty with her grading, and it was a grading system that she essentially inherited when becoming the instructor for the course. Jayne was asked to discuss any PD she received for her role as an adjunct and if she had someone to discuss developing her own grading system for her courses. Jayne revealed that she last participated in pedagogical PD just before the current semester in August. That event was held for all adjunct nursing faculty and some of the topics discussed were college and program policies and grading. The experience of participating in PD had a very profound effect on her identity as an adjunct instructor.

I think it [participating in PD] is very helpful because as an adjunct sometimes I think you feel like you are out there on a limb or you are kind of

working on an island. Bringing all of those adjunct faculty together was a good networking opportunity for everyone. A couple of people there were just going to start with their first class and so they had questions and we could talk about the questions that they had. I thought it was good just to bring everyone together to talk about the expectations that way everybody is on the same page. I suppose there were probably about 50 people there so it just showed how many different were out there on that limb with you and you could network with them and ask questions.

In addition to the feeling of not being alone on an island, another important aspect of that PD meeting that provided Jayne with more confidence in her teaching was the information on grading.

I think probably the most influential topic was on grading. I kept asking the people [in the nursing program] if I am grading these students appropriately because they were all failing. I just wanted reassurance that I was interpreting the grades correct, especially proving for my first class where it seemed like nobody made the mark. I was just really concerned that I was either being too hard or I was missing something. So, I think that that whole discussion on grading and then the resources that were available [was beneficial].

Jayne described that the PD meeting that she attended was not mandatory for her employment but the invitation was sent to all of the adjuncts and that the turnout was tremendous. The only thing that would keep her from attending a future PD meeting would be a personal scheduling conflict otherwise she plans on continuing to attend.

Jayne had a pre-existing relationship with the college where she adjunct teaches because that is where she received her graduate degree. However, she did develop very strong friendships with two of her colleagues at the college that she considers a personal friendship that goes beyond a professional relationship. One of the friends is the director of the nursing program and the other was someone that created the program she teaches in. Both of these friendships provide leadership and expertise to Jayne and not being able to work with them in some capacity in the future would be greatly missed.

Jayne struggled to describe how she would explain her career to someone that she was meeting for the first time due to the multiple roles she was serving. After a little bit of reflection this is how Jayne would describe her career.

I usually start with the Magnet position and I describe it as I am a Magnet program director. Magnet is a national award for nursing excellence. Beyond that, I do things to support professional practice including doing things to help patient outcomes and nursing outcomes.

When specifically asked about choosing between taking a role as an adjunct nursing instructor or a part-time staff nurse, Jayne was quick to point out that she would take the adjunct position over the part-time nursing job. Another interesting thing that was revealed in her answer was that she is facing the possibility of a move and would seek new employment as an adjunct if the move occurs.

I would choose the adjunct faculty position because that is what I have the most recent experience with. I am in the process of moving and it might be that I won't be able to teach [at my current college] anymore and I really kind of broken-hearted about that. I have applied at other schools in the area so hopefully I will get to do something.

Overall, Jayne described herself as being really satisfied with her role as an adjunct teacher. Most of Jayne's satisfaction comes from the love of teaching and the conveniences that being an instructor, especially of online courses, offers. Jayne explained that she gets a tremendous amount of satisfaction helping students and learning from her students' ideas. In addition, Jayne reported satisfaction from receiving feedback from the full-time instructors and administrators from her college.

There always seems to be at least one student out of every class that doesn't quite make the grade and I think I am in constant contact with the instructors telling them that this student may be failing. I think just their assurance that I am doing a good job and they like having me on as [adjunct] faculty is important to me.

The final comments Jayne had were very telling of how she approaches her role as an adjunct faculty member. She mentioned that some people are very goal oriented and others are not. Everyone has to go into the adjunct role very open-minded and be willing to try different things to be successful. Sometimes it is trial and error where you try something and it doesn't work. Good instructors can recognize that and be flexible enough to try something else.

Rose

Rose's story and her path to nursing and nursing education was very unique and non-traditional compared to the other participants. One of Rose's early career ambitions was to be an interpreter for the United Nations. This passion started at a very early age and was triggered by her love of reading.

I loved the sound of languages. I love to read and I love all of these foreign languages. They just sounded wonderful and I was fascinated by being able to learn and say things in different languages. At that point, I knew the United Nations was the only thing that I knew that was international and I didn't realize that there were a whole lot of other jobs with that. I thought that it would be the best thing to be able to know three or four languages and be able to help out.

Rose's family was very supportive and open to her desire to pursue a career in linguistics. Since her parents were paying for college, they had a family rule that all of the children had to attend a local college for two years to ensure they would take studying seriously. Rose's plan was to start out studying Latin but the local college did not offer any Latin courses. Her parents did agree to let her go away to start her studies in foreign languages.

Although Rose did not directly admit that some of her interest in learning foreign languages and teaching Latin was related to influences of role models. Rose described several role models that had a positive influence in her life and all of them were teachers.

I think there were a couple of grade school teachers who either through their kindness and encouragement [were role models]. I can pinpoint two retreats but what I can remember about them is just the kindness and their contentment with teaching and encouragement. The same thing in high school. It happened to be a Latin teacher who challenged us but also made it interesting, I won't say fun, but made it interesting!

Rose was asked to describe if she had any defining life experiences that had an influence on her career choice. Although she couldn't recall a single defining event, several smaller events pointed her in a direction away from foreign languages and down a different path. These smaller events included seeing and realizing the goodness in people being able to have the ability to be self-giving on a much broader spectrum. This choice led her into a role of service to others.

As a result of her decision to not pursue foreign language and the experience she obtained through her service community, Rose evaluated the options were open to her, teaching or healthcare.

When I decided between teaching and healthcare, I knew that I didn't want to teach little ones, the primary grades. The other option would be to teach in an upper grade. I was told that was not an option because every good teacher starts in the lower grades but the little ones scared me to death. So, I opted for healthcare.

So then I looked at either a dental tech, a lab tech, or nursing. [In the community I was in] they didn't really need anybody to work in the lab and they didn't need anybody in dental so they told me that I could start out as a nurse and later if I wanted to go and do one of those things we could discuss it. It turned out that nursing really was a good fit.

Rose discussed the beginning of her journey in the role of a nursing student. The people in Rose's community were very supportive of obtaining an education and helped her enroll in a 4-year nursing program to get her bachelor's of science in nursing (BSN) degree. Even for other nurses in her community that did not have a bachelor's degree they were encouraged to go back to school and get their degree and eventually continue on to get a Master's degree. Rose did return to school later on and earned her Master's of Science in nursing (MSN) degree.

Since Rose's career path started out as wanting to learn foreign languages and work for the United Nations and ended up in nursing, she was asked to describe the people or experiences that had the most impact on her nursing career. The person that had the most influence on Rose was a head nurse in an intensive care unit when Rose was still young and inexperienced.

In my second year of nursing I had been working on a medical/surgical floor and I was pretty happy with that. Then they came to me and said we would like you to do critical care. I was happy on the surgical floor but they didn't want me to choose that one [to stay there]. So I went to critical care and they told me to try it for three months and if I don't like it I can change.

I went there [to intensive care] and the head nurse was a bit of an Army sergeant with a very soft heart and always pushed people to do better and be better. So I think she was very influential and she always asked, 'what went well and what could have been done better?' I have used that term my whole life and I try to teach that to my students.

In addition to the head critical care nurse, Rose also mentioned that a few of her patients early on really shaped her career outlook. Those patients taught her that it is more important to let her patients know that she cared, rather than them caring how much she knows.

Another person that has had a tremendous influence on Rose is someone she met much later in her nursing career.

I have had one other person who has influence me but much later in my life. I really wanted to go onto nurse practitioner but the community kept telling me they don't need nurse practitioners so I ended up in nursing administration. I work with a woman who has really become a mentor for me. She used to say, 'they don't care how much you know, they want to know that you care.' She introduced me to Covey's Seven Habits and taught me to pursue the best and looking for quality.

In addition to the people Rose met through her nursing career, she has had other experiences that framed her sense of being a nurse. While she was a student working on the medical/surgical floor, she took care of a patient and the same patient returned to her unit for care a few weeks later. During that time the patient developed a neurological issue and had a completely different temperament on the return visit for care.

I had been very fortunate to know what the patient was like before [the neurological issue]. It had impacted the patient so severely and was at the end of life. I knew the patient's needs as a person and I was able to pull that together along with his care. It was at that point I was like 'I got this.'

Because this experience with a patient had such a profound effect on Rose's identity as a nurse, she was asked to describe what her best memory of being a nurse was throughout her career. Rose described how she had been caring for a patient that was a long-term care situation. The patient's family was very involved in her care and Rose was able to meet and interact with all of the family members. Eventually, the patient recovered and returned home. A few months later, the patient returned and arrived with a different family member that was not with her during her first hospital stay.

I really developed a connection with the patient and I knew what to expect. [When the patient returned to the unit] I went to the family member and introduced myself. She said 'oh, I have heard so much about you, you were mom's nurse a couple weeks ago.' That just has always stuck with me about being able to form a relationship. I try to teach that to my students because I want them to establish relationships and see the patients as people before they start getting into their nursing tasks.

Because a patient experience was one of Rose's best memories of a nurse, she was asked to describe what her feelings were entering the workforce as a new graduate and how she grew into the nurse she is today.

At first I thought it was a great accomplishment graduating and then the first day of work I thought I knew how to be a nurse and I just need to learn how they do things here [at my new job]. Probably the first six weeks in, I began to realize there is so much more to learn but I felt that I could learn and do it.

Today, I am much more confident than when I was a new nurse. I realize that I have some limitations but I know how to work with them and I realized that I have likes and dislikes and for the most part I do not have to do the stuff I don't like. I am still very proud of the fact that I am a nurse and that there is always something to learn.

Rose described her personal definition of professionalism as being grounded in evidence-influenced or evidence-based practice. This applies both to education and hands-on nursing. The methods and techniques used to teach students and care for patients needs to be based on well-researched information. Rose also stated that being professional also requires significant self-development to be on going.

Part of Rose's on-going development led her to the role of an adjunct nursing instructor. She has been adjunct teaching for almost 4 years this semester. Rose wanted to be an adjunct instructor and earned her MSN degree so she could teach in a nursing program. Right when she graduated with her MSN degree, the nursing program Rose was going to adjunct teach for closed, which led her to nursing administration. However, the desire to teach did not recede. Eventually, a nursing program reached out to her because they were looking for an adjunct instructor and she accepted that position. Eventually, Rose picked up an adjunct position at a second nursing program and has experience teaching both in the classroom and clinical instruction.

One of the experiences that impacted Rose the most in terms of being an adjunct was when one of the colleges she was adjunct teaching at offered her a three-quarter time faculty position. Rose was very flattered by the offer but decided against it because it would take her away from the other adjunct position that she considered her primary role. Rose also did not want to have faculty committee meetings take her away from teaching so she decided to remain adjunct.

Because part of Rose's definition of being a professional is embarking on self-development, she was asked to describe the last time she participated in any type of formal development for her role as an adjunct and what that experience entailed.

In October [1 month before this interview] I attended a professional development program for all faculty and the adjuncts were invited to it. I think it was a five hour program and at the end they tacked on two hours just for the adjuncts, even though we were encouraged to come to the rest of the meeting.

For the adjunct meeting they covered all of the updates for the clinical site changes and any policy, procedure, and paperwork changes. They also took the time to answer any questions we had. They spent a considerable amount of time on student performance evaluation.

After attending PD meetings, Rose stated that she feels much more confident as an instructor because there is always a new skill to take away from the meetings.

The professional development isn't just about them telling us to 'do this or do that,' they really share ways of engaging with the students. We usually have an open discussion among the adjuncts about being able to engage students so that open forum really makes me feel like I am doing things correctly or I learn a really good idea from someone. Sometimes several of us teach a similar course and it gives us a chance to share what works and what doesn't. When I leave I feel like 'yeah, I have got it!'

In addition to the PD meetings, another very useful adjunct development strategy used at one of Rose's institutions is the use of full-time faculty mentors. Even if this

institution stopped providing the PD meetings, Rose stated she would continue to adjunct teach there because of the formal mentor agreement.

Every adjunct faculty is assigned a primary and a secondary mentor. When I am teaching, they are very engaging with the adjuncts. I can go to them with any kinds of questions and concerns and they are taken seriously and we are very supported.

Rose also stated that the professional development meetings are very well structured and very well attended by the adjuncts at her institution. The meetings are usually scheduled 2-3 months ahead of time so it is easy to make arrangements to be able to attend.

Rose mentioned how some of the people that she would not have met if she were not an adjunct have influenced her. One of the full-time faculty member's approach to teaching has made a big difference in Rose's approach. *"Her approach to students and encouragement is [to me] the standard and has just made a big difference. Her whole approach to helping people is phenomenal and has made a big difference for me."*

Rose declared that even if she were not to return next semester as an adjunct instructor she would still maintain contact with 3 or 4 of the people that she has met. Rose also considers one of the people she met through her adjunct teaching to be a personal friend rather than just a work acquaintance.

After describing her experience as a nurse and as an adjunct instructor, Rose was asked to explain her career to someone she was meeting for the very first time. After some thought to the question Rose replied: *"I help nursing students develop people skills."*

Rose was then asked to choose between accepting a part-time nursing job and an adjunct nurse faculty job. Rose was very quick to state she would accept the adjunct position

because she feels it has a much bigger influence on development of nursing than the role modeling she would perform as a staff nurse.

Rose stated that part of her satisfaction that comes from being an adjunct instructor is the institution where she teaches makes her feel like she is included in the faculty. *“We are not just fill-in-the-blank instructors; we are included in the faculty meetings and in the faculty social gatherings. We have a voice if we went to a faculty meeting versus just being able to sit there.”*

Another aspect of Rose’s satisfaction is being able to accomplish her personal goal of being able to teach in the classroom. Being able to teach in a classroom has made Rose realize that she prefers to teach BSN completion students rather than straight BSN students because she has a higher expectation of those students.

The final thing Rose shared about her satisfaction as an adjunct is the performance reviews she receives. It provides her with a chance to learn about what she is adding to the program and the students. As a result of her performance reviews, Rose has received positive feedback from the President of the college and the Dean of Students on her performance. It made her feel great and more satisfied with her role as an adjunct.

Jean

Jean’s story begins with her describing what she wanted as a child for a career involved animals. She always felt like she had a very nurturing nature about herself, so caring for animals was her avenue to foster her nurturing ability. Jean was the youngest child in her family and she stated that she never really got to care for anything else but animals

because her older sisters took care of the others in the family. It wasn't until she was an adult that she realized she could channel her nurturing tendencies towards people.

Jean described the role her family played in her career choice. She is the youngest of four siblings and she described her family as very nurturing people.

No one ever really pressured me to make my career decisions in any direction so I can't say that my family was a direct influence there. However, us three girls [Jean and her two sisters] are all in nursing and my brother, while he is an accountant now, was heavily involved in the Big Brother program. So I would have to think there was some strong influence for us to nurture people.

Since Jean is the youngest of the siblings, she described what influence she believed her older sisters had on her in entering nursing. Her middle sister was enrolled in nursing school while Jean was in high school and she said that made her more aware of what was involved in being a nurse.

I was familiar with that career choice [nursing] because my sister was already a nurse. That probably did have a lot of influence because she was around and I heard her talking about nursing and saw what she was doing. She loves her job and that had an influence on me too.

Jean described not having many role models outside of her family growing up. This was mostly due to her family moving around frequently while she was growing up. Her father was in management and his company kept moving him around and transferring him to different locations so it was difficult for Jean to develop close relationships with people at her school or in her community. It was mostly her family that was supportive and encouraging of her to make the most of herself.

Ironically, Jean did not go into nursing right out of high school. She ended up working as an administrative assistant and executive secretary for a time after high school.

She realized that she wanted more financial security and did not want a career sitting at a desk or being a numbers cruncher.

For me, entering nursing honestly was about job and financial security. I knew as a nurse it didn't pay too badly and if you get tired of one type of nursing you can go into a different type of nursing. Nursing is very versatile, you can go anywhere in the United States or the world for that matter. I think I just had that mentality that I wanted that stability.

Jean stated that she probably would not have entered the nursing profession if her older sister was not already a nurse. Getting into nursing was Jean's decision to further herself and have a more sustainable career. When it came time to fill out and submit the application to nursing school, Jean described what the emotions were like as she embarked on her new journey.

I was really, really excited but I came from a desk job and the thought of moving into touching people was really, really scary. I was excited to do something with purpose. Maybe that was part of the decision of pursuing nursing was I can do something now that is good for other people and that is good for me. I was very excited about taking that big step in life where I was going to have a job that I could really be proud of.

When Jean was a nursing student, she met a very young clinical nurse in the ICU that had a tremendous influence on her. As a student, Jean looked up to that nurse because she treated all students with gentleness and compassion and her love and passion for her job were very contagious to all that were around her. Jean's time in nursing school was difficult but when she was able to work with that nurse, it didn't seem as difficult.

Jean also stated that throughout her career, she had other people in her life that really encouraged her to become a better nurse and further her education.

I started with my ASN [associate of science in nursing] and people in my life were really encouraging me to go on and get my BSN and then my MSN. Sometimes nurses can beat each other up [figuratively] but some nurses would sit down and have a conversation with me and tell me 'this is how I

improved my critical thinking' or 'this is what I do to get prepared for a tough position.' The ones that sit down and share their experience and knowledge with you is very encouraging.

Jean shared a very interesting story about the experience when she viewed herself as a nurse and not just a nursing student. This experience did not have to do with anything that occurred in a classroom or with a patient. Jean demonstrated leadership abilities during her time as a nursing student. She was president of her college's chapter of the American Student Nursing Association (ASNA). She ended up traveling to a conference and had to give a presentation on the pros and cons of the ASN degree versus the BSN degree. Standing in front of people in her profession and sharing her knowledge was the first moment Jean thought of herself as a professional nurse.

When Jean was a new nurse entering the workforce, she explained that she was scared to death. Although she knew that she had obtained the knowledge necessary to be successful in nursing school, she was still very scared to make a mistake and hurt someone. Even as a nurse today, one of Jean's biggest fears is making a mistake and hurting a patient. During her time as a nurse, Jean has grown much more confident in her abilities to do her job and she stated she has grown much more aware of what her weaknesses are and how to address them.

When reflecting on her career as a nurse, Jean revealed a story that she described as her best memory of being a nurse. Jean shared that her first job out of school was on a medical/surgical unit while her sister had been working as an obstetrics nurse. Her sister encouraged a switch from medical/surgical to the neonatal intensive care unit (NICU). During her time in the NICU, Jean shared a story of a young mother and a baby that was her best memory of being a nurse.

We had a situation where we had a little peanut back there for a long time because he was delivered early. He did really well but we had to keep him for so long and the mother was very young and inexperienced. She was scared, she wasn't at home and her parents lived far away. So not only did we take that baby to an age and a size when he could be discharged, we were able to take that young mom and teach her how to be a mother and how to parent right there in our facility. I guess discharging both of them it really felt joyous watching them leave. She was just a different person then when her baby was born.

Jean described that her personal definition of professionalism begins with advancing the nursing profession, not just her own personal career.

Being professional means not only giving that good care to that individual patient but teaching that knowledge to others that don't have that knowledge yet. Being professional also means being able to take on someone's anger without getting angry back. Sometimes patients do not have anybody to be mad at so they get mad at me. It is okay, but it means that nurses need to have broad shoulders and looking at the big picture. Also, being professional means you have to look at the big picture for the facility where you work at. I realize that I cannot be selfish individual as a nurse, I have to look at the big picture now.

Since part of Jean's definition of being professional is sharing her knowledge with others, she was asked to discuss if that is why she pursued adjunct teaching in a nursing program. Jean stated that she really wanted to be a teacher ever since meeting the young nurse that was a role model for her when she was a student and it was Jean's love of the profession that was the catalyst to go into teaching.

I haven't forgotten that nurse in all of these years and I wanted to share that passion. I love my field of specialty and I love getting other people excited about my field so it just seemed to fit that I would take on young nursing students and pass that passion onto them. I warn my students when I meet them that I am going to make them fall in love with nursing.

Jean has been adjunct teaching for about the last 3.5 years and she described how she actually got the job as an adjunct. Jean's entry into adjunct teaching received an assist from her older sister who had done a little bit of adjunct teaching. Her sister knew that she was

interested in adjunct teaching and provided Jean's information to a college that had an open adjunct position. The college contacted Jean and offered her the position.

In her time as an adjunct instructor, Jean declared that the students she teaches have had the biggest influence on her role as an adjunct. Because of Jean's approach to sharing her passion of nursing with her students, the feedback Jean receives from the students has shaped her experiences as an adjunct.

The students give me a lot of feedback, but I ask for a lot of feedback. Of course, every semester they fill out their little evaluation surveys. They frequently thank me for respecting them as students. For example, in one semester I had a male student from a foreign country and we were in the labor and delivery area. In his home country, males took no part in the delivery of babies. Of course here in America, it is part of their education. He thanked me for helping him overcome the cultural barriers and not making him feel badly or embarrassed.

Because Jean shared one success story of one of her students, she was asked to describe what her feelings are when she sees her students be successful or overcome a difficult situation, "I just want to sit and clap, I am so tickled for them. I am very, very proud of them when they graduate. That is a big accomplishment because nursing school is tough." Jean described the feeling that she gets when she helps a student be successful is a similar type of feeling that she got when she was able to help a patient in her unit recover from their illness and have a successful return to their normal life.

The last time that Jean participated in PD related to her role as an adjunct was at the beginning of this current semester in August. Her college offers a PD session at the beginning of every school year that is for all faculty, including the adjuncts. During the meeting, the college had presentations on the requirements for the adjuncts, new policies and procedures, and the expectations for the students. Jean said they also provided the adjuncts

with the resources available to them if they wish to pursue any additional training. During the most recent PD meeting, Jean mentioned her college discussed some of the changes that could be occurring if their college has to go to a four-year program, not just an ASN degree.

Jean was sure to mention that one of the more rewarding aspects of attending the PD program was the ability to meet and have discussions with the other adjuncts. She said that makes her feel less alone in her role as an adjunct.

With the other adjuncts it is a lot of bouncing ideas off of one another. We ask questions like 'how did you handle this situation' or 'what do you do with this happens?' There is a little bit of conversation the between the sessions but afterwards the adjuncts meet with the primary instructors so we can really sit down and hammer out how things are going to look for the upcoming semester.

Even if her college did not continue to provide these PD programs to their adjuncts, Jean was very sure she would continue adjunct teaching.

One of the people that Jean has met through her adjunct teaching that she did not know prior to her working as an adjunct is the dean of the nursing program. The dean has had a very positive influence on Jean.

She is a very powerful woman, but still passionate about nursing. She is always, always there to help and has been such a good influence for me. She is not an adjunct teacher, she is a full-time teacher in theory and is also a clinical instructor. She was the one who has been very encouraging for me to start on my MSN degree. She has also been very good at reminding me to remain patient on the days that are rough.

In addition to the dean of nursing, Jean has met some other people through her role as an adjunct. She stated that her relationship with the dean is still on a professional level however she would consider one of her friendships with one of the other full-time nursing instructors as a personal friendship and she would go to activities outside of work with that full-time

instructor. Jean would try to maintain a relationship with the dean of nursing even if she did not return as an adjunct instructor the following semester.

Jean was then asked to respond to two hypothetical scenarios about how she would handle herself in the situations presented to her. The first scenario, Jean described how she would describe her career to someone that she is just meeting for the very first time that did not know anything about what she does. Jean offered a very quick, concise response to the question, *“I instill excitement into nursing students.”*

The next scenario, Jean was asked to describe what job she would take if she had the choice to work as a part-time staff nurse or an adjunct faculty member. Like the previous question, Jean was very decisive in her response to the question, *“I would take the adjunct position in a minute because I would much prefer teaching over running a floor.”*

The last portion of the conversation centered around Jean’s satisfaction as an adjunct nurse educator. One of the biggest things that Jean described as making her satisfied is over her three plus years of adjunct teaching she feels more accepted by her peers.

I work as an instructor on a unit that I have never worked as a nurse and it is historically known as being a really bad unit to be an instructor on. The nurses are very rough on the instructors and on the students. Although I am not all of the way there yet, I am getting satisfaction out of making headway with the nurses on that unit.

Since this unit was historically known to be a difficult one for the instructors, Jean was asked to describe if any of the tools she obtained from participating in the adjunct PD was able to help her navigate through that difficult situation. Jean described what helped her the most was the time she was able to spend with her colleagues at the college and having them explain to her that it is nothing she was doing wrong, it was the culture of that unit. It did

provide her with a level of reassurance that the difficulties she faced were not the result of anything directly related to her position as an adjunct instructor.

Jean talked about the goals that she set for herself prior to starting her adjunct teaching position. The main goal that she set was based on the assumption that she liked teaching. Jean's goal is to eventually get into a full-time faculty role and she believes she is on her way to achieving that goal. She has received feedback from the dean of nursing that it is probable that she would be able to achieve her goal of full-time status.

The final thing that Jean shared about her satisfaction as an adjunct is the type of recognition she received from her college. Although her college does not provide anything in the way of formal recognition, the adjuncts do get feedback from the students that is very satisfying. The adjuncts are also invited to the pinning ceremony (a nursing school tradition where new graduates are presented pins signifying their completion of the program), which is informal recognition for their role in helping the students complete the program. Jean said the most gratifying recognition she received was from the dean because they have discussed having her join as a full-time faculty member. Having that type of support and recognition provides a tremendous amount of satisfaction.

Debbie

Debbie described her childhood desires very vividly as wanting to be a teacher for her career. Debbie really enjoyed attending school and she had a fondness of all of her teachers. When she would get home from school, Debbie remembers setting up all of her dolls like a classroom and playing school.

Debbie was an only child and she had a tremendous amount of support from her parents. Her parents set very realistic expectations for her expressing the need to pursue a career that would be in high demand.

My parents would have supported me in whatever I decided to do but I think their main goal was they wanted to make sure that I would pursue a workforce where I was needed. Sometimes I would bring things up that I wanted to do this or that and my parents would say: 'Yeah, but the problem is there are not many jobs for that. You want to go into something where you are going to be able to find a job.'

When I would talk about being a teacher, they were very supportive of that. Later on when I decided to be a nurse, they told me 'you will never have a problem finding a job.'

Debbie had some very supportive role models growing up that she turned to for advice and support. Debbie's aunt, some of her teachers, and friends of her parents were her support system. These role models helped guide her, especially when she started college, advising her on the classes and choices she would be better off making.

While growing up, nursing was never really one of Debbie's career choices until she started working at a nursing home after high school. This experience started her down the path towards nursing.

I started out as helping out passing out trays and just helping transport the elderly people to and from the dining room and things like that. It was a part-time job to make extra money after school. Well, then I went and got my CNA [certified nursing assistant] and started working as a CNA, which is when I decided to go into nursing.

While working as a CNA, Debbie described a defining moment in her life that made her career path much more clear.

When I started out as a CNA, I was working in the nursing home and taking care of elderly people. At some point, one of the patients got bad and really sick and I helped the nurse, as you know that is what you do as a CNA.

Watching the nurse made me realize this is what I wanted to do and where I wanted to be.

Since Debbie had found her calling for her profession, she described what she was feeling at the time of her life when she was ready to apply to nursing school.

I was living at home with my parents, I was just out of high school and working as a CNA. I think one of the things was I knew I needed to go to college and find a job that is going to pay my bills and will always be very secure. I had looked at other professions, management, business, accounting and stuff like that. By working with people as a CNA I just remembered thinking, no this is what I am meant to do, I am meant to take care of people. I am meant to heal people. Those were my thoughts, I don't really think that I would be happy or good at any profession other than nursing.

After Debbie made the decision to enroll in nursing school, she discussed the people that had the most impact on her in terms of being a nurse. While living at home and attending nursing school, Debbie's mother became ill and that illness helped define her as a nurse.

My mother was very unhealthy and she had a lot of health problems and was sick. During my time in nursing school, I helped take care of her. I would say that she was probably the biggest influence and helped me see the patient side of nursing.

In addition to her mother, Debbie also mentioned the influence her nursing instructors had on her. She described them as role models and had a strong admiration about their passion for the profession of nursing.

While her mother and the nursing instructors had the most influence on Debbie in how she viewed herself as a nurse, Debbie recalled the time when she first viewed herself not just as a nursing student, but as a professional nurse. As she progressed as a nursing student, they placed her in more critical care areas that gave her more responsibilities. Admittedly, Debbie did not claim to know everything about what she was doing while she was a student

but when patients would tell her how good of a job she was doing, it made her feel like she was a nurse. Debbie really viewed her role as a nurse was taking care of people, making them feel better and help them deal with what they need to deal with while they are in the hospital.

Debbie then recalled what her best memory of being a nurse was throughout her career. Making it to her 10th anniversary of being a nurse was Debbie's moment.

I think during my first few years of nursing, I was very insecure and there were a lot of changes going on. I wasn't sure what I belonged and felt a little lost. During that time I did go back to school and got my BSN at the time. During my 10th year, I received a recognition award. That was probably my best memory about saying I am a nurse and I feel like this is where I belong and that I have done some good things over my 10 years.

Because Debbie described that her best memory of being a nurse was the growth and maturity she developed over the first 10 years of her career, she was asked to describe how other people react when they find out that she is a nurse. She described most of the encounters as a very positive reaction. Debbie recalled discussing this very type of situation with a nursing classmate of hers shortly after graduation.

I asked her [the classmate] if she noticed how impressed people were when we told them we are nurses? I think when people found out we were nurses it was always a very positive response. I think most people respect and look up to nurses.

Debbie described that getting respect from people really made her feel appreciated because sometimes on the job, some of her co-workers did not make her feel appreciated. Getting that positive response from people outside of the profession helped with Debbie's nursing identity.

Debbie described herself as a very nervous person heading to her first job after graduating from nursing school. She knew she had her years of training to fall back on but

her first few months on the job Debbie was very scared to make a mistake and possibly hurt a patient. Throughout the years as she gained experience, Debbie described herself as being much more confident, *“I feel more confident, I also feel more respected. I am not as nervous and I feel more professional. I also feel like I present myself as more professional.”*

Because Debbie mentioned that she feels and acts more professional, she was asked to explain what her definition of professionalism is. For Debbie, being professional means respecting her peers, co-workers, and being knowledgeable about what she does. Also, professionalism means she needs to perform ongoing continuing education and acting in a professional manner.

Debbie’s experience as an adjunct nursing instructor has included two years prior to the beginning of this current academic semester. Because Debbie had a strong desire to be a teacher when she was a child, she explained how her career eventually transitioned into teaching.

I was actually working in healthcare management and I was doing clinicals for my Master’s degree in nursing. I actually went to our college of nursing and spent some time mentoring with a full-time instructor there. When I was there, I was getting ready to graduate from my Master’s program and she asked if I would be interested in joining them as an adjunct. I asked what it entailed and she told me and I ended up doing that. I absolutely love teaching and I am looking more at going into teaching [full-time]. I found out that I really enjoyed teaching in that role much more than I liked the management positions.

Debbie did point out that even if someone from the college did not approach her to consider adjunct teaching, she would have pursued it on her own. The unit she was working on had students from different colleges rotate through and she talked to the instructors with those students about getting into teaching.

In Debbie's time as an adjunct teacher, her students have had the most impact on her in terms of being an instructor. She has worked with both brand new nursing students and students that are in their final semester before graduation. She loves working with the students that are nearing graduation: *"What I find most fulfilling are the students that graduate and then they come and work at our hospital. I think it is just that feeling I was a part of that and helping them become what they are."*

Debbie was asked to describe in as much detail as she could what it feels like for her when she is part of students reaching their potential and being successful.

It makes me feel much more confident in my teaching abilities. It is also a very, very happy feeling, like I have done something good. It is a very similar feeling when you help a patient overcome whatever challenges they are facing.

Since part of Debbie's definition of professionalism included participating in continuing education, she was asked to describe the development she has participated in for her role as an adjunct instructor. Debbie's college provided her with two days of formal adjunct orientation at the beginning of each academic year. Debbie described that most of that time she was paired up with another instructor so she could watch this other instructor and see the preparation involved and ask questions of this instructor. In addition to the faculty mentoring, Debbie's college also provided her with training on their classroom management computer software. Debbie described how her participation in PD for her adjunct position affected how she viewed herself.

I realized that I am in a different role, I am not just a nurse but I am also an educator. Educating students is different than when I am being a mentor and training a lot of new nurses. It is much more difficult getting questions out of the students and to make them think more critically. So, during orientation it made me think I was more an educator and I really got a lot out of asking the questions [to the other faculty].

One aspect of the PD areas that Debbie felt was missing during her first year of teaching was receiving better communication about what topics the students were learning in the other nursing classes. Because she was not aware of what the students were learning in their other classes, she felt isolated and not able to fully prepare to teach the students in her course. Debbie brought up those concerns to the nursing faculty and this semester she has been receiving e-mails with the topics being covered in the other courses.

During her time teaching as an adjunct Debbie has met several people through her role as an adjunct that she would not have met if she did not take that role. Specifically, she mentioned that she has become very close with some of the other adjuncts and full-time faculty.

I would say that there are several people I have developed a close relationship with. I have been teaching for 4 semesters now and there have been other adjunct faculty and also other faculty that we have become close. We have went out for dinner or days when we have gotten out of clinical early, we would go for lunch. We talk on our days off, so yeah we are close.

Debbie declared that she would definitely maintain contact with some of the people she has met through her adjunct role even if she did not return to teach the following semester.

Debbie was asked to share how she would describe her current career to someone she was just meeting for the first time. She provided a response with out hesitation.

I take care of patients and I also educate students.

Debbie was also asked to provide a rationale behind her decision to choose between accepting a position as a part-time staff nurse and an adjunct nursing instructor.

I would probably take the adjunct. The reason is, I have been a nurse for over 20 years now and I really feel like I get a lot of fulfillment out of teaching and instructing new nurses. If it was the same amount of pay and the same hours and everything, I would definitely choose the adjunct because I feel like it is just more fulfilling.

Since Debbie described her role as an adjunct as fulfilling, she was asked to provide a description of the details of her adjunct role that make her fulfilled or satisfied.

I think the thing that makes me satisfied is as an adjunct or an instructor, I feel like we get more respect. I notice that the days I am at the college and I am working, it just seems like everyone is very professional and everybody treats you with respect. When you are on the unit with the students, they say 'this is my clinical instructor.' It just seems like your treated with more respect, more professionalism, where sometimes as a nurse, you are not.

Debbie also discussed what her personal goals were entering her first semester as an adjunct instructor. She wanted to be fair and wanted to make sure that she was an effective teacher so the students would learn something from her. She said that she would get tremendous satisfaction if her student spoke fondly of her or remember her in a positive way. So she set a goal of trying to be a fair, effective teacher. In her best estimation, Debbie knows that she has progressed as an educator since her first semester and feels like she is making strides towards accomplishing her goals.

I think in the beginning, I know I kind of felt like I wasn't quite sure of myself and I wanted the students to like me. I also wanted them to learn something, but at times when I was grading their research paper or watching them do clinical things, I was kind of unsure of myself. I know that it is getting better the more that I do it!

The final part of Debbie's story that was shared centered on any type of recognition she has received for her role as an adjunct instructor. Although she has not received any type of public recognition, she does receive performance evaluations on her adjunct role. She stated that it is always nice to hear that she is doing a good job but then identify areas to improve upon. Debbie said that although she does not need any type of formal recognition, it is very satisfying for her to hear her colleagues speak positively of the job she does teaching students.

Ashley

Ashley's story began with her describing how she wanted to be a nurse ever since she was a small child. She can remember being as young as three or four and having the desire to become a nurse. One of her fondest memories as a child was receiving a "Nancy Nurse" doll for a gift and pretending to be a nurse with it. Although she does not have the doll anymore, Ashley has a framed picture of her and the doll in her possession.

For Ashley, the decision to go into nursing was influenced heavily by her family. She described herself as a later-in-life child for her parents and the expectation was since they were getting older she would be the one to take care of them when she grew up. In addition to her family, Ashley described some of the other role models in her life. The organist at her church had a particularly positive effect on Ashley and her approach to life.

The organist at church started giving me piano lessons when I was 5 and I just loved her. She was always smiling, always happy, and she encouraged me with music and I took lessons from her for a few years until I outgrew her and had to move on [to a more advanced teacher]. Some of the qualities that I always look up to in my role models were being kind, being efficient, and being patient.

Although having a desire to pursue nursing was there at a young age, Ashley's journey did not directly lead her into a nursing program after high school.

I graduated from high school, got married and had a baby before I was 19. So I was working two part-time jobs to work around the kid's schedule and I still had not planned to become a nurse. I felt that nurses needed to be good in math and I had teacher in high school tell me math really wasn't my thing.

In her late-20's Ashley went through a life change and found herself looking to make a fresh start with a new career.

I was thinking about what I wanted to do with my life and I really wanted to be a teacher but as a single mother of three children, that was not possible. I started looking at the nursing program because my ex-husband had gone

through the program before our divorce and I had two sisters that had gone through the program. I went to take the pre-testing and did well. Nursing was a career that I felt the aspects of my personality lends itself to nursing and the more I did it, the more I was successful at it and the more I embraced it.

Ashley did not describe any single defining moment in her life that solidified her decision to the direction of nursing, some of her pre-nursing experiences helped prove to her she had the ability to be successful. Ashley and her husband at the time, lived in a small town almost 40 minutes from the nearest hospital and they got involved in volunteering as EMTs (emergency medical technicians). She enjoyed her time as an EMT and knew that she wanted to be a caregiver.

Since she performed well on her pre-test, Ashley decided to move forward with pursuing her nursing education. An experience that she had during her time as a student really framed in her mind that she was a nurse. One of her student nurse colleagues was an older woman and they were both on an obstetrics rotation. The patient that Ashley's fellow student was assigned to was her son's ex-wife that was delivering a baby with her new husband. Ashley recounted how distraught her co-student was and made the decision to switch patients with her. *"I told her 'let's just switch and if the instructor has any questions, I will take care of it.' It was right then that I thought that was very much a nursing thing to do."*

During her early nursing career, Ashley had worked with some people that helped shape her role in the nursing field. Ashley's recollection of one early mentor provided particular inspiration and purpose for her in the nursing field.

I was very fortunate to have a fabulous mentor when I first started at the hospital in the medical/surgical unit. This nurse had been a nurse in her early 20s and got married and stayed home with her children. She didn't go back to

nursing until her children were 18-20 years old. She went and took a refresher course and came back and was phenomenal. I had such respect for her. She was definitely one person that had a big influence on me.

Also, I had a friend who worked in human resources at one of the places that I work at that was a very supportive person. She encouraged me to keep going because there were a couple times where I thought 'is this what I really want to do?' She always brought me back to reality and got me back in the right frame of mind.

Ashley described what her mindset was very early on as she was searching for her first job right out of nursing school. She needed a full-time job to take care of her family but at that time, most places were only hiring part-time nurses. The only place that was hiring a full-time nurse was a home for the developmentally disabled.

I was petrified of people with developmental disabilities before I took that job. For the first year that I worked there, every time I was getting ready for work I was scared to death. It ended up being such a phenomenal experience looking back on it because it trained me to take my fears and work with them and get through them.

Through years of experience, Ashley has a much different outlook on her skills and abilities today. Her fears of working with patients have diminished and now she strives to be the nurse that she has created in her mind as being a good nurse. She also has developed into a nurse that treasures working with patients and loves seeing “ah ha” moments for her students.

Ashley had a very difficult time describing what her best memory of being a nurse was, but she shared a story of a situation with a very special meaning to her. At one point in her career, she was nurse manager at a nursing home. After a particularly challenging day, she received notification that a new patient was being admitted to the nursing home later on in the afternoon. Staying well past the end of her shift, she waited for the new admit to arrive so she could process their admission. When the patient arrived, Ashley realized that it was a

gentleman that she had known from over 15 years earlier. The patient's wife immediately started crying when she recognized Ashley's familiar face. After a few hours, the patient's wife had departed for home but the patient wanted Ashley to remain with him through the night. At about two in the morning, he died: *"I was so glad that it was me that got to make the phone call to his wife, just so glad because she needed to hear it from me. That was my best memory."*

Ashley stated that she receives a very positive response from people when she tells them that she is a nurse. She added that she believes that the general public has a considerable amount of respect for nurses and the nursing profession and that she is proud to tell people that she is a professional nurse. In her own words, Ashley described being professional as someone that demonstrates all of the qualities of having respect for life and people. She wants to demonstrate the joy of caring for people and she wants to be a role model of those behaviors and she envisions her students having those same qualities.

Ashley has been adjunct teaching for three years at the start of the most current academic semester. Her transition into education began when one of the nursing instructors in her associate's degree program told her that she direct her career towards nursing education.

The more I thought about it, I thought it is a blend of me wanting to teach and being a nurse. If I am going to do that I want to have the best range of knowledge I can in order to be an effective teacher. So I got experience in medical/surgical, pediatrics, obstetrics, long-term care, and I worked in the home for the developmentally disabled. I took care of patients from cradle to grave.

I guess it [teaching] was always a goal of mine but it would falter from time-to-time when I would get tired of the politics and extraneous stuff. When I would get really down, it is just like I would get picked up and it renewed my faith in nursing. That is kind of how I ended up there [as an adjunct].

Even though Ashley was encouraged to get into teaching at an early time in her career, it took over 20 years in the nursing profession before she pursued teaching. A life event helped push Ashley to pursue nursing, another life event motivated her to pursue teaching.

My current husband decided to semi-retire and he said it would sure be nice if I could do the same and find a job that is more flexible. So, I thought about it and I took a drive over to the college and met with the nursing dean and told her I was thinking of quitting my full-time job and asked if they needed an adjunct. I didn't even know what they called it [adjunct teaching] then. The dean told me that she couldn't make any promises for pay and hours, but it worked out that they needed somebody. That is how I got into adjunct teaching.

Ashley described how difficult of a transition it was for her going from the private sector where she worked 50-60 hours per week with nights and weekends included to the life of an adjunct instructor. She specifically mentions that she gets frustrated hearing other full-time and adjunct instructors complain about how busy they are.

I know that teachers have prep time and I know they have work time. Pretty much they can get their work done in a 7-8 hour day and then have a day to work from home or do a constructive schedule so they are not there 40-50 hours per week. Sure, there are times when they have to be on campus, but it was hard for me to listen to them complain because they have the flexibility.

Ashley also faced a struggle at her institution of not getting drawn into the different sub-groups within the nursing program. She described the situation as someone having an issue with another faculty member and then trying to recruit others to take sides, “*I always try to be ‘Switzerland’ because I don’t like getting involved in that stuff.*”

Even though Ashley did have some frustrations and experiencing a little bit of a cultural shock associated with the transition from practice into academia, her college did offer PD for their adjuncts. She participated in the PD program for adjuncts at the beginning of the current academic semester. The PD offering for adjuncts at Ashley’s college is fairly

new so she has only participated in a couple of meetings thus far. The topics offered at the most recent meeting discussed teaching strategies, resources for student assistance, and interaction with other faculty for mentoring the adjuncts.

In addition to the on-campus PD Ashley participated in, her college also paid for her to attend additional training at a state-wide simulation day. This simulation day provided more training for her in the use of automated nursing mannequins that many nursing programs incorporate to simulate real patient experiences. Ashley described what attending the PD programs meant to her in her role as an adjunct.

I think it is my responsibility as a professional to go to those offerings. The teaching strategies session and the open discussion with other faculty were the two that were most valuable to me. Without [professional development] I would feel like a second-class citizen there. I guess I would feel not valued as an adjunct.

Even though Ashley was very strong in her opinion on how it would make her feel if her institution did not offer PD programs, she would continue her employment as an adjunct because of the flexibility of the job and how that fits with her current situation.

Ashley described the great mix of people that she has met at her college through her role as an adjunct instructor. She described those individuals as having a broad range of experience and specialties.

Several of the instructors I just have learned so much from and I would really miss that exchange of ideas. I have an instructor that I work with a lot, we build a simulation or work on skills evaluations and it makes me feel like I am part of the profession there.

Ashley described the relationship she developed with the instructor she frequently works with as a personal friendship that she would go out of her way to maintain contact with if she did not return to her adjunct role.

Ashley stated several factors related to her role as an adjunct that provided her with satisfaction in that role. The students, instructors, and respect for the program she teaches in provide her with a high level of satisfaction. Particularly, being a part of student success is a very gratifying experience.

It is an amazing, wonderful, warm feeling watching students succeed. It is even better when I get an occasional phone call to say thank you. It is wonderful. There is a sense of satisfaction, especially when you see them [the students] performing things that you were hoping they knew and were capable of. It is amazing; it is like watching your kids grow.

Ashley did bring up one aspect of her role as an adjunct that caused her a level of dissatisfaction with her position. She feels that adjunct instructors are given the classes and the teaching assignments that none of the full-time faculty members want. It gives her the sense that some of those classes are beneath the full-time instructors and that adjuncts are not capable of teaching some of the classes the full-time instructors teach.

Ashley was asked to explain how she would tell someone she just met one thing about what she does for a career. Very quickly, she provided a very decisive statement about her role, *“I help build nurses.”*

She was also asked what job she would accept if given the choice of a part-time nurse and an adjunct faculty member and the reasoning behind that decision, *“I would take the adjunct position and the main reason is the lifestyle and my family. If you are a part-time staff nurse at a hospital that doesn't mean anything. When they need you, you are working. I think I would choose the adjunct and I would do it all over again.”*

Ashley did share that she set some personal goals for herself prior to beginning her role as an adjunct instructor; however, she did not provide specific examples of what those goals were. She said that her goals are always evolving and that sometimes it depends on the

class she is teaching or the students she has: *“I think I am doing well with my goals but there is always more. I always want more out of myself and I want more out of my students. I want to understand their needs better.”*

The final thing that Ashley discussed was the recognition that she received from her college. Although she has not received any formal recognition or awards, she received a letter from the nursing director before the current semester began. The letter was sent to all of the adjuncts but there was a handwritten note on her letter from the director. That note said: “You are the best! Love you Ashley!” Receiving those handwritten words meant more to Ashley than any type of award or formal recognition.

Beth

Teaching was a career that Beth wanted to pursue when she was a child. She described that during the time she was growing up many of the country schools were being taken down and her father and grandfather ended up with many of the desks from those old schools. Those desks found their way to Beth’s basement where she played school with her siblings. As Beth progressed into high school, she stated she was pretty lost in terms of what career she wanted. One day a college recruiter came to visit her high school and presented information on nursing. It was at that point that Beth realized nursing was a potential career for her.

The role Beth’s family played in her career choice was very influential. Both of her parents stressed the importance of education because her father only had an 8th grade education and her mother had to withdraw from nursing school to help raise her siblings after her mother’s death. Beth’s parents established a college fund while she was in kindergarten

and going to college was definitely going to happen. She described her parents as being very progressive for the time because they believed their daughters could do anything, not just in the traditional female dominated careers.

Outside of her family, Beth received encouragement and influence from the local minister. The minister stressed how big and wonderful the world is and to go out and experience it: *“He told us to go do things and not be afraid. I think that was a wonderful message, especially during in my late adolescence and through high school.”* In addition to the minister, Beth received encouragement from one of her teachers. Beth described herself as a student that was lost in the middle, not at the top of her class but not at the bottom either.

Nobody really paid much attention to me. I had a teacher that pulled me aside when I was either a Junior or a Senior and said to me; ‘do you know how smart you are?’ I never thought that I had that ability. He said I could do whatever I wanted to do. That was very empowering to me because I had no idea that I could do anything that I wanted.

Beth explained that during the time she was finishing high school the mentality of the traditional male and female role was changing dramatically in the United States. This cultural shift provided substantially more opportunities to Beth than would have been available to previous generations.

I remember having discussions with my friends at the time that we could do the traditional female things like teaching, secretarial work, and nursing or we could do other things. There was kind of this empowerment thing that we are going to be nurses and we are going to be nurses that choose to be nurses. We were going to take this very powerful profession and go at it with a feminist idea.

Beth could not specifically describe what caused her to want to pursue nursing, she just *“remembered something changing.”* College was always in her plan and the only thing she was certain of was that she wanted a baccalaureate degree when she completed college.

At the time when Beth was entering college, many nursing programs were hospital-based diploma programs. A college offering nursing degrees was a fairly new concept but she knew that was what was best for her. When she enrolled in college at a liberal arts institution, the idea of studying for a specific career did not make sense to her. As Beth's education played out, the idea of a career and an education was a decision she was glad to have made.

After Beth graduated and transitioned into her career as a nurse, she actually only expected to be a nurse for a very short amount of time. She was not particularly fond of her clinical rotations and really struggled to develop her identity as a nurse. Beth's nursing director asked her what did she see herself doing and Beth replied that she wanted to work in nursing policy or maybe politics. Her director explained that those are great options to pursue but she needed to get at least one year worth of experience working as a nurse so she could establish credibility before moving on to the policy or politics arena.

Reluctantly, Beth took a nursing job at a large university hospital over 8 hours from where she grew up. She was very scared because she was unsure if she even wanted to be a nurse and she was a long distance from home.

I think I cried the entire drive down there. I was living in a staff dorm they had for new employees and I had no idea what was ahead of me. I was happy that I was at a university because that was very important to me. I wanted to be where there was cutting edge care and that I would have an opportunity to further my education.

Beth ended up working on a neurology floor at the university hospital just to get her 1 year of experience the nursing director told her she needed. However, Beth had an unanticipated experience at this first job.

I was on the neurology floor and within six weeks, I fell in love with nursing, I fell in love with patient care. I realized when I didn't have someone watching over my shoulder all of the time, I could develop my own style. Then I had to rethink my career goals because I wouldn't have the career I was anticipating.

As Beth's career flourished from the new graduate that was unsure if nursing was even in her future. Today, Beth describes herself as a very deeply involved person with her patients, *"I have always told my students that your identity as a nurse is not tied to a paycheck so I consider myself a nurse in everyday life too."* Beth doesn't stop being a nurse when she leaves the hospital at the end of her shift. She constantly consults with people at her church to help them sort through some of their healthcare decisions.

In her experiences, Beth had other people react very positively to nurses because she thinks nurses connect with people and most have the opinion that nurses are wonderful people. Beth also described that people generally tend to respect how nurses act professionally when dealing with patients. Beth shared what her personal definition of professionalism was: *"I think of it as having a plan. You deal with what you need to today, but you are also looking ahead. Whatever you deal with now will have an impact down the road."* Part of Beth's career plan as a child was to go into teaching but her career started out in nursing. Eventually, Beth's childhood plan came to fruition because she began teaching nursing students as an adjunct instructor for the last ten years.

Beth was always looking ahead in terms of her own education eventually earning a Master's in nursing degree. Although she did not have any immediate plans to utilize her Master's degree, she knew it would pay off for her in the future. It paid off for Beth because the state she works in requires anyone teaching in a nursing program to hold a MSN degree. One encounter with a frustrated student convinced Beth to adjunct teach.

I was working at a hospital and one night one of the LPNs came to work and he was continuing his education in the BSN program. He was just about finished with his education but was so frustrated because his clinical was cancelled for several weeks because they couldn't find an instructor. He asked me why I was just sitting on my Master's degree? 'Go out and teach!' That very night I went online and looked for opportunities and found an open adjunct position. I started teaching the next semester!

One of the things that impacted Beth the most early on in her new role as an adjunct was the concept of academic freedom. Working as a nurse in a hospital, Beth had very little freedom to deviate from department policies and procedures to deliver care. She quickly learned that in higher education, as long as she taught the specific learning outcomes for a particular course she could make it her own. In addition to having academic freedom, another aspect of her adjunct role she appreciates is that she is not a part of any academic committees and does not need to attend many faculty meetings at her college.

Beth was asked to describe what type of training or development the college provided to her for her role as an adjunct. Before her first semester teaching, Beth's college did not provide her with any type of orientation or development. She described it as *"being thrown out there into teaching the course."* She did have the ability to work with a peer mentor before her first semester to better understand what she needed to do: *"I am very grateful for that day the other instructor mentored me. It is scary how little prepared adjunct faculty are for what we are sent out there to do. We are very good nurses but the whole idea on how to safely handle a class isn't really there."*

Even though Beth did not receive any training other than some peer mentoring prior to her first class, about three years into her adjunct teaching, she was able to attend a two day nursing educator conference. The topics covered at that conference related to legal issues with teaching nursing students, how to manage a classroom, and other topics specifically

related to adjunct instructors. Beth stated that the conference was excellent for her in terms of reinforcing the work she was performing as an adjunct but it was probably a little late for her. The timing of the conference would have been better when she was a brand new adjunct. Beth's institution does provide adjunct-specific training for all adjuncts that work there but it does not have anything to do with nursing education so she rarely attends those meetings.

Beth did explain that she would have liked to participate in the adjunct nursing educator conference at the very beginning of her teaching career. She really didn't appreciate the legal implications and the risk associated with clinical teaching. Beth was bothered by this lack of development but she just figured that was how it was. Beth was pretty adamant that new adjuncts need some sort of workshop or orientation so they can figure out what all is involved with the adjunct position.

Beth did describe what she believed were the differences between how adjunct nursing faculty and full-time nursing faculty view the role of adjunct instructors. While working as a full-time nurse, the consensus was the people that took the part-time nursing jobs were only doing so to earn enough money to buy a new household appliance and then quit once they had enough money. She thinks that the full-time nursing faculty do view adjuncts that way.

I think there is a little bit of that from the full-time faculty that the adjuncts are just dallying in teaching and do not take it seriously. They [the full-time instructors] do not see that adjuncts are an important part of the profession by passing on knowledge to the next generation of nurses. My sense is that it could be some workload that full-time faculty see this as a job and the adjuncts see this as a calling. With the position that I am in I do not need to be working as an adjunct, but it is a life's choice that I want to work as a teacher. I think that can cause a little bit of friction between the faculty.

Beth was asked to describe how participating in PD has affected her professional identity. Because she is not participating in any on-going PD for her adjunct position, her response reflected how she currently views herself.

I consider myself a nurse first but education is part of being a nurse rather than being an educator where being a nurse is part of being an educator. I do not see how that works. I am in nursing for something other than just the money, there is something other than just a job, it is something there for me in teaching.

If given the choice of selecting to work as a part-time nurse or an adjunct instructor, Beth explained that she would definitely want to take the adjunct position. Beth mentioned how she loves teaching and especially the courses that she teaches, the content is in very intense bites. At most, a class lasts the full 16 weeks of a semester, but some of her courses are 8 or 10 weeks courses. *“I only have the students for a few weeks and that is very exciting. I know that the course will be over very soon and I like that change. This is probably just part of my personality makeup.”*

Even though Beth did identify herself as a nurse first, she does feel tremendous gratification when her students are successful. Overall, her experience as an adjunct has been a very positive and satisfying experience. She said that she is very flattered when her students contact her four or five years after they graduate to ask for advice on how to write a resume or tips for interviewing. Beth’s current adjunct position is teaching in a nursing associates degree program. She finds it very exciting and satisfying to find that her students continued on their education and ended up with a BSN or MSN degree.

Beth was very passionate when she described how satisfying it is to influence the next generation of nurses. She also is very passionate about being an advocate for her students to other nurses and instructors in the program.

We had a student in class that had an interesting haircut but it was within all of the program policies. The faculty was up in a huge uproar over how the hospitals and patients were going to take this haircut. I spoke up for this student and asked why this was any different than people with tattoos or multiple ear piercings. I said that he would be fine and I found out later that he was fine and the patients had not problems with this student's hair.

Beth described that her students are the most influential people that she has met through her adjunct nursing position. Because her college is situated in a more urban environment, Beth gets to work with students from very diverse backgrounds and cultures. The needs of those students vary tremendously and Beth embraced some of the challenges needed to help those students succeed in the nursing culture.

Beth does not believe that she would maintain contact with any of her colleagues from the college if she did not return to teach another semester. She stated that some of the lack of contact comes from living in an urban setting because there is less opportunity to meet up with those people. Another part of it comes from not having a lot of contact with the other adjuncts and full-time faculty because of the lack of on-going PD that did not give her an opportunity to develop those relationships.

Beth did set some goals for herself prior to the beginning of each academic semester. However, since many of her courses are very short, intense courses, many of her goals are very short-term as well. *“One of my goals is to add something new every year. Either teaching a new discipline or a new technique. Next semester I am teaching my first online class and I have never done that before. So, yes I am accomplishing the goals that I set for myself!”*

Beth described another goal she sets is to make a difference outside of her expected role as an instructor. She tries to get students involved with service learning to get the

students exposed to how to help people outside of the hospital setting. She wants to ensure that her students' identity is not tied to a paycheck.

Anne

When Anne was growing up she described herself a child that loved animals and being in the outdoors. Even though her mother thought that veterinary offices “stunk,” her parents were very supportive of whatever career Anne wanted to pursue. Anne recalled that her parents emphasized that it was her choice to pursue whatever her passion was and they didn't want to make any decisions for her.

Even though her desire as a child was to be a veterinarian, at some point when Anne was in high school a nurse came and spoke during one of her classes. Anne did not recall any defining life experience that changed her interest from veterinary sciences to nursing, she just remembered thinking nursing was something that she wanted to do after hearing the nurse that came and spoke to her high school class.

Anne did not have many role models in high school outside of her immediate family, but she recalled the mother of a child she would occasionally babysit had some bearing on her decision to pursue nursing. The child's mother was a nurse and had gone through nursing school. After discussing the career with the mother and remembering the visit from the nurse from school, Anne decided to fill out an application. The biggest advice that she received from the mother she babysat for was to avoid attending the hospital-based diploma programs.

The hospital-based nursing programs were beginning to get phased out in the late 1980's. She had the foresight to tell me to be successful later in my career that I would need more than just a diploma in nursing. I did enroll in a

diploma program but I also continued my education and got my Bachelor's in nursing and eventually my Master's in nursing.

Anne did not have a tremendous desire to go to college after high school but the influence and information that she received about nursing convinced her to attend nursing school right after high school.

During nursing school, several of Anne's instructors had an influence on developing her into a nurse. *"I had two obstetrics/gynecology instructors that were just very good and very supportive. They were both very casual but very experienced. They were really friendly and supportive for me which is what I needed as an inexperienced student."*

Anne described that she was very excited the whole time that she was in nursing school and really believed that she was a nurse from very early on in her education. She never really described any defining experience during her time as a student, she just remembered always feeling like she was a nurse all through her education.

Anne did share that when she was a new graduate approaching her first job as a nurse, she was pretty scared because it was her first job as an adult: *"I was glad nursing school was over because it was extremely difficult, but I was excited to be working. I started working in the hospital where I went to school so I knew people. Since I trained there I was confident as a new graduate."* She described that she knew the material they taught her during her nursing program, but *"there is so much more to know than what is in a textbook."* Over 20 years working as a nurse, Anne describes herself as much more confident now than when she was a new graduate, but she tries to treat the patients with the same respect she did when she was a new graduate.

Because Anne has been a nurse for several years, she described that people typically react very positively when they find out that she is a nurse. She said that the research shows that nurses are the most trusted medical professionals in the hospital and that resonates with the people that interact with nurses. Because Anne declared that nurses are the most trusted professionals in the hospital, she was asked to explain what her definition of being a professional is.

I think that as a professional you want to be approachable. You have to maintain a professional distance from your patients because you cannot get emotionally attached to their situation. Being professional means you need to know what you are doing and the most effective way of doing it.

Anne has had tremendous experience as a staff nurse but just over a year ago she began working as an adjunct faculty member for a local nursing program. She is currently in her third semester of adjunct teaching. Her main desire for getting into teaching was wanting to see students get a good education and graduate. Before getting into her role as an educator, Anne expressed concerns that the new graduates entering the workforce may not be as prepared as they need to be. She stated that she question the quality of current curriculum before starting as an adjunct.

Anne got her break into teaching when a friend who teaching full-time at a nursing program reached out to her and asked her to consider teaching a class.

I wanted to share the excitement of nursing with students. I wanted to show them the correct way of how things should be done. Even if my friend would not have approached me to teach, I would have probably still looked into working as a clinical instructor or a lab instructor like I am now.

Anne was also able to better understand what the current curricular requirements are for nursing programs so that has helped alleviate her concerns of the quality of education nursing

students were getting. She wanted to teach to be sure that the curricular requirements were being taught correctly.

Anne declared that her students are the people that have impacted her the most in terms of being an adjunct instructor. She said that it is very gratifying at the end of a course or the end of the semester to have a student tell her that she was their favorite instructor or they liked how she taught a particular topic. Since Anne has only been teaching for a little over a year and because she teaches sophomore level students, she has not yet had any of her students reach graduation. However, seeing the small victories that her students achieve at their level of the program is very satisfying for her. *“I get excited when I see they are interested in a topic or they understand or get it.”* Anne described that she feels much more paternal towards her nursing students than she does for her patients. She believes that her relationship with the students is a much more nurturing while the patient relationship is much more caring or compassionate. Anne wants her students to grow and be successful and she wants her patients to feel well and recover from whatever illness they are suffering from.

Because Anne is new to education, she described the PD provided to her from her institution. Up until the current semester, she had not received any type of training or development from her college. She even stated that the only training she received was her first performance review. Anne stated that the only knowledge she gained on student grading, communication, and online course management was *“picked up as I went along.”*

Because the amount of PD that Anne received was minimal, she was asked to describe how her transition into education would have been different if she did get training or orientation.

I think my first semester would have been much more organized. Like I said, as an adjunct here, you just pick things up as you go. After my performance review a few weeks ago, we decided that we are going to get together and co-develop the course for the next semester. We are also going to get more organized among the faculty. So that made it sound much more exciting.

Anne also shared that her decision to continue adjunct teaching was directly tied to how much input she was allowed to have within the program. If the program administrators and other faculty are willing to listen to suggestions from the adjuncts on how to improve the curriculum or content within the courses, she would continue teaching as an adjunct.

Anne does not communicate regularly with many of the other faculty or adjuncts at her institution. She did mention that she has a few instructors that she is friendly with, but it is strictly on a professional level. Anne has not developed any personal friendships with any of her colleagues at the college. Anne would only keep in contact with the people that she has met through her adjunct instructing if she needed a professional contact or some type of networking. Even though she has had a positive experience with the other personnel in the program, she believes other adjuncts have not had as good of an experience. Most of the issues surrounded on what adjuncts were chosen to teach certain classes each semester.

Anne was asked to respond to a scenario where she could only describe one thing about her career to someone she was meeting for the first time. She responded; *“I do prenatal care, I take care of you while you are pregnant.”* She then replied to a second scenario where she needed to choose between two jobs, an adjunct position and a part-time staff nurse position. Anne responded that she would accept *“the staff nurse for patient care because nurses take care of patients.”*

Most of Anne’s satisfaction with her adjunct position comes from interacting with her students.

I'm satisfied with my role as an adjunct because I have a good class size and I have a good lab facility. The students have the resources they need to be successful. Mostly my satisfaction comes from the students and their opportunities, but also the school works with my schedule. They schedule my classes when I am available.

Anne did set some personal goals before she started teaching in the nursing program. Her primary goal was to be able to effectively deliver the information in the course to the students so they understand it and are excited about the topic and nursing in general. She self-assessed how successful she was on her goal and she rated herself at only 50% because “one class got it and the other class could have cared less.”

The final thing that Anne discussed was any type of recognition she has received for her role as an adjunct instructor. Although Anne has not received any type of formal recognition yet, she did state that it was helpful getting the informal feedback during her recent performance review. She said that during that review they discussed the course evaluation surveys that the students performed at the end of her last class. Anne enjoyed that feedback because she stated it can help her make improvements in how the information is delivered to the students. Overall, she does not feel that any type of reward or recognition would make her more satisfied with her role as an adjunct.

Nurses in general do not need external validation or they wouldn't be nurses. I would like to know that the students got the information and that they appreciate it. I do not really need validation from the school or the other faculty.

Donna

Donna's career aspirations when she was growing up were on the very opposite end of the spectrum from nursing. While she was in grade school, Donna dreamed of being an

astronaut. However, in high school the reality of finding a career began to set in and Donna aspired to be an accountant for a career.

The astronaut thing was just a child being crazy but the accountant thing, I really did enjoy number and I enjoyed math in high school. I didn't really know what was out there for other types of careers and accounting just appealed to me because of the math involved.

Donna's family was very supportive of her educational needs and always pushed her to attend college. Donna's mother has her doctorate in education so it was always expected that her children have a college degree. Even with a mother with an advanced degree in education, Donna was never pushed in that direction. *"It is kind of ironic that my sister ended up in education and I ended up a nurse!"*

Outside of her immediate family, Donna credits her grandfather as a very positive influence on her growing up. Although she could not recall specific examples of the types of lessons he taught her, she just remembers that he was a farmer and taught her the value of a strong work ethic.

Even though Donna wanted a career dealing with math and numbers, she needed a job while in high school to make some money and the only job available in her town was as a CNA at a nursing home. After seeing what the nurses had to do in the nursing home, she knew that was not something that she was interested in doing so she never really considered a career in healthcare.

Eventually when she made it to college, she spent the first part of her education as an undeclared major. She was unsure the route she wanted to pursue and remembered she did some job shadowing for a dentist and an occupational therapist. Eventually she ended up taking the prerequisites to become a physician assistant (PA). She didn't feel like she would

have gotten accepted in the PA program so she decided to take a semester off from school. During that time off she worked as a CNA at a large hospital and got to witness what nurses did there and decided that nursing was what she wanted to do.

Donna enrolled in a nursing program but had a very difficult experience in her last semester of the program and never identified herself as a nurse. She eventually endured through the difficulties and graduated. She recalls that she didn't feel like she was a nurse until she graduated and passed the board certification exam. Because of her unpleasant experience during her last semester, Donna entered the workforce with a very fragile demeanor. However, she met two staff nurses that really help shape her identity as a nurse.

A few of the nurses [at my first job] were very kind and they would take the new graduates and take us under their wings. That made it a really great experience and a really positive place to work. Those first six weeks of orientation at that job is where I really felt like, 'yeah, I can do this and I am a nurse.'

In her early career, Donna described how intimidated and unprepared she felt as she approached her new job. Although she was excited to have a job, she did have some insecurities with her ability as a nurse. Today, Donna describes herself as a much more confident nurse. When she was a new graduate, simple tasks were challenging because of the lack of experience. After several years of experience, those tasks are just “second nature” to her. She is able to rely on her knowledge and experience to deliver care to patients that she did not have as an inexperienced new graduate entering the workforce.

Donna described her best memory as a nurse was when she received a thank you letter in the mail from a patient. Even though taking care of people was part of the job, Donna really felt a very special bond with that person and was so touched that she received a

letter from the patient. Usually, when patients leave the hospital, nurses lose contact with them so to receive a thank you letter from a patient really meant so much to Donna.

Donna believes that most people are very respectful of the nursing profession and believe that nurses are very kind and compassionate people. She also thinks that overall, people are very trusting of nurses both at work and outside of work so people are generally quick to share personal stories with nurses. As a nurse, Donna's definition of being professional primarily revolves around both giving and receiving respect. *"A big component of being professional is to actually know that you what you are doing and display that. Then if you do not know something, be honest and tell whoever that you do not know and they will find that information out."* By displaying that level of professionalism people respect when nurses communicate honestly with them and it helps foster relationships with patients and coworkers.

Donna is a relatively new adjunct nursing instructor just having completed her second semester teaching. Her journey into education started when she was working on her MSN degree knowing she could eventually teach with that degree. She worked for several years as a nurse practitioner but her family had to move to a new town that had fewer opportunities for nurse practitioners.

I just thought would get my name up to the college and let them know I was interested. Nursing schools now are looking for Master's prepared nurses to be adjunct so I figured I had a chance. A few semester went by and last year they called and offered me a position. The timing was right and it kind of fits my life!

Donna's first experience with PD related to her teaching was she attended a conference over the past summer. The conference dealt with de-escalating students that may have violent tendencies.

The conference put a whole new perspective on nursing education in a very good way. It wasn't just about de-escalating violent students, but we also discussed do we educate students enough to make their education their own. We discussed not just making students jump through hoops but make them gain the knowledge that they need. As instructors, we are there to help them meet their goals.

In addition to attending the conference, Donna's college allows her 16 hours per semester of orientation. This orientation mostly consists of peer-mentoring with other faculty and some of the clinical personnel where the students will be attending their clinical rotation. Donna does confess that the time for orientation is appreciated but "it would be nice if it was more education for myself."

Donna further elaborated on what type of education or development she was seeking as an adjunct instructor. She is looking mostly for more training for student grading, how to better manage the students' time, and more feedback on her performance as an adjunct.

Other faculty are available to answer my questions when I have them but more feedback would be nice. I know they are in a tough position because they have their own workloads and they don't want to have to be double-checking the work I am doing with students. Overall, I am pretty confident with what I am doing but more training on how to grade students and better feedback on my performance is what comes to mind right now.

In addition to the grading and feedback, Donna would like more training on how to better manage her classroom situation. An area she knows she struggles in is making sure that she is best making use of her students' time.

Donna believed that the timing of the conference she attended over the summer was perfect timing for her to maximize her development as a teacher. She had just completed her first semester of teaching and the information she gained from the conference made her more confident in her role as a teacher.

It was timed pretty well because I think if I would have went to it before I started teaching, I would have definitely been intimidated. Since I had already taught for a semester, it really opened my eyes about how to help the students make their education their own.

Donna shared that she was not likely to continue teaching for that nursing program if they eventually stopped offering her PD opportunities.

Donna has met some people that have had a positive effect on her role as an adjunct faculty member. She works very closely with two instructors that teach both the didactic and clinical courses. She is required to work very closely with them in the course that she teaches and they have provided her with tips for instructing the students. She described that she has developed a bit of a relationship with one of the full-time faculty there and that makes Donna feel like she is part of the culture when she is on campus. *“She always goes out of her way to say ‘hi’ to me and ask me how my classes have been going. You know, when I see her up on campus she is aware of who I am and she actually has in interest in how I am doing and that makes me feel good.”*

Although Donna has met some wonderful people at her job, at this point of her adjunct career, she would still consider all of those relationships as work acquaintances. She believes that the longer she teaches, the more likely she will develop closer personal friendships because that process takes time. Currently, Donna said that she probably would not keep in contact with anyone she works with if she did not return as an adjunct.

Donna gets tremendous amount of satisfaction for her role as an adjunct by working with students. When her students are successful it gives her a sense of purpose with her role.

Even when I am grading care plans, I love it when a student gets it. It is really encouraging for me because I can see the future of nursing and I know there will be quality nurses out there to take care of my family and me when I need them! It is so rewarding.

In addition to the satisfaction from working with students, Donna described the rapport with the other faculty can cause her to be both satisfied and dissatisfied. She explained that it works both ways because she is still trying to find her comfort level among the other nursing faculty. *“I think the more I know about what is going on with the students in their other classes, as far as not just their clinical experiences but what is going on with lectures and their testing, that definitely helps with my satisfaction, too.”*

Donna was asked to describe how she would explain one thing about her career to someone she was just meeting for the first time. She was very clear and stated, *“I educate students to be the next nurses out there.”* She was also asked to explain if she would accept a part-time staff nurse position or an adjunct nurse position if she were offered both.

I would be a staff nurse because it would be easier. I don't know? Nursing education is hard and it is really challenging. When you are a staff nurse, you go to work, you get the job done, and then you go home. This is a whole different ball game.

Donna did set personal goals before she started teaching as an adjunct. She said her goal is not very measurable but she wants to give the students an experience where they can learn something. Because she described her goal is not very measurable, she couldn't assess where she was in terms of accomplishing her goal. *“If the students came out of my class and learned something or their time was well spent, I would feel like I am doing something right.”*

Donna has not received any type of formal recognition for her role as an adjunct educator. Although she doesn't think that recognition would provide her with any more satisfaction with her role, knowing that the nursing faculty appreciate her work is what is important. The final comment Donna made really summarized how she views herself as an

adjunct nurse educator. *“You can see that I still haven’t identified myself with the university enough yet because I call them ‘them’ and ‘me.’ I just want to be appreciated at this point because I know I am new and earning my place.”*

Margaret

Margaret grew up in and around hospitals and medical professionals all of her life. Her father was critically ill and was in and out of the intensive care unit and on and off ventilators for most of Margaret’s childhood. Growing up in the medical environment had a lot to do with Margaret’s eventual career choice of becoming a nurse. However, at the time she had career aspirations to graduate from high school, get married, and have children. While in high school Margaret did enjoy drama and the theater arts and was enrolled to go to college right out of high school. A week before college was to start, she decided not to go and finally returned to college in her 30s.

Margaret grew up in a very middle class family; her mother had attended some college and worked as a dental hygienist and her father had a factory job until he became ill. Eventually, her mother had to quit work to take care of her father so much of Margaret’s influence came from outside of her immediate family. Many of the people in the community helped care for Margaret and her siblings because of her father’s illness and her mother being at the hospital with him.

It was a small town so everybody knows everybody. It is like a large extended family and we had the respect of everybody in town. I don’t know if there was every really one person that influenced me that I can put my finger on, but just a bunch of good caring people that helped us out. I don’t think I ever really looked at one person and said, ‘I want to be like her.’

After deciding against college, Margaret landed a sales job, got married and started having children. Around the birth of her last child, she realized that she wanted to do more with her life and be a breadwinner to support her family. It was at that time, she decided to enroll in college.

I think truthfully and honestly my decision had a lot to do with the circumstances I was in. I was married but in a relationship where I was not very happy. I had a friend that had been a single mother and she was going through nursing school. I thought if she can take care of her three kids, I can take care of my kids while in school too. I just felt like it was time that I did something with my life.

Once in nursing school and her self-confidence increased, Margaret knew that nursing was the correct choice and it was what she needed to do to take care of her family.

When Margaret graduated from nursing school, she was very confident in her abilities. As a new graduate, she described herself having much more life experience than the typical 20-something graduates. *“I was ambitious and ready to learn. I was like a sponge!”* When Margaret started her first job she got a report on her first patient and just remembered being scared and asking the head nurse, *“what do I do now?”* Margaret recalled during her education, she mostly felt like she just followed other nurses around and did what she was told. She was really unprepared for being autonomous as a nurse. That first head nurse had a tremendously positive impact on Margaret as a nurse. She calmed Margaret down and explained to her what she needed to do to be successful.

Over the next several years Margaret worked as a critical care nurse and had experienced the highs and lows of taking care of the most critically ill. After gaining that experience, she believes that other than having more experience, she is the same nurse she was right after graduation.

The funny thing is no, I am not a lot different now compared to then. I find something that works for me and I am happy to show it to someone else. I am always happy to help. When I first started out as a nurse, I was open and just happy to be there and help out in any way and that is how I am today.

Because Margaret has dealt with countless life-affecting situations in her role as a critical care nurse, she was asked to describe what her best memory is of being a nurse.

Although she did struggle to come up with an answer, her best memory of being a nurse comes from her students.

When I have these students, and I don't know if they are sucking up or they think it is going to help their grade or what. When they come up to me and say 'Why don't you teach? You should teach! It is just something about the way you describe things or the way you word it.' I can see this light bulb goes off over their heads and they are pulling it all together and they are linking all of these little pieces they have been learning. You know, I am on codes [life-threatening emergencies] all of the time and I have done lots of great wonderful things as a nurse. I tell you though, what keeps me going is when I can see my work making a difference in the students' lives.

Generally, Margaret described that the people she comes into contact with are very respectful and a little bit in awe of nurses. She believes it is even more so for her because she is a specialty trauma nurse. “It is part of my persona or my identity.” Because of the specialty that she works in, people almost have a reverence for the type of work she does. Margaret believes that being a trauma specialty nurse is not for everyone and that people do have even more respect for those nurses.

Because of her role as a specialty nurse and the situations she has experienced throughout her career, Margaret described what her definition of being professional was. She believes that being professional is at a person's core, doing what is right in order to help whoever it is, whenever it is, however you can.

Being professional also means keeping up-to-date with your medical advances by attending classes, furthering your education or attending seminars, doing

online or at home education, reading, or just talking to peers. You have be open to new options and sharing the information and the knowledge that you have to better everyone else.

Margaret just started her fourth year of adjunct nurse instructing. During her time working in critical care, several people thought that she would make a really good instructor and encouraged her to explore becoming a nursing instructor. Because of her busy work and family life, Margaret never seriously considered becoming an adjunct instructor. One day she received a phone call from the director of the nursing program that she had attended several years earlier.

They needed an instructor and she [the director] knew I lived in the area. I asked what was involved because I was a single mom working a full-time job. She told me that it was two mornings a week which was perfect because my full-time job is on the weekends and my kids would be in school at that time so they wouldn't even know I was at work. People seemed to like how I showed them how to do stuff and not feel stupid when they have a question. I decided to check into the adjunct position. It turned out that I really liked it!

Margaret's students have provided the most impact for her in terms of being an adjunct instructor. She stated that when she has students and they do their evaluations on her course, every year the students' responses are all positive about her teaching style.

I ran into a girl today and she said 'do you recognize me?' As soon as I saw her I thought I knew her from somewhere. She said 'you were my instructor 2.5 years ago and I always liked how you never made me feel stupid when I asked a question or if I didn't know you always explained why you did the things you did.' Now she is a nurse and it turns out she is my co-worker. So that was a really neat experience and makes me feel good about what I am doing as an instructor.

Margaret described her teaching philosophy as “*I am going to shower them with information*” so the learning curve is removed for the students and they can “*soak up*” as much of the information as possible. Margaret tries to allow each student to develop her or his own style of nursing, not just copy the style of the instructor.

Margaret actually declared that when she sees a student progress through her course and be successful, it actually makes her feel a little upset.

I am real happy for them but I start second-guessing myself. Did I do a good enough job, could I have done a better job? Even though I must have done okay, I realize that I didn't do everything they had other instructors too. I do wonder if I shared everything that I could have with them or did I put as much effort into this group as the previous group. It makes me want to work a little bit harder for the next group.

Although Margaret did not say she is striving for perfection, she does want to constantly improve herself and her teaching style so she does not become complacent in her role as an adjunct instructor. *"I always want to better myself and have no regrets."*

For her role as an adjunct, Margaret has participated in two adjunct PD meetings, one during her first semester of teaching and one at the beginning of the current semester. During those meetings, Margaret shared that very little of the time was spent discussing teaching styles, feedback, or the students. Some of the discussion did include some of the things the instructors needed to do, but it was mostly procedural like making sure the students were in the proper uniform, that all of their health records were up-to-date and the proper forms were signed. They spent much of the time discussing how the adjuncts needed to be trained to obtain the next level of teaching. So, if an instructor was trained in an associate's of nursing program, they needed to pursue their BSN, if they have a BSN, they need to work on an MSN.

Margaret was very candid about how she feels about her role as an instructor at the college she is working at.

I am kind of flying under the radar because I really identify with myself as a nurse, as a doer. As much as I love to teach and show others what I have learned and share that information with them, being in the classroom, paperwork, office stuff is not my cup of tea. I am just not a meeting kind of

person. If I can get the information from a piece of paper or an email that suits me better.

Nobody had even gone through what I was supposed to be grading these kids on. It is all just sort of evolved from reading this packet of what we are supposed to do our grades on.

Because Margaret had not had much pedagogical training related to her role as an adjunct, she has developed her own style from talking to other instructors. She is also very upfront with each new group of students that starts her course.

I tell them that I am going to be hard to find because I am going to be in the room with you and the patient at your bedside helping you and showing you. I try to communicate and tell people if I am ever off of the floor or whatever. I think I have done things a lot different than the previous instructor.

Margaret described that if she had information available to her that she could look at on different topics such as grading, classroom management, and conflict resolution, it would be an asset to her. She also stated for her life situation of working a full-time job and raising her children, if PD meeting attendance was mandatory, she would probably quit as an adjunct because the time demand would be too great. With her schedule, the material best suited for her are handbooks or instructions that could be available either as a hard-copy or online so she could self-select what is relevant to her.

Because Margaret has only attended two meetings throughout her adjunct career, she has not had much of an opportunity to develop relationships with people at the college. She said that she really does not have much to do with the college because she does not have an office or anything like that and only goes to campus when it is necessary.

I do have a couple of the other adjuncts that started about the same time that I did and we have kind of hit it off. I wouldn't mind spending more time with them but I have time constraints with my other job and my children.

I am making some connections that could be beneficial down the road and I am definitely building bridges. I feel like that these relationships will develop over time and could most certainly help me in my future.

Margaret was asked to explain how she would describe one thing about her career to someone that she was just meeting for the first time. Her response was very foreseeable considering her previous responses on her identity. *“I am an ER trauma nurse.”* Margaret was then asked to describe her thought process behind what position she would choose if she was offered a part-time staff nurse position or an adjunct instructor position.

If the nursing position was just in a general nursing unit, I would rather teach because working on a medical/surgical unit is not for me. Now, if it was a unit of my choice like the ER or ICU, by far I am going to take the nursing job.

Overall, Margaret declared that she is satisfied with her role as an adjunct instructor. The major sources of her satisfaction are the hours involved, that it is only a six-week course so she gets new students every six weeks, and the feedback that she gets from her students. Margaret mentioned that the longer that she teaches as an adjunct, it has become easier to come up with the wording for the students' evaluations that isn't harsh or demeaning to the students. The major aspect of her adjunct position that causes her to be dissatisfied is the amount of paperwork involved.

Margaret ended her story by describing the recognition she has received for her role as an adjunct instructor. Her college has not given her any type of formal recognition and she stated that she does not need anything formal. However, she did get some informal feedback from the nursing director from the student evaluations. The nursing director told Margaret that she is doing a great job. *“Just knowing that somebody is getting something out of my teaching, that is okay with me!”*

Themes and Analysis

The data collected and analyzed from the 10 research participants produced five distinct themes related to the phenomenon being investigated. The themes uncovered were identified in at least six separate participant narratives. The information presented below was compared with the literature on the topic of adjunct PD and used to help answer the research questions for this study. The themes identified within the participants included:

- Part of the practice of nursing is teaching
- Ongoing professional development fosters a teaching identity
- Participation in professional development reduces adjunct isolation
- Peer mentoring as part of professional development leads to higher adjunct satisfaction
- Lack of professional development leads to less job commitment

The participants' demographic information, the type of institution where they were employed, and type of PD received are shown in Table 4.1. The demographic information revealed that 9 of the 10 participants had already obtained an MSN degree while one participant was enrolled in an MSN program and was near completion. Six of the 10 participants worked at a community college and 4 of the participants worked a health professions school (AHSEC institution) and one worked at a private, Associate's degree nursing program. Because the participants have similar educational background and work at similar institutions, the findings could be applied to other adjunct nurses who have similar educational backgrounds and work at similar institutions.

Part of the practice of nursing is teaching

As discussed in Chapter 2, the professional identity of a nurse is a progression through several stages. King and Ross (2003) defined the process of role extension where nurses do things beyond their expected role as a nurse. Bastable (2008) and Swartz (2012)

described that teaching is a very important extension of the practice of nursing. For this study, it was crucial to determine how the participants described teaching in the context of their role as a nurse to better understand their transition into the adjunct role.

Seven of the ten participants in this study shared that part of their desire to teach nursing students as an adjunct instructor was a natural progression from the teaching that they do as staff nurses. Most of the experiences of the participants in this study centered on teaching patients about their condition, teaching newly hired nurses on their unit, or teaching as part of their personal professionalism. The narratives from many of the participants told a very similar story about how teaching an inherent part of the practice of nursing.

Jayne's response on how she transitioned into teaching very strongly supported the findings of Bastable and Swartz. *"Part of nursing is teaching. Nurses teach patients, each other, and nursing students. It is practice, but part of the practice of nursing is teaching."* Jayne described her role with new nurses as a mentoring role. She described that she loved taking nurses that were new to her hospital and being available to them to address their concerns or help them navigate through their new position. Jayne stated that her role as an adjunct lets her mentor students.

Jennifer spent significant time training new nurses on her unit and she described that part of her job as *"a very positive experience to be able to train new nurses. I was calm when talking with them so it made me take a look into teaching."* Jennifer received positive feedback from her trainee co-workers that they learned a lot from her approach to their training. Even though training new nurses was part of her job as a nurse, it provided her with the confidence to pursue teaching in a college.

Debbie's story was particularly insightful because she mentioned her desire to be a teacher stemmed from both teaching new nurses and her sense of professionalism. Debbie shared that she gets a tremendous amount fulfillment out of teaching and instructing new nurses but she did differentiate that "*educating students is different than being a mentor and training new nurses.*" This was a very insightful comment because it does help separate the identity of teaching as part of the profession of nursing and teaching as an adjunct. Debbie's comment will be expanded upon in the upcoming theme: "Peer mentoring as part of professional development leads to higher adjunct satisfaction."

Both Debbie and Margaret stated that their definitions of being a professional mean sharing their knowledge with others. Margaret stated "*being professional is sharing the information that you know.*" Similarly, Debbie offered that "*being professional means respecting your peers, being knowledgeable about what you do, and sharing that knowledge with others.*" Both of these participants shared that their desire to explore adjunct instructing was directly related to their sense of professional responsibility. Specifically, a local college approached Margaret to adjunct teach a course and she took the position because it felt like the right thing to do for the profession.

Jean's favorite memory of being a nurse was watching a young, inexperienced mother grow while Jean was caring for her pre-mature child in the neonatal intensive care unit. "*We were able to teach her to be a mom right there in our unit*" Jean recalled. Watching that transformation ignited a flame in Jean to pursue teaching. "*I wanted to share my passion because I love my field. It just seemed to fit that I would take on young nursing students and pass that passion onto them.*"

For Ashley, her career has been a blend of nursing and teaching. Her approach to being a nurse was to *“have the best range of knowledge to teach others.”* When working with patients and other co-workers, Ashley’s approach to teaching others to be *“easy going and approachable.”* Ashley’s response was very revealing because she also mentioned that after becoming a nurse, getting into teaching nursing students was always her goal, she was unsure if she would ever get to that role. Because teaching was part of her job as a nurse, her transition to nursing has *“worked out perfectly.”*

Beth’s story directly supported the theme of teaching is part of nursing. Her decision to become an adjunct instructor was the direct result of an interaction with a co-worker. Her co-worker was furthering his education in nursing the class he enrolled in was delayed due to the lack of an instructor. Beth went on the internet that night and started exploring opportunities to get involved as an adjunct because she did not want other’s dreams to become a nurse derailed because of a shortage of instructors. She felt it was her professional duty to take on the role of an adjunct.

For the three participants that did not explicitly state that teaching was a part of their role as a nurse, their rationale for entering academia varied from being asked to come teach a course or simply contacting the college to see what was available. Rose was one of the participants that did not state that teaching was part of being a nurse but she did share a comment similar to Debbie’s comment from earlier. Rose believed that *“teaching has a bigger influence on the development of nursing than the role modeling I did as a staff nurse.”*

The findings from the previously mentioned seven informants directly supported the literature reviewed prior to the collection of the data. Teaching is a part of the professional identity of being a nurse. However, this theme was more closely examined to determine if

the participants strictly viewed teaching as part of their nursing identity or if they viewed their teaching role as an exclusive identity.

Ongoing professional development fosters a teaching identity

Pedagogical PD was the phenomenon investigated in the qualitative component of this study. The literature on PD stressed its importance because many adjunct nursing faculty have no formal teaching training or experience (Shearer, 2008). Mentoring and adjunct orientation sessions were two specific pedagogical PD activities mentioned in the literature (Himmelberg, 2011; Shearer, 2008). Pedagogical PD activities promote the empowerment of adjunct nursing faculty (Himmelberg, 2011).

Eight of the ten participants in this study shared that participating in pedagogical PD resulted in their most salient professional identity as an educator, or would accept an adjunct teaching position over a part-time nursing position. It is worth noting here that the two participants that did not identify as a teacher as a result of their PD activities shared they received limited or inadequate PD. This will be described in-depth in a later theme: “Lack of professional development leads to less job commitment.”

Because each participant received her PD at a different institution, it is important to recognize that comparing the effectiveness of an individual PD program is not possible. Rather, these findings focused on the influence the PD program had on the study informants. Table 4.1 provides a summary the participants’ lived experiences through their interaction with the phenomenon being studied.

Table 4.1. Summary of the qualitative participants' pedagogical professional development experiences

Participant	Years spent as adjunct	Type of most recent PD	Is PD ongoing or single meeting	Saliency as an educator	Highest degree obtained	Carnegie Classification of institution where employed
Jennifer	3	Adjunct meeting for teacher improvement	Ongoing every quarter	Yes	MSN	Community College
Jayne	2	Adjunct night for policies and grading	Ongoing every Fall	Yes	MSN	Other, health professions (OHPS)
Rose	4	PD event for faculty and adjunct, mentoring	Ongoing every semester	Yes	MSN	OHPS
Jean	3.5	Adjunct orientation, mentoring	Ongoing every year	Yes	MSN in progress	Community College
Debbie	2	Two-day orientation, mentoring	Mentoring is ongoing	Yes	MSN	Associate's, private not-for-profit
Ashley	3	Adjunct day and off-site simulation training	PD is new at this college	Yes	MSN	Community College
Beth	10	Mentoring	Mentoring is ongoing	Yes	MSN	Community College
Anne	1.5	Performance review during current semester	PD is not ongoing	No	MSN	OHPS
Donna	1	Conference on de-escalating violent students	PD is ongoing every semester with 16 hours of orientation	Yes	MSN	Community College
Margaret	4	Adjunct meeting to discuss training	Ongoing every Fall	No	MSN	Community College

The individual narratives of the eight participants described the circumstances of how the experiences with the phenomenon shaped their identity as an educator. Rose went into substantial depth describing the PD activities her institution provides to her. Rose is the recipient of both attending PD meeting and having a formal mentor agreement with two full-time faculty members. The information covered at the PD meetings ranged from clinical changes, policy/procedure information, and student performance evaluation. All adjuncts at Rose's facility are notified at least 2-3 months prior to the meetings so they can place the meeting date on their calendars.

In addition to the information delivered to Rose and her fellow adjuncts, the adjuncts are given time to collaborate with each other. Rose said that the open dialogue among adjuncts "*gives us a chance to share what is working with one another.*" Rose's confidence as a teacher has improved as a result of attending the PD meetings and allows her and the other adjuncts to "*have a voice versus just being able to sit there and listen.*"

As a result of her participation in pedagogical PD and mentoring, Rose described her career as "*I help nursing students develop people skills.*" In addition, Rose would accept the adjunct position over the part-time nursing position. The rationale behind the decision was Rose believed that she has much more influence on the profession as an educator versus being a staff nurse.

Another participant that provided tremendous detail about her PD experiences was Jennifer. Her institution provides PD meetings every quarter and they last about 1.5 hours each time. Jennifer described the meetings as informal with an open dialogue among the other adjuncts. "*The meetings promote the camaraderie of the educational team.*" As a result of the team-building, Jennifer feels closer to the other instructors so she can defend

them when the students are complaining. Jennifer described her salient identity as *“helping people as an instructor.”* Similar to Rose, Jennifer would also accept the adjunct position over a part-time staff nurse. Jennifer’s explanation of why chose the adjunct position was because she still gets to do the things she does as a nurse, but with the nursing students.

Donna’s PD experience was attending a conference prior to the current academic year on how to de-escalate violent students. As a result of this meeting, Donna stated that *“it put a whole new perspective on nursing education.”* In addition to attending the meeting on dealing with violent students, Donna’s institution also provides her with 16 hours per semester of orientation for the class she is going to be teaching. Donna described her professional identity as: *“I educate students to be the next nurses out there.”*

Jayne’s institution provided her with a meeting for all of the nursing adjunct faculty members prior to the start of the current semester. The meeting covered the policy changes for the upcoming academic year and specific training on student grading. The meeting had over 50 people in attendance and Jayne was able to network with other adjuncts. When asked to describe her current professional role, Jayne did not include her adjunct activities in her definition. It is worth noting that she did not describe nursing in her definition either, rather she most closely identifies with the management position she holds at her current employer. Jayne stated that she would prefer to accept an adjunct teaching position over a part-time staff nurse. Jayne also shared that she is in the process of moving and might not be able to adjunct teach anymore. *“I am broken-hearted about not being able to teach but I have already applied to other universities.”* Even though Jayne did not describe herself as an adjunct instructor in her description of her current role, she does have an emotional

connection with being an adjunct because it affected her to possibly lose that role and she is actively pursuing other adjunct opportunities.

Ashley's institution has recently begun offering PD but she had only attended a couple of meetings. The most recent meeting was held prior to the current semester and it was an entire day dedicated to adjunct PD. The topics discussed at this meeting included *"going through information that helped the adjuncts do their jobs like teaching strategies and some updates to the program."* In addition to the on-campus meeting, Ashley attended a daylong nursing simulation training seminar. Both of these activities contributed to Ashley's identity as an educator. Ashley described her current role as: *"I help build nurses."* Ashley would also accept the adjunct instructor position over a part-time nursing position.

Beth's experience with pedagogical PD is particularly interesting. When she first started adjunct teaching, Beth did not attend any PD meetings provided by her institution. The only form of PD she participated in was peer mentoring. Recently, Beth was able to attend a clinical educator's conference that discussed conflict resolution and legal issues related to being an adjunct instructor. Even though Beth's experiences with the phenomenon being studied were different than the other participants, she still strongly identifies with being an educator. Beth described her professional identity as *"a nurse on the faculty at a community college."* She also declared that she would accept an adjunct position over a part-time staff nurse because the adjunct position allows her to work in *"short, intense bites."*

Debbie's pedagogical PD included two days of orientation and peer mentoring. Debbie described that her institution has provided her with *"computer training and help with anything else that I needed."* Debbie was very clear on how her experience with PD affected her identity: *"One of the things that I realized during PD is that I am in a different role."*

During the orientation session it made me think that I was an educator.” Debbie described her identity as “I take care of patients and I also educate students.” Debbie also stated that she would prefer taking an adjunct position over a part-time nursing position because “I get fulfillment out of teaching and instructing. I feel like as an adjunct I get more respect [than as a nurse].”

Jean attended an adjunct orientation session prior to the beginning of the current semester. Jean’s institution provides the orientation session yearly. The topics covered at the most recent session included the changes that were made since the previous academic year and expectations for the students. A unique feature of the orientation session was each adjunct was provided time to meet with their primary instructor mentor.

Attending the PD and meeting with the primary instructor allowed us to hammer out how things are going to look for the upcoming semester. It helped me understand more clearly what they want from me when I am grading these students. Bouncing ideas off of each other helped me overcome the challenges of teaching.

Jean’s experience with PD caused her to identify as an educator. Jean described her professional role as: *“I instill excitement into nursing students.”* She also would accept an adjunct teaching position over a part-time staff nurse *“in a minute because I would rather teach over working on a [nursing] floor.”*

Eight of the 10 participants identified with or stated they were educators as a result of their experiences with participating in pedagogical PD. Two of the participants identified as a nurse and would rather work in a nursing position over an adjunct instructor. What was learned from these two participants was they described their PD experiences as inadequate. Margaret has attended two adjunct meetings, including one prior to the beginning of the current semester. She stated at that meeting they mostly discussed obtaining additional

degrees to be able to teach at a higher level. Margaret declared: “*I have never received any PD on teaching.*” Margaret identified herself as a trauma nurse and would prefer working part-time on a nursing unit of her choice to teaching.

Anne stated that she received her first performance review two weeks prior to the interview for this study and she had never received any other PD from her college. Anne did share some interesting information. During her performance review she was informed that she would get to work closely with a full-time mentor to develop and organize her course. With the possibility of further PD Anne said that makes her role “*sound more exciting.*” Anne described her current role as a prenatal nurse and would prefer taking a staff-nursing job to teaching.

Participation in professional development reduces adjunct isolation

A common recurring theme described by the interview participants was a general feeling of isolation and loneliness while working as an adjunct faculty. Six of the participants specifically shared how alone they felt as an adjunct instructor but by participating in PD it helped reduce the feelings of isolation. The data collected in this study support previous research on this topic. Fagan-Wilen et al. (2006) described that adjunct faculty generally feel isolated from the program they are teaching in. Locasto and Nochanek (1989) showed that feelings of isolation can result in faculty turnover and decline in the educational quality, however through adequate faculty development, those feelings can be eased.

In the participants’ own words, being an adjunct caused the following feelings:

As an adjunct, you are out on a limb or out on an island. – Jayne
As an adjunct you are alone on an island. – Jennifer

It would be easy to feel like a second-class citizen. – Ashley
Adjuncts can be viewed as fill-in-the-blank faculty. – Rose
I would like to know more about what is going on in the other classes. – Debbie
Sometimes I don't understand what they want from me. – Jean

These six participants described how participating in PD helped create a sense of belonging to their respective nursing programs and reducing the sense of isolation. All six of the participants that described feelings of isolation each identified themselves as educators as a result of participating in pedagogical PD described in the previous section. It can be concluded that each of these six participants received adequate PD because of their description of how they view their identity based on how they experienced the phenomenon.

Jayne explained that participating in PD reduced her feeling of being on an island through interacting with the other adjuncts and full-time faculty.

It [PD] was helpful because bringing the adjuncts together was a good networking opportunity. A couple adjuncts were starting their first class and had questions. We could help talk through their questions. It showed how many people are out there on a limb with you and that you could network with.

Jennifer also described that after participating in PD at her institution reduced her feelings of being isolated. *“The meetings help make you realize you are NOT alone on an island. There are people to reach out for networking and to change things. It has had a huge impact on me and that is why I continue to stay adjunct because I know I am not alone there.”*

In the previous section, it was revealed that Ashley's college has only been providing PD opportunities to their adjuncts for a short amount of time. As a result, Ashley had only gone to a couple meetings and a day-long simulation training seminar. Ashley shared that

participating in PD *“makes me feel like I am part of the profession. The day in the late summer they [the college] went through information to help adjuncts do their jobs.”*

Debbie’s experience with PD made her realize that she was in a different role than as a nurse. As a result of participating in PD at the college, Debbie has gotten to know the other faculty working in her program better and it makes her feel part of the college when she is on campus. *“The days I am at the college and working, everyone is professional and treats me with respect. As an adjunct I feel more respected and there is more professionalism where sometimes as a nurse I am not treated that way.”* Debbie also stated that something new her institution is implementing this semester was sending out weekly emails to all of the adjuncts so they are informed of what the other instructors are teaching in their classes. Those emails also helped Debbie feel connected to the other faculty and respected by the program administrators.

Rose’s institution provided her with a comprehensive PD program that included PD meetings and a primary and secondary mentor. As a result of being included in adjunct PD, Rose is satisfied with her role at her college because it provides her with a sense that her position means something and that she was not hired just to fill a void. *“There is always something to take away from it [PD meeting]. We have open discussion and it gives us a chance to share what it working. When I leave, I feel like that I got it [adjunct teaching]. We go to meetings and we have a voice verses just being able to sit there.”*

Jean is able to participate in an on-campus PD program at the beginning of each academic year. She described her experience of attending those meetings as a lot of collaboration with other faculty and individual mentoring.

The meetings include lots of bouncing ideas off of each other. I get to meet the primary instructor and hammer out how things are going to look for the upcoming semester. It helped me understand more clearly what they want from me, especially when I am grading these students. The sharing of ideas helped me overcome the challenges of teaching on a unit where the nurses are rough on the instructors.

Another interesting finding from the participant narratives that supported previous research on this topic was that adequate PD resulted in less adjunct turnover. It is worth noting that all six of the informants that stated feeling less isolated as a result of participating in PD also wanted to continue adjunct instructing if their institutions continued to offer PD for their adjuncts.

Peer mentoring as part of professional development leads to higher adjunct satisfaction

As previously discussed in the literature on PD, peer mentoring is a key adjunct PD activity that promotes transitioning into the educator role (Cangelosi et al., 2009; Himmelberg, 2011; Suplee & Gardner, 2009). The findings in this study support previous research that peer mentoring of adjunct nursing faculty members is an effective tool that promotes satisfaction in the role of an educator.

Six of the ten participants shared through their experiences of receiving PD in the form of mentoring, they were satisfied in their roles as adjunct faculty members. Part of the satisfaction that came from working as an adjunct instructor was the development of friendships and professional relationships with other adjuncts and full-time faculty members. The participants shared their stories on how peer mentoring helped promote their satisfaction as adjunct instructors.

Debbie explained that when she was a new adjunct, she initially struggled because she lacked confidence in her abilities. She did get to participate in two days of on-campus orientation but she was also able to spend time with another instructor to see how that instructor managed her class.

Educating students is different than being a mentor and training new nurses. I used to get fulfillment out of teaching and instructing new nurses. As an adjunct working with a mentor made me feel good, like I was good at asking the right questions and getting reassuring feedback. I get fulfillment out of teaching and instructing and I feel like I have done something good [for the students].

Debbie has developed relationships with a few other faculty members and she has gotten very close with them. *“A few of the other faculty have went out for dinner or when we’ve gotten out of clinical early, we out for lunch. I talk with a few of them on our days off. So, yeah, I have made some friends. I would try to keep in contact with them [even if she did not return as an adjunct].”*

Rose’s institution provided her with primary and secondary mentors. Having a formal mentoring agreement in place has allowed Rose to feel more secure with her abilities as an adjunct. *“Having an open discussion lets us share what is working. I can go to them [mentors] with questions and feel like I am taken seriously and I am supported. I am very satisfied with my role.”*

Rose noted she achieves satisfaction from the working relationships she has developed with the other adjuncts and full-time faculty.

I am satisfied being included in the faculty. I am included in faculty meetings and faculty social gatherings. I am close with the dean of students and two of the instructors. With one of them I would not hesitate to ask her to do lunch. With the other two, I think it is developing into that.

Jean also described how mentoring with other faculty members has helped her achieve satisfaction with her role as an adjunct. Jean experienced working closely with a primary instructor to help develop the course that she teaches. She described those encounters as *“lots of bouncing ideas off of each other.”* Working with a mentor allowed Jean to better understand what was expected of her as an adjunct in the courses she was teaching. Participating in mentoring helped Jean overcome the challenges of teaching in a clinical area where staff nurses make the instructor’s role more difficult. When working with mentors Jean said, *“the more that I am there and the more they [the staff nurses] trust me, that makes me satisfied.”* Jean’s satisfaction with her adjunct role has made her set a goal to become a full-time theory instructor.

Beth’s experience with mentoring began before she taught her first class as an adjunct. She was able to spend time with another instructor to ask questions and talk through what to expect in her first course. Beth said that she was very grateful for the time that instructor spent with her and she was satisfied with that experience. Beth also stated that working with full-time instructors has allowed them to change their perceptions of what an adjunct is. *“I think some of the full-time faculty thought adjuncts are just dallying in teaching.”* After spending time working with the full-time faculty, Beth now believes that they know that she is an adjunct because it is a calling for her.

Jennifer also had a positive mentoring experience through the PD offered at her institution. The adjunct meetings allowed Jennifer networking opportunities to reach out to others for help. *“The meetings promote the camaraderie of the educational team.”* As a result, Jennifer stated talking with others *“helps with my confidence when I have difficult students.”* When the educational team is cohesive and working together, student success is

promoted. Jennifer said: *“I am satisfied with the success of the students.”* Mentoring has also reduced Jennifer’s sense of isolation of being an adjunct that has made her more satisfied in her role.

In addition to increasing her satisfaction as an adjunct, Jennifer stated the mentoring allowed her to get to know the other faculty on a more personal level. *“It [mentoring] has helped me get to know the other instructors so I can defend them when the students complain about them!”*

Jayne shared very interesting insights on mentoring, both as serving as a mentor and being the mentee. With Jayne’s role as a nurse, she has spent numerous years mentoring new nurses. Part of her decision to take on the role as an adjunct instructor was because she would have the opportunity to mentor nursing students.

I love to mentor and help people. I have a fondness for mentoring and helping people through the profession. My role as an adjunct allowed me to mentor students. I am really satisfied with it. I really love teaching and I enjoy helping the students.

The PD meeting Jayne’s college provided to the entire nursing faculty allowed Jayne to be mentored by other experienced nursing faculty. The most recent meeting allowed Jayne to network with over 50 other nursing faculty. *“After the meeting, everyone was on the same page. We were able to talk through several questions.”*

Because of her mentoring opportunities, Jayne has developed several friendships with other faculty at her institution. She stated that she has two close friendships from working closely with the other faculty. Jayne mentioned that she would definitely stay in contact with those other faculty even if she did not return to teach at her college.

Lack of professional development leads to less job commitment

As described in the previous themes that emerged, the data in this study support the literature on the positive effects of pedagogical PD provided to the participants. Locasto and Nochanek (1989) stated that inadequate PD can lead to resentment and disenchantment towards the faculty role. Two participants in this study received what they perceived to be inadequate pedagogical PD from their institutions causing their nursing identity to remain the most salient. Five other participants discussed how their experiences as adjuncts would have been different if they had not receive adequate PD. The recurring theme that emerged from the informant's voices supports the literature that inadequate PD leads to less commitment to the adjunct role.

Margaret and Anne were the two participants that described their most salient identity as being a nurse. Anne's only PD was a performance review during the current academic semester. Margaret had attended two adjunct meetings but the topics discussed did not relate to any of her teaching activities. Both participants shared very detailed explanations of how they view their standings as adjunct faculty members.

Margaret stated that she does not have very much to do with the college. She described what her college could do to provide better pedagogical PD to their adjuncts.

I have never gotten any professional development on teaching. What I need from professional development are directions on the things that adjunct instructors need to do, like grading. If I had that information available to me, it would be an asset. How I grade students has evolved through me reading through this packet on how to grade.

Margaret stated that most of her satisfaction comes from the flexibility that comes with the days and times she teaches. Although she does find aspects of her adjunct position to be satisfying, Margaret stated that she would be re-evaluate her willingness to adjunct

teach without PD. Without substantive PD, Margaret “*would not adjunct teach anymore.*” Even with minimal PD, Margaret made it very clear she has the students’ best interest in mind and remains completely dedicated to their success.

Anne’s story was very similar to Margaret’s about what her college could do for her to improve her development as an adjunct. “*If the college offered me PD, my first semester would have been much more organized.*” The only PD that Anne received was a performance review from her supervisor. Anne did not specifically state she was dissatisfied with her adjunct role, but a comment she made about her performance review made it clear she was not as committed to her role as an adjunct as she could be. “*After the performance review, we decided that we are going to develop the course and organize a little more among the faculty. That made it sound more exciting!*”

Because Anne’s college did not provide much PD to their adjuncts, there were concerns within the program about who they had teaching a class each semester. The consensus was that more pedagogical PD was needed for the adjuncts. After her performance review and the discussion with her supervisor of delivering more PD, Anne is committed to continue teaching and see where the possibilities PD end up.

Like Margaret, Anne received most of her satisfaction as an adjunct from the students.

I am satisfied because the students have the resources they need. I get excited when you see the students are interested or they get it. I have had a few students approach me at the end of the semester and tell me that I was my favorite and that makes me happy!

Beyond Margaret and Anne, five of the other participants that did identify as an instructor spoke about how their experiences would have been different if they did not

receive adequate PD. Jayne stated that her institution “*needs to continue to offer those nights*” in order for her to remain committed to continuing as an adjunct. Similarly, Ashley described a similar scenario if her institution scaled back on their PD. “*I don’t have an office there or a computer so it gets tricky.*” The only way that Ashley interacts and collaborates with the other adjuncts and full-time faculty members is through attending the PD meetings. If those meetings were cut back it would cause her to be less committed to her adjunct position.

Jennifer shared insight on how her commitment would change if her institution eliminated their PD offerings. “*I would not teach if I did not have those sessions and did not have their support.*” Jennifer imagined all of the satisfying aspects of becoming a teacher but she did not anticipate the difficult students. Without the skills she acquired from participating in PD she would have had a much more difficult time managing those students and “*probably would not have continued teaching.*”

Beth also shared her feelings on how her commitment would change if her college reduced their PD offerings. Interestingly, Beth would be less committed to being an adjunct not because she needs the development, rather she would be concerned about the lack of preparedness of the other faculty. “*It is a scary how little prepared adjunct faculty are. The whole idea of how to handle a class isn’t really there [without receiving PD]. It makes me more concerned for who is out there adjunct teaching.*”

Even though Donna was satisfied with the PD she had received from her college, she mentioned some additional measures her college could incorporate into their PD offerings that would make her more committed to her role as an adjunct. “*It would be nice if more*

education was given to me when it comes to even basic things like grading. Some guidance on that would be nice. I would also like more guidance on classroom management.”

Donna described being an adjunct nursing educator as a difficult and challenging position. The more training and development she receives, it would make her more confident and committed to her adjunct career.

Additional Findings

Due to the nature of the questions posed to the participants related to the phenomenon being investigated, few additional findings were uncovered through the participant’s narratives. Some of the participants did share information not necessarily related to PD but is worth stating because it could improve the adjunct role.

Three of the participants stated they would like to know what is going on in the other courses the students are enrolled in. Even though sharing information in other courses isn’t necessarily related to PD, it can lead to improved adjunct performance. Debbie summed it up with her comments: *“I would like to know more about what is going on in the other classes. By knowing what the students are learning in their other classes I can tailor my teaching to supplement what the students are learning in their other classes.”* Nursing programs can share information about what is being taught in other courses by sharing course syllabi or directly communicating with the adjuncts. Debbie’s institution started emailing the adjuncts weekly with what is being taught by the other instructors.

An additional finding from the qualitative participants revealed that nursing programs could improve adjunct satisfaction by implementing a recognition program for the adjunct faculty. Four of the participants shared that if they did receive recognition they would

definitely be more satisfied with their role as an adjunct. Some of the participants did share they received informal recognition from various figures within their college or nursing programs and that made them feel accepted and part of the institution. For instance, Rose shared that the president of the college commended her for doing a good job. She said that just receiving those few words “*made a huge impact on her belonging to the college.*”

The participants were asked to share what types of recognition they were seeking to feel more integrated in their programs. Debbie stated that recognition for her could be something as simple as getting praise from her supervisor or program dean. Jean shared that inviting the adjuncts to the pinning and graduation ceremony is the recognition she is seeking because it would make her feel like her contribution to the students’ success was significant. Rose said that she received a short hand-written note from her dean that said how much they appreciated her as an adjunct. Even though formally recognizing adjunct nursing faculty is not part of a pedagogical PD program, incorporating positive encouragement and recognizing the contributions of the adjunct faculty can create a stronger bond to the program and higher adjunct satisfaction.

The AFISS had one open-ended question that enabled the participants to add any information related to how PD shaped their professional identity. A total of 27 participants provided substantive comments on the survey. The qualitative information from the AFISS was not included in the generation of the emerging themes of this study due to the lack of purposive sampling of the survey participants. A sample of the qualitative information obtained from the AFISS is shown in Appendix E.

The major recurring theme from the open-ended results is that participants desire more pedagogical PD related to their role as adjunct faculty. The survey participants were

not selected through purposive sampling like the qualitative participants were so it was possible that the participants had never participated in pedagogical PD. The voices and stories shared in the open-ended question were very similar to the stories uncovered in the last theme in the qualitative analysis (lack of pedagogical PD relates to less job commitment). Comments from 12 separate participants mentioned a need or a desire for pedagogical PD. These comments support the data gathered in the qualitative interviews and provide an additional measure of the goodness and trustworthiness for the qualitative information.

Context of the Qualitative Findings Related to Phenomenology

The themes that emerged from the participants' experiences with pedagogical PD were examined in the broader scope of the epistemology, theoretical perspective, and methodology that guided the study. The epistemological and theoretical perspectives were evident in all aspect of the data collection and analysis in this study. The constructivist philosophical assumption states that humans construct meaning through the engagement and interaction of the world they are interpreting (Crotty, 2003). Using the constructivist approach, it was assumed that the adjuncts did not hold any meaning towards that role before they experienced it.

In order for the constructivist approach to be fully developed, the interplay between the participants and the researcher was crucial in developing the participants' experiences with the phenomena (Moustakas, 1994). In this study, the researcher spent significant time with each participant building a rapport and gaining trust. The participants felt at ease during the interviews and answered all of the questions posed to them. The researcher also studied

the participants' body language and voice inflections to further understand their narratives. All of the themes developed in this study were authentic representation of how the participants experienced and built their knowledge after experiencing pedagogical PD.

The three premises in the theoretical perspective of social interactionism supported the data collected to interpret the participants' experiences (Esterberg, 2002). Within the first premise, the participants acted towards the meanings developed through their experiences. For example, after participating in pedagogical PD, eight of the ten participants developed the salient identity of an educator. Within the second premise, the participants' meanings arose out of social interaction. All of the participants' PD experiences incorporated some form of social interaction either by attending meetings, having peer mentors, or receiving an evaluation from a supervisor. Finally, within the third premise of symbolic interactionism, the participants' meanings were created and changed through a process of interpretation. Each participant in this study received a different form of pedagogical PD at a different institution; therefore, the meanings developed were experienced and interpreted differently by all the participants. Even with those different interpretations, many themes and descriptions of those events were similar among the participants.

The methodology chosen for this study was phenomenology because of its unique ability to enter the conceptual world of the participants to uncover their experiences related to the phenomena (Creswell, 2013). In order to gain access to the participants' knowledge, the researcher was a key element of the phenomenological approach. In this study, the researcher conducted interviews, compiled field notes, and spent prolonged time analyzing the data gathered. A total of 10 participants yielded over 200 pages of interview transcripts and field notes that were meticulously evaluated, coded, and reported. The researcher let the

voices of the participants come through in the results and reported the essence of the how the phenomenon shaped the participants' meanings.

In the context of the epistemology, theoretical perspective, methodology, and methods (ETMM) used in this study, the results of the qualitative data gathered were integrated to develop a description of how essential pedagogical PD was for adjunct nursing faculty members. The participants' lived experiences were initially difficult when entering the unknown profession of education. Many of the participants felt "*out on a limb*" or "*alone on an island*" being an adjunct instructor. Through substantive pedagogical PD the role of educator became the salient identity of the majority of the participants. "*I instill excitement into nursing students*" and "*I build nurses*" were some of the descriptions shared about the constructed identities. As a result of participating in pedagogical PD, the participants shared how satisfied and committed they are to the teaching profession. Chapter 5 summarizes the findings of this study and presents suggestions for how the results can be incorporated into practice and/or future research.

Quantitative Results

The inclusive results of the quantitative component of this study are organized in the following 13 sections. The results from the AFISS are meant to be supportive of the data gathered through the qualitative methods. A summary of the AFISS is provided followed by the demographic information and statistical analyses of all of the variables measured in this study.

Adjunct Faculty Identity Salience Survey (AFISS)

A total of 467 adjunct nursing faculty received the AFISS and 101 responses were recorded for a 21.6% response rate. The strategies recommended by Dillman (2009) described in the research plan were incorporated to increase the response rate. Even though the response rate is not close to the optimal levels identified in the literature of around 35%, the response rate probably reflects the sample being measured requiring adjuncts to balance multiple jobs and life outside of work.

Demographic and background information

The participants completing the AFISS had the opportunity to opt out of answering any question in the survey. When reporting the demographic results, any missing variables were not reported. A summary of the demographic information obtained from the participants is shown in Table 4.2a. A summary of the national nursing demographics from 2009 is shown in Table 4.2b (NLN, 2011). The majority of the participants in this sample population of adjunct nursing faculty were female. Of the responses, 95.7% ($n = 91$) were female and 4.3% ($n = 4$) were male. The results of the gender makeup of the adjunct participants in this study mimic the nation-wide percentages of adjunct nursing faculty (94% female, 6% male) identified by the National League for Nursing (2009). The overall makeup of the race/ethnicity of this study was reported as 90% ($n = 85$) White, 5% ($n = 5$) Black or African American, 3% ($n = 3$) two or more races, 1% ($n = 1$) were Hispanic and 1% ($n = 1$) were Asian.

Table 4.2a. Demographic and background characteristics of the survey participants (N=101)

Variable	%
Gender	
Male	4
Female	96
Age	
25-34	14
35-44	20
45-54	27
55-64	33
65+	6
Race/ethnicity	
Asian	1
Black/African American	5
Hispanic/Latina/o	3
Two or more races	1
White/Caucasian	90
Other	0
Years worked as a nurse	
1-9	24
10-19	27
20-29	25
30+	24
Years worked as an adjunct	
1-4	60
5-9	22
10-14	14
15+	4
Highest Education Obtained	
Bachelors in nursing	21
Masters not in nursing	5
Masters in nursing	60
Doctorate not in nursing	2
Doctorate in nursing	7
Other	5
Institution	
Community college	48
Hospital-affiliated nursing school	11
Private 4-year college	11
Public 4-year college	22
Other	8

Table 4.2b. National demographic and background characteristics of nurses (NLN, 2011)

Variable	%
Gender	
Male	6
Female	94
Age	
Under 30	6
30-45	39
46-60	46
60+	9
Race/ethnicity	
Asian	4
Black/African American	12
Hispanic/Latina/o	16
Two or more races	2
White/Caucasian	65
Other	1
Highest Education Obtained	
BSN	33
Masters in nursing	60
Other	7

The average age of the participants was 49.6 years old. The majority of the respondents in this study were between the ages of 55-64 years old (32.6%, $n = 31$). The second highest percentage of participants came from the 45-54 age range (27.3%, $n = 26$). The breakdowns of the remaining adjunct faculty age ranges were as follows: 20% ($n = 19$) were between the ages of 35-44 years old; 13.8% ($n = 13$) were between 25-34 years old; and 6.3% ($n = 6$) were older than 65.

The participants averaged 19.8 years' experience working as a registered nurse. The breakdown of individual years worked was very similar. Twenty seven percent ($n = 26$) of the participants had between 10 and 19 years' experience as a nurse followed by 25% ($n = 24$) having between 20 and 29 years' experience, 24% ($n = 23$) having between 1 and 9 years' experience, and 24% ($n = 23$) having greater than 30 years' experience. The

participants averaged 5.1 years' experience working as an adjunct nursing instructor. The majority of the participants had less than 5 years' experience teaching as an adjunct (60%, $n = 58$). Breaking this category down even further, of the 60% of participants that had less than 5 years' experience teaching as an adjunct, 52% ($n = 30$) of those had less than two years' experience. The second highest percentage of participants had between 5 and 9 years' experience (22%, $n = 21$) followed by 14% ($n = 13$) having between 10 and 14 years' experience and 4% ($n = 4$) having more than 15 years' experience teaching as an adjunct.

The participants reported the highest level of educational degree they had obtained with the majority having an MSN degree (60%, $n = 58$). The second highest educational obtainment was 21% ($n = 20$) having a BSN degree. The remaining educational makeup included 7% ($n = 6$) having a doctorate in nursing, 5% ($n = 5$) having a Master's not in nursing, 5% ($n = 5$) having a degree not listed, and 2% ($n = 2$) having a doctorate not in nursing. The predominant institution where the participating adjuncts were employed at was community colleges (48%, $n = 46$). Following the community colleges, 22% ($n = 21$) reported working at 4-year public institutions with hospital-based nursing programs and 4-year private institutions each represented 11% ($n = 11$) of the participants. The remaining 8% ($n = 7$) reported working at an institution not listed above.

The participants reported on the last time they had participated in PD related to their job as an adjunct. Within the last year, 52% ($n = 50$) reported participating in at least one PD offering. The percentage of participants that had PD between 1-2 years ago was 14% ($n = 14$) followed by 10% ($n = 10$) between 2-5 years ago. The percentage of participants that have not completed any PD was 23% ($n = 22$). The PD question progressed further to explore the total number of PD courses or seminars the participants had attended the last two

years. The majority of the participants attended either 1 or 2 PD offerings in that time frame (54%, $n = 52$) followed by 17% ($n = 16$) not having completed any PD, 15% ($n = 15$) completing more than 5 offerings, and 13% ($n = 13$) completing between 2 and 5 offerings. The number of adjuncts surveyed not completing any PD was a significant and it will be addressed in-detail in Chapter 5.

Comparing the demographic information of the AFISS participants to the most recently published national demographic for nurses revealed many similarities. The gender makeup, average age, educational level of the AFISS participants very closely follows the national statistics. Some differences are apparent when comparing the race/ethnicity of the AFISS participants to the national averages. The smaller sample size and geographic location of the distribution of the survey could account for these differences. Since the demographic statistics from the AFISS are similar to the national levels, the participants of this survey are representative of the larger population of nurses.

Descriptive Statistics

The majority of the statistical analysis for the AFISS was descriptive statistical analysis of the variables measured in the survey. Before analysis was conducted, the raw SPSS data file was analyzed for missing variables and any answers where the participant selected “does not apply.” The variables that were missing were replaced with the mean value of the surrounding participant answers. Any reverse-interpretation questions were reverse-coded to prevent inaccuracies in the analysis.

As described in the demographic/background section, some of the participants ($n = 22$) reported not receiving any pedagogical PD prior to taking the survey. Unless otherwise

indicated, the results reported will include all the survey participants ($n = 101$). Some descriptive statistics were performed splitting the survey into two categories, group A includes only the participants that have completed PD and group B are the participants that have not experienced any PD. It is noted in the analysis when the participant group was split. The descriptive statistics included calculating the central tendencies, cross tabulations and correlations.

Salience

Two questions of the questions on the AFISS were similar to two questions asked to all of the interview participants. Specifically, two salience questions on the AFISS asked the participants to rank the order they would describe their job to someone they were meeting for the first time and choose between accepting an adjunct job and a part-time nurse position. A summary of the results of the two questions related to salience is shown in Table 4.3. The results showed that 60% ($n = 57$) of respondents reported they would tell people they are a nurse first, followed by 18% ($n = 17$) telling people they are an adjunct first. The participants also were given the option to select “other” when describing their job to someone and 22% ($n = 21$) selected “other.” For the participants that selected “other,” a free-text box was provided for a description of that role. The responses reported were: Nurse practitioner ($n = 9$); specialty nurse ($n = 5$); mother or grandmother ($n = 3$); professor ($n = 2$); and clinical instructor ($n = 2$). The results of the second salience question showed that 89% ($n = 85$) would accept the adjunct nursing educator position over the part-time nurse position while 11% ($n = 10$) would accept the part-time nurse position over the adjunct nursing position.

In addition to the two specific questions related to adjunct salience, 9 other questions (questions 34 through 42) on the AFISS analyzed the participant's identity salience.

Analyzing the central tendencies of those 9 questions revealed that the participants' salience towards their role as an adjunct. The 9 questions were a 4-point Likert scale with 4 being strongly agree and 1 being strongly disagree. A summary of the central tendencies for the salience questions is shown in Table 4.4.

Table 4.3. AFISS salience results ($N=95$)

Variable	%
When meeting people for the first time, what would you tell them about your job first?	
Adjunct	18
Nurse	60
Other	22
If offered a part-time nursing job and an adjunct job, which would you choose first?	
Adjunct	89
Part-time Nurse	11

The range of central tendencies for all of the questions was 2.7 to 3.66. Analyzing the central tendencies of the salience questions revealed that the mean for every question was greater than 2 (disagree). The mean for every question had a level of agreement by the participants. The question that had the highest mean (level of agreement) was the participants enjoyed working with students ($M = 3.66$, $SD = .45$). All of the participants (100%, $n = 101$) either agreed or strongly agreed that they enjoyed working with students. The question with the lowest mean (level of agreement) was that the participants viewed the prestige of teaching as greater than that of other specialties ($M = 2.7$, $SD = .75$). Only 65%

Table 4.4. AFISS salience related to factors of becoming an adjunct nurse educator ($N=101$)

Statement	SA/A (%)	SD/D (%)	<i>N</i>	<i>M</i>	<i>SD</i>
This position is a career advancement	72	28	101	2.79	.66
The college intellectual climate appeals to me	97	3	101	3.26	.52
This position is an opportunity for professional growth	92	8	101	3.20	.62
The prestige of teaching nursing is greater than that of other specialties	65	45	101	2.70	.75
I enjoy working with students	100	0	101	3.66	.45
This position requires that I use my own time for preparation	90	10	101	3.30	.71
This position has opportunities for career development	75	25	101	2.80	.79
I exert a great effort to communicate with staff to ensure a positive learning environment for my students	97	3	101	3.35	.54
It is important that I know my individual student's leaning needs	100	0	101	3.59	.46

Means calculated using a response scale of: SA (strongly agree) = 4; A (agree) = 3; D (disagree) = 2; SD (strongly disagree) = 1.

of the participants either strongly agreed or agreed ($n = 66$) while 45% either disagreed or strongly disagreed ($n = 35$) that teaching was more prestigious than other specialties.

Three questions had greater than 25% or more of the participants either disagree or strongly disagree with the statement. Those three questions were reanalyzed to include only the participants that reported receiving any pedagogical PD. The results of including only the participants that did participate in PD are shown in Table 4.5. Interestingly, the means and the percentages that agreed versus disagreed for all three questions did not change when taking into account only the participants that did receive pedagogical PD. For this particular analysis, it was concluded that the participating in PD did not alter the descriptive statistics of the salience questions.

Table 4.5. AFISS salience related to factors of becoming an adjunct nurse educator only including participants that participated in pedagogical PD ($N=74$)

Statement	SA/A (%)	SD/D (%)	<i>N</i>	<i>M</i>	<i>SD</i>
This position is a career advancement	70	30	74	2.76	.70
The college intellectual climate appeals to me	96	4	74	3.22	.55
This position is an opportunity for professional growth	91	9	74	3.15	.65
The prestige of teaching nursing is greater than that of other specialties	60	40	74	2.65	.74
I enjoy working with students	100	0	74	3.64	.47
This position requires that I use my own time for preparation	93	7	74	3.40	.65
This position has opportunities for career development	73	27	74	2.86	.76
I exert a great effort to communicate with staff to ensure a positive learning environment for my students	99	1	74	3.39	.50
It is important that I know my individual student's leaning needs	100	0	74	3.56	.49

Means calculated using a response scale of: SA (strongly agree) = 4; A (agree) = 3; D (disagree) = 2; SD (strongly disagree) = 1.

Commitment

The participants answered 6 questions related to their level of commitment to their academic institution. The 6 questions were a 4-point likert scale with 4 being strongly agree and 1 being strongly disagree. A summary of the descriptive statistics for the commitment questions is shown in Table 4.6.

The results revealed that the range of central tendencies for the questions related to the adjuncts' commitment to their institution was 1.93 to 3.43. Analyzing the means for these 6 questions revealed that the participants did not agree with all of the questions. One of the means was below 2 (disagree) while the other 5 questions had a mean greater than 2 (agree). The highest mean calculated was the participants were proud to be working for their organization ($M = 3.43$, $SD = .56$). The lowest mean calculated was the participants

Table 4.6. AFISS commitment descriptive statistics (N=101)

Statement	SA/A (%)	SD/D (%)	N	M	SD
I am willing to work harder than I have to in order to help this organization succeed	88	12	101	3.18	.61
I feel very little loyalty to this organization ^a	30	70	101	3.10	.99
I would take almost any job to keep working for this organization	16	84	101	1.93	.70
I find that my values and the organization's values are similar	93	7	101	3.09	.54
I am proud to be working for this organization	96	4	101	3.43	.56
I would turn down another job for more pay to stay with this organization	37	63	101	2.38	.84

Means calculated using a response scale of: SA (strongly agree) = 4; A (agree) = 3; D (disagree) = 2; SD (strongly disagree) = 1.

^aThis question was reverse-coded to calculate the mean.

willingness to take any job to remain working in their educational organization ($M = 1.93$, $SD = .70$).

As with the salience questions, the descriptive statistics were recalculated only including the participants that indicated they had received pedagogical PD. The results are shown in Table 4.7. Similar to the results for the salience questions, when only the participants that had received pedagogical PD, the central tendencies and percentage of participants agreeing and disagreeing with the results did not change. For this particular analysis, it was concluded that the participating in PD did not alter the descriptive statistics of the commitment questions.

Satisfaction

The participants were given 13 statements corresponding to their satisfaction for to their role as an adjunct nurse educator and were given an additional 12 statements related to their role as a nurse and asked to rate their satisfaction. The satisfaction statements were a 4-

Table 4.7. AFISS commitment descriptive statistics only including participants that participated in pedagogical PD ($N=74$)

Statement	SA/A (%)	SD/D (%)	<i>N</i>	<i>M</i>	<i>SD</i>
I am willing to work harder than I have to in order to help this organization succeed	93	7	74	3.25	.57
I feel very little loyalty to this organization ^a	25	75	74	3.19	.97
I would take almost any job to keep working for this organization	18	82	74	1.90	.74
I find that my values and the organization's values are similar	92	8	74	3.09	.60
I am proud to be working for this organization	96	4	74	3.45	.57
I would turn down another job for more pay to stay with this organization	42	58	74	2.38	.86

Means calculated using a response scale of SA (strongly agree) = 4; A (agree) = 3; D (disagree) = 2; SD (strongly disagree) = 1.

^aThis question was reverse-coded to calculate the mean.

point Likert scale with 4 being very satisfied and 1 being very dissatisfied. A summary of the descriptive statistics for the adjunct satisfaction statements are shown in Table 4.8, and the nursing satisfaction statements are shown in Table 4.9.

Analysis of the range of central tendencies for the statement related to the participants' satisfaction toward the adjunct role was 2.14 to 3.36. This can be interpreted as the participants have a level of satisfaction with all of the statements related to satisfaction. The highest mean calculated was the participants' fulfillment that comes from the adjunct role ($M = 3.36$, $SD = .52$). The statements with the lowest means (level of satisfaction) included fringe benefits ($M = 2.14$, $SD = .73$) and office space ($M = 2.27$, $SD = .60$).

By comparison, the range of central tendencies for the statements related to the participants' satisfaction towards the nursing role was 2.68 to 3.45. Overall, the participants' satisfaction towards their nursing role was higher than their satisfaction towards the adjunct role. Similar to the statements related to adjunct satisfaction, the same statements had the

Table 4.8 AFISS adjunct satisfaction descriptive statistics ($N=101$)

Statement	VS/S (%)	VD/D (%)	<i>N</i>	<i>M</i>	<i>SD</i>
Fulfillment that comes from the adjunct role	99	1	101	3.36	.43
Working hours	97	3	101	3.22	.51
Opportunity for involvement in curriculum planning	62	38	101	2.48	.65
Working environment	94	6	101	3.20	.52
Opportunity for participation in college governance	74	26	101	2.56	.62
Opportunity for participation in college social events	85	15	101	2.82	.52
Salary	71	29	101	2.73	.79
Fringe benefits	27	73	101	2.14	.73
Office space	23	77	101	2.27	.60
Use of college equipment (e.g. computers)	89	11	101	2.94	.54
Opportunity for participation in staff meetings	81	19	101	2.82	.64
Opportunity for participation in PD	71	29	101	2.67	.71
Time spent in student advising	87	13	101	2.89	.54

Means calculated using a response scale of: VS (very satisfied) = 4; S (satisfied) = 3; D (dissatisfied) = 2; VD (very dissatisfied) = 1.

Table 4.9. AFISS nursing satisfaction descriptive statistics ($N=101$)

Statement	VS/S (%)	VD/D (%)	<i>N</i>	<i>M</i>	<i>SD</i>
Fulfillment that comes from the nursing role	97	3	101	3.45	.52
Working hours	81	19	101	2.98	.69
Opportunity for involvement in planning of work	85	15	101	2.99	.67
Working environment	86	14	101	2.99	.59
Opportunity for participation in management of your unit	84	16	101	2.89	.63
Opportunity for participation in social events	86	14	101	2.92	.62
Salary	79	21	101	2.77	.71
Fringe benefits	76	24	101	2.68	.69
Office space	86	14	101	2.86	.60
Use of company equipment (e.g. computers)	95	5	101	3.09	.53
Opportunity for participation in staff meetings	90	10	101	3.10	.63
Opportunity for participation in nursing PD	79	21	101	2.90	.73

Means calculated using a response scale of: VS (very satisfied) = 4; S (satisfied) = 3; D (dissatisfied) = 2; VD (very dissatisfied) = 1.

highest and lowest means for nursing satisfaction. The highest mean calculated was the participants' fulfillment that comes from the nursing role ($M = 3.45$, $SD = .52$). The statements with the lowest means (level of satisfaction) included fringe benefits ($M = 2.68$, $SD = .69$) and office space ($M = 2.27$, $SD = .60$). The means of the satisfaction as a nurse was higher than satisfaction as an adjunct in every category except working hours and the working environment.

The satisfaction as an adjunct statements were recalculated only using the participants that indicated they had received pedagogical PD for their role as an adjunct. The results of the descriptive statistics for just the participants that received pedagogical PD is shown in Table 4.10. The means for all of the adjunct satisfaction statements remained similar to the previous table with the exception of the participants' level of satisfaction with the

Table 4.10. AFISS adjunct satisfaction descriptive statistics only including participants that participated in pedagogical PD ($N=74$)

Statement	VS/S (%)	VD/D (%)	N	M	SD
Fulfillment that comes from the adjunct role	99	1	74	3.36	.50
Working hours	96	4	74	3.19	.53
Opportunity for involvement in curriculum planning	74	26	74	2.55	.60
Working environment	96	4	74	3.21	.48
Opportunity for participation in college governance	77	23	74	2.58	.55
Opportunity for participation in college social events	88	12	74	2.84	.53
Salary	75	25	74	2.75	.82
Fringe benefits	25	75	74	2.13	.70
Office space	26	74	74	2.29	.55
Use of college equipment (e.g. computers)	88	12	74	2.93	.55
Opportunity for participation in staff meetings	84	16	74	2.86	.57
Opportunity for participation in PD	73	27	74	2.73	.64
Time spent in student advising	90	10	74	2.93	.45

Means calculated using a response scale of VS (very satisfied) = 4; S (satisfied) = 3; D (dissatisfied) = 2; VD (very dissatisfied) = 1.

opportunity to participate in PD. The mean for the opportunity to participate in PD only including those that have completed pedagogical PD was 2.73 ($n = 74$) compared to the mean of 2.67 ($n = 101$) for all participants. The table shows that the participants that did not receive any pedagogical PD from their institution were less satisfied with their opportunity to pursue pedagogical PD.

Time spent in role

The participants shared their level of agreement on 14 statements related to the amount of time they are willing to dedicate to their role as an adjunct faculty member. The time in role for five of the statements was a 4-point Likert scale with 4 being strongly agree and 1 being strongly disagree. The remaining 9 statements were a 4-point Likert scale with 4 being always and 1 being never. The results of the central tendencies of the 14 items related to the amount of time spent in the adjunct role are shown in Tables 4.11a and 4.11b.

Overall, the means for the time spent in role variable was higher than for any of the other variables measured. The range of means was 2.89 to 3.71. This indicated that the participants agreed with all of the statements. Since the means for the time spent in role

Table 4.11a. Time spent in role descriptive statistics for five statements ($N=101$)

Statement	SA/A (%)	SD/D (%)	<i>N</i>	<i>M</i>	<i>SD</i>
I know exactly what is expected of me	88	12	101	3.04	.71
I know that I have divided my time properly	92	8	101	3.16	.53
Explanation is clear of what has to be done	85	15	101	3.00	.68
I feel certain about how much authority I have	79	21	101	2.94	.70
I know what my responsibilities are	95	5	101	3.23	.51

Means calculated using a response scale of SA (strongly agree) = 4; A (agree) = 3; D (disagree) = 2; SD (strongly disagree) = 1.

Table 4.11b. Time spent in role descriptive statistics for nine remaining statements ($N=101$)

Statement	A/S (%)	N/R (%)	<i>N</i>	<i>M</i>	<i>SD</i>
At my job I feel bursting with energy	97	3	101	3.33	.51
At my job I feel strong and vigorous	99	1	101	3.44	.51
I am enthusiastic about my job	99	1	101	3.71	.45
My job inspires me	99	1	101	3.68	.47
When I get up in the morning I feel like going to work	97	3	101	3.57	.56
I fell happy when I am working intensely	99	1	101	3.60	.48
I am proud of the work I do	99	1	101	3.89	.33
I am immersed by my work	95	5	101	3.35	.55
I get carried away when I am working	75	25	101	2.89	.71

Means calculated using a response scale of A (always) = 4; S (sometimes) = 3; R (rarely) = 2; N (never) = 1.

statement was mostly 3 or greater, the recalculation of only including the participants that had received PD was not performed.

Crosstabs and Correlations

In addition to the descriptive statistics and the open-ended analysis, crosstabs and correlations were performed to help answer the quantitative research questions. Crosstab analysis was used to evaluate the effect that professional development had on the participants' identity salience. The results are shown in Tables 4.12a through 4.12c. As shown in Table 4.12a, the participants who identified themselves as an adjunct ($n = 17$), 76% had participated in a pedagogical PD program within the last 5 years while 24% had never participated in pedagogical PD. Of the participants who never participated in pedagogical PD ($n = 22$), 82% identified as a nurse or "other" over an adjunct.

As provided in Table 4.12b, when comparing adjunct orientation programs and identity salience, the results showed that, of the participants who identified as an adjunct ($n = 17$), 99% either strongly agreed or agreed that participating in an orientation program helped

Table 4.12a. Crosstab analysis comparing pedagogical PD and identity salience ($N=96$)

	Thinking about meeting people for the first time, what would you describe them about your job first?		
	Adjunct (<i>n</i>)	Nurse (<i>n</i>)	Other (<i>n</i>)
Participated in PD < 1 year ago	8	30	12
Participated in PD 1-2 years ago	4	9	1
Participated in PD 2-5 years ago	1	8	1
Have never participated in PD	4	10	8

Table 4.12b. Crosstab analysis comparing adjunct orientation and identity salience ($N=96$)

Level of agreement with how orientation programs clarified adjunct role	Thinking about meeting people for the first time, what would you describe them about your job first?		
	Adjunct (<i>n</i>)	Nurse (<i>n</i>)	Other (<i>n</i>)
Strongly agree	2	7	3
Agree	14	35	9
Disagree	0	10	13
Strongly disagree	1	7	4

clarify their adjunct role. Further analysis revealed that 39% ($n = 37$) of the total participants either disagreed or strongly disagreed that participating in an orientation program helped clarify their adjunct role and 99% ($n = 36$) identified as either a nurse or “other” over an adjunct.

As revealed in Table 4.12c, peer mentoring as a PD activity was compared to identity salience and the results showed that 82% ($n = 14$) of the participants that identified themselves as an adjunct either strongly agreed or agreed that peer mentoring helped clarify their role as an adjunct. Additionally, 45% ($n = 43$) of the total participants either disagreed or strongly disagreed that participating in peer mentoring helped clarify their role as an adjunct and 93% ($n = 40$) of those participants identified themselves as either a nurse or

Table 4.12c. Crosstab analysis comparing peer mentoring and identity salience ($N=96$)

Level of agreement with how peer mentoring clarified adjunct role	Thinking about meeting people for the first time, what would you describe them about your job first?		
	Adjunct (<i>n</i>)	Nurse (<i>n</i>)	Other (<i>n</i>)
Strongly agree	3	6	3
Agree	11	27	3
Disagree	3	17	10
Strongly disagree	0	7	6

“other” over an adjunct. The crosstab analysis supports that participating in meaning pedagogical PD can contribute to identity salience as an educator.

The literature on Identity Theory from Stryker and Serpe (1980), and Kuchera and Miller (1988) utilized the model that informed this study. Based upon the previous research by these authors and the variables the AFISS was designed to measure, the following hypothesis were generated:

Hypothesis 1: Participating in pedagogical PD leads to higher levels of commitment for adjunct nursing role.

Hypothesis 2: Participating in pedagogical PD leads to higher levels of satisfaction for the adjunct nursing role.

Hypothesis 3: Higher levels of commitment lead to identity salience for the adjunct role.

Hypothesis 4: Higher levels of adjunct salience leads to higher adjunct satisfaction.

Hypothesis 5: Higher levels of adjunct commitment leads to more time spent in the adjunct role.

Commitment correlations

Correlations were performed comparing specific questions on the AFISS to measure the relationship between the independent and dependent variables. For the correlation

analysis, only the participants that participated in pedagogical PD were included in the analysis. The correlation matrix comparing adjunct commitment to PD is show in Table 4.13.

For participants who participated in pedagogical PD ($n = 74$), the bivariate correlation comparing adjunct orientation as a PD program (Q. 43) and the participant sharing the same values as the organization (Q. 4) was positive and statistically significant at the 0.01 level ($r = .303, p = .009$). The coefficient of determination ($r^2 = .092$) revealed that 9.2% of the variance in the adjunct orientation program was explained by the participants' commitment to their educational organization through value sharing. Similarly, the bivariate correlation comparing PD related to student evaluation criteria (Q. 45) and the participant sharing the same values as the organization (Q. 4) was positive and statistically significant at the 0.01 level ($r = .372, p < .001$). The coefficient of determination ($r^2 = .138$) revealed that 13.8%

Table 4.13. Correlation matrix comparing commitment to PD

		I find my values and the organization's values are similar	I am proud to work for this organization	Adjunct Orientation PD	Student evaluation criteria PD
I find my values and the organization's values are similar	Pearson Correlation	1	0.391** $r^2=0.153$	0.303** $r^2=0.092$	0.372** $r^2=0.138$
	Sig. (2-tailed)		<0.001	0.009	<0.001
I am proud to work for this organization	Pearson Correlation	0.391	1	0.151 $r^2=0.023$	0.393** $r^2=0.154$
	Sig. (2-tailed)	<0.001		0.199	<0.001
Adjunct Orientation PD	Pearson Correlation	0.303	0.151	1	0.607** $r^2=0.368$
	Sig. (2-tailed)	0.009	0.199		<0.001
Student evaluation criteria PD	Pearson Correlation	0.372	0.372	0.607	1
	Sig. (2-tailed)	<0.001	<0.001	<0.001	

**Correlation is significant at the 0.01 level (2-tailed)

of the variance in the student evaluation PD was explained by the participants' commitment to their educational organization through value sharing.

The bivariate correlation comparing adjunct orientation as a PD program (Q. 43) and the participants' pride in working for their organization (Q. 5) was positive but not statistically significant ($r = .151, p = .199$). No causal explanation for the lack of statistical significance exists. Finally, the bivariate correlation comparing PD related to student evaluation criteria (Q. 45) and the participants' pride in working for their organization (Q. 5) was positive and statistically significant at the 0.01 level ($r = .393, p < .001$). The coefficient of determination ($r^2 = .154$) revealed that 15.4% of the variance in the student evaluation PD was explained by the participants' pride in working for their organization.

The correlation analysis comparing AFISS survey items on commitment and PD revealed a positive, statistically significant correlation for 3 of the 4 items measured. Although causation cannot be determined through analysis of the correlation values, it was determined that pedagogical PD related to adjunct orientation programs and student evaluation criteria has a positive relationship with some of the organizational commitment constructs for the participants.

Salience correlations

Correlations were performed comparing specific questions on the AFISS to measure the relationship between adjunct salience and PD. The correlation matrix comparing adjunct salience items to PD items is shown in Table 4.14. For participants who participated in pedagogical PD ($n = 74$), the bivariate correlation comparing student evaluation criteria as PD (Q. 45) and the participants viewing the adjunct position as career advancement (Q. 34)

Table 4.14 Correlation matrix comparing salience to PD

		The college academic and intellectual climate appeals to me	The adjunct position is career advancement	Peer Mentoring as PD	Student evaluation criteria PD
The college academic and intellectual climate appeals to me	Pearson Correlation	1	0.266* $r^2=0.070$	0.444** $r^2=0.197$	0.458** $r^2=0.209$
	Sig. (2-tailed)		0.022	<0.001	<0.001
The adjunct position is career advancement	Pearson Correlation	0.266	1	0.366** $r^2=0.134$	0.433** $r^2=0.187$
	Sig. (2-tailed)	0.022		<0.001	<0.001
Peer Mentoring as PD	Pearson Correlation	0.444	0.366	1	0.646** $r^2=0.417$
	Sig. (2-tailed)	<0.001	<0.001		<0.001
Student evaluation criteria PD	Pearson Correlation	0.458	0.433	0.646	1
	Sig. (2-tailed)	<0.001	<0.001	<0.001	

**Correlation is significant at the 0.01 level (2-tailed); *correlation is significant at the 0.05 level (2-tailed)

was positive and statistically significant at the 0.01 level ($r = .433, p < .001$). The coefficient of determination ($r^2 = .187$) revealed that 18.7% of the variance in the student evaluation PD offering was explained by the participants' view that their adjunct role was career advancement.

The bivariate correlation comparing student evaluation criteria as PD (Q. 45) and the intellectual climate of the college appealing to the participants (Q. 35) were positive and statistically significant at the 0.01 level ($r = .458, < .001$). The coefficient of determination ($r^2 = .209$) revealed that 20.9% of the variance in the student evaluation PD offering was explained by the intellectual climate of the college appealing to the participants.

The bivariate correlation comparing peer mentoring as PD (Q. 46) and the participants viewing the adjunct position as career advancement (Q. 34) was positive and statistically significant at the 0.01 level ($r = .366, p < .001$). The coefficient of determination

($r^2 = .134$) revealed that 13.4% of the variance in the peer mentoring as PD was explained by the participants' view that their adjunct role was career advancement. Finally, the bivariate correlation comparing peer mentoring as PD (Q. 46) and the intellectual climate of the college appealing to the participants (Q. 35) was positive and statistically significant at the 0.01 level ($r = .444, p = .000$). The coefficient of determination ($r^2 = .197$) revealed that 19.7% of the variance in the peer mentoring as PD was explained by the intellectual climate of the college appealing to the participants.

The correlation analysis comparing AFISS survey items on salience and PD revealed a positive, statistically significant correlation for all 4 of the correlations measured. It was determined that pedagogical PD related to peer mentoring as PD and student evaluation criteria has a positive relationship with some of the adjunct salience constructs for the participants.

Adjunct satisfaction correlations

Correlations were performed comparing specific questions on the AFISS to measure the relationship between adjunct satisfaction and PD. The correlation matrix comparing adjunct satisfaction items to PD items is shown in Table 4.15. For participants that participated in pedagogical PD ($n = 74$), the bivariate correlation comparing adjunct satisfaction to pedagogical PD revealed no statistically significant correlations for any of the factors being measured. Although no statistically significant correlations were identified, a causation cannot be determined.

Table 4.15. Correlation matrix comparing adjunct satisfaction to PD

		Fulfillment that comes from the adjunct role	Opportunity for involvement in curriculum planning	Adjunct orientation PD	Student evaluation criteria PD
Fulfillment that comes from the adjunct role	Pearson Correlation	1	0.347** $r^2=0.120$	0.013 $r^2=0.000$	-0.093 $r^2=0.008$
	Sig. (2-tailed)		0.002	0.914	0.431
Opportunity for involvement in curriculum planning	Pearson Correlation	0.347	1	-0.044 $r^2=0.002$	0.074 $r^2=0.005$
	Sig. (2-tailed)	0.002		0.708	0.532
Adjunct orientation PD	Pearson Correlation	0.013	-0.044	1	0.607** $r^2=0.368$
	Sig. (2-tailed)	0.914	0.708		0.000
Student evaluation criteria PD	Pearson Correlation	-0.093	0.074	0.607	1
	Sig. (2-tailed)	0.431	0.532	<0.001	

**Correlation is significant at the 0.01 level (2-tailed)

Time spent in role correlations

Correlations were performed comparing specific questions on the AFISS to measure the relationship between adjunct satisfaction and PD. The correlation matrix comparing adjunct time spent in role items to PD items is shown in Table 4.16. For those who participated in pedagogical PD ($n = 74$), the bivariate correlation comparing the adjunct orientation as PD (Q. 43), and participants knowing exactly what was expected of them as an adjunct (Q. 54) was positive and statistically significant at the 0.01 level ($r = .455, p < .001$). The coefficient of determination ($r^2 = .207$) revealed that 20.7% of the variance in the adjunct orientation PD was explained by the participants' knowing exactly what was expected of them as adjunct faculty.

Table 4.16. Correlation matrix comparing time in role to PD

		I know exactly what is expected of me	I know that I have divided my time properly	Peer Mentoring as PD	Adjunct orientation PD
I know exactly what is expected of me	Pearson Correlation	1	0.643** $r^2=0.413$	0.484** $r^2=0.234$	0.455** $r^2=0.207$
	Sig. (2-tailed)		<0.001	<0.001	<0.001
I know that I have divided my time properly	Pearson Correlation	0.643	1	0.348** $r^2=0.121$	0.332** $r^2=0.110$
	Sig. (2-tailed)	<0.001		0.002	0.004
Peer Mentoring as PD	Pearson Correlation	0.484	0.348	1	0.717** $r^2=0.514$
	Sig. (2-tailed)	<0.001	0.002		<0.001
Adjunct orientation PD	Pearson Correlation	0.455	0.332	0.717	1
	Sig. (2-tailed)	<0.001	0.004	<0.001	

**Correlation is significant at the 0.01 level (2-tailed)

The bivariate correlation comparing the adjunct orientation as PD (Q. 43) and the participants knowing that their time was divided properly (Q. 55) was positive and statistically significant at the 0.01 level ($r = .332, p = .004$). The coefficient of determination ($r^2 = .110$) revealed that 11.0% of the variance in adjunct orientation PD offering was explained by the participants knowing they have divided their time properly.

The bivariate correlation comparing peer mentoring as PD (Q. 46) and the participants knowing exactly what was expected of them as an adjunct (Q. 54) was positive and statistically significant at the 0.01 level ($r = .484, p = .000$). The coefficient of determination ($r^2 = .234$) revealed that 23.4% of the variance in peer mentoring as PD was explained by the participants' knowing exactly what was expected of them as adjunct faculty.

The bivariate correlation comparing peer mentoring as PD (Q. 46) and the participants knowing that their time was divided properly (Q. 55) was positive and

statistically significant at the 0.01 level ($r = .348, p = .002$). The coefficient of determination ($r^2 = .121$) revealed that 12.1% of the variance in peer mentoring as PD offering was explained by the participants knowing they have divided their time properly.

The correlation analysis comparing AFISS survey items on time spent in role and PD revealed a positive, statistically significant correlation for all 4 of the correlations measured. It was determined that pedagogical PD related to peer mentoring as PD and the orientation PD for adjuncts has a positive relationship with some of the time spent in role constructs for the participants.

Exploratory Factor Analysis

As mentioned in the methodology section of this paper, exploratory factor analysis (EFA) was utilized to explore the relationships between the variables measured in the AFISS. Unlike the previous correlations that only measured single observations, the EFA was used to develop composite variables to evaluate the relationship between the independent and dependent variables in this study. Utilizing EFA allows for determination of the variables that are most strongly associated with one another and can possibly indicate an underlying latent construct (Urdan, 2010). As described in Chapter 3, some of the variables are not directly related so an indirect relationship was measured, specifically the relationship between PD and identity salience. The updated model for the adjunct role (Figure 3.2) was developed based upon the literature with pedagogical being the independent variable and salience, satisfaction, commitment, and time spent in role as the dependent variables.

The results of the EFA analysis was used to eliminate any observed variables that were not significant for analysis. Since the overall number of responses ($n = 101$) was lower

than anticipated, reliability coefficients were calculated and sample size analysis was performed on the data to evaluate if the data were adequate for analysis. A Kaiser-Meyer-Olkin (KMO) measure of sampling adequacy was calculated for the variables the AFISS was designed to measure. Kaiser (1974) recommended that the KMO results should be greater than .5, or more data needs to be collected or the variable should not be analyzed. A KMO value between .5 and .7 indicates the sample is mediocre, values between .7 and .8 the sample size is good, values between .8 and .9 the sample size is great, and values above .9 the sample size is superb (Field, 2009).

The EFA was conducted on the variables from the AFISS with orthogonal rotation (varimax). The KMO measure verified the adequacy of the overall sample, $KMO = .630$ (“mediocre” according to Field, 2009). The KMO values for the individual constructs were all $> .678$, which were higher than the threshold of .5 (Field). Because of the small sample size ($N = 101$), a Bartlett’s test of sphericity was conducted to test the null hypothesis that the correlation matrix variables are not correlated (Stevens, 2009). Bartlett’s test of sphericity $X^2(2080) = 5032.73, p < .001$ indicated sufficient correlation between items, therefore, rejecting the null hypothesis.

The EFA was set to acquire eigenvalues for each component of the data. Kaiser (1974) set the criteria for eigenvalues to be greater than 1 for inclusion. The variables from the AFISS produced 5 constructs that combined to explain 51.129% of the variance. These 5 constructs, *PD*, *salience*, *commitment*, *satisfaction*, and *time spent in role* were retained for final analysis.

For each of the five identified constructs, the individual variables were analyzed for retention in the final analysis. Stevens (2009) published a table containing the minimal

values of factor loading based upon sample size. A sample size of 100 should have a loading factor greater than 0.512 (Field, 2009; Stevens, 2009). The results of the factor loading for each variable and the construct it belongs to are shown in Tables 4.17a – 4.17e.

A reliability analysis was also conducted to validate the AFISS and ensure the measures consistently reflected the construct that it was measuring (Field, 2009). Specifically, Cronbach's alpha (α) was calculated to provide a measure of scale reliability. Field (2009) stated that an acceptable value for Cronbach's α should be between .7 and .8 with values below .7 indicating an unreliable scale. The *salience*, *satisfaction*, *time spent in role*, and *PD* subscales of the AFISS all had high reliabilities with Cronbach's $\alpha = .772$, $.758$, $.800$, and $.802$ respectively. However, the *commitment* subscale had a relatively low reliability, Cronbach's $\alpha = .621$.

Table 4.17a. Exploratory factor analysis: Professional development ($\alpha = .802$)

Variables	Factor Loading
How helpful was the following PD topic for you to carry out your responsibilities: Curriculum	.859
How helpful was the following PD topic for you to carry out your responsibilities: Teaching methods	.848
How helpful was the following PD topic for you to carry out your responsibilities: Evaluation methods/test construction	.819
How helpful was the following PD topic for you to carry out your responsibilities: Learning theories	.815
How helpful was the following PD topic for you to carry out your responsibilities: Clinical teaching methods	.802
How helpful was the following PD topic for you to carry out your responsibilities: Clinical teaching practicum	.800
How helpful was the following PD topic for you to clarify your role as an adjunct: Peer mentoring	.719
How helpful was the following PD topic for you to clarify your role as an adjunct: Clinical faculty evaluation criteria	.700
How helpful was the following PD topic for you to clarify your role as an adjunct: Orientation programs	.661
How helpful was the following PD topic for you to clarify your role as an adjunct: Job description	.615
How helpful was the following PD topic for you to carry out your responsibilities: Any other PD topic	.538

Note: Variables measured on a 4-point Likert scale: 1 = not helpful, 2 = somewhat helpful, 3 = helpful, 4 = extremely helpful.

Table 4.17b. Exploratory factor analysis: Commitment ($\alpha = .621$)

Variables	Factor Loading
I am proud to be working for this organization	.775
I would turn down another job to stay here	.718
I find my values and the organizations are similar	.531
I would take almost any job to stay working for this organization	.520

Note: Variables measured on a 4-point Likert scale: 1 = strongly disagree, 2 = disagree, 3 = agree, 4 = strongly agree.

Table 4.17c. Exploratory factor analysis: Adjunct satisfaction ($\alpha = .758$)

Variables	Factor Loading
Opportunity for participation in PD	.804
Fringe benefits	.724
Opportunity to participate in staff meetings	.722
Opportunity for involvement in curriculum planning	.722
Office space	.711
Time spent in student advising	.681
Opportunity for participation in college governance	.672
Use of college equipment (e.g. copy machine)	.575
Opportunity for participation in college social events	.554
Working environment	.533
Fulfillment that comes from the adjunct role	.525
Adjunct salary	.515

Note: Variables measured on a 4-point Likert scale: 1 = strongly disagree, 2 = disagree, 3 = agree, 4 = strongly agree.

Table 4.17d Exploratory factor analysis: Identity salience ($\alpha = .772$)

Variables	Factor Loading
The college/academic intellectual climate appeals to me	.778
This position is an opportunity for professional growth	.769
I enjoy working with students	.608
This position is career advancement	.571
It is important that I know my individual student's learning needs	.553
I exert a great effort to communicate with the staff to ensure a positive learning environment	.548
This position has opportunities for career development	.538

Note: Variables measured on a 4-point Likert scale: 1 = strongly disagree, 2 = disagree, 3 = agree, 4 = strongly agree.

Table 4.17e Exploratory factor analysis: Time spent in adjunct role ($\alpha = .800$)

Variables	Factor Loading
I know exactly what is expected of me	.776
Expectation is clear of what needs to be done	.750
My job inspires me	.737
I know what my responsibilities are	.719
I feel certain about how much authority I have	.670
I know that I have divided my time properly	.645
When I get up in the morning I feel like going to work	.642
At my job I feel bursting with energy	.640
I am enthusiastic about my job	.640
I feel happy when I am working intensely	.618
At my job, I feel strong and vigorous	.605
I am proud of the work I do	.544

Note: Variables measured on a 4-point Likert scale: 1 = strongly disagree, 2 = disagree, 3 = agree, 4 = strongly agree.

As a result of the initial EFA KMO and Cronbach's α results, the sample size ($n = 101$) was determined to be adequate to measure all of the constructs within the AFISS except for the *commitment* variable. Even though the *commitment* variable produced a lower reliability than desired, those questions were still analyzed and the findings presented. The appropriateness of applying the findings from the *commitment* variable across outside institutions will need to be evaluated by anyone wishing to generalize this information. The other four variables were determined to have adequate sample size and reliability.

The results of bivariate relationship of the composite constructs produced by the EFA are shown in Table 4.18. All of the results for the direct relationships were positive and statistically significant at the 0.01 level. The results of the composite correlation analysis support all 5 of the stated hypothesis. For Hypothesis 1, a strong relationship between commitment and PD was shown ($r = .535$) supporting that pedagogical PD does correlate to commitment in the adjunct nursing role. For Hypothesis 2, a moderate relationship was demonstrated between PD and satisfaction ($r = .123$), supporting that pedagogical PD does correlate to adjunct satisfaction. For Hypothesis 3, a strong relationship was shown between

Table 4.18. Bivariate correlation relationship for the composite variables

Bivariate relationship	<i>r</i> value
PD x salience	.560
PD x commitment	.535
PD x satisfaction	.135
PD x time in role	.665
Commitment x satisfaction	.037
Commitment x identity salience	.433
Commitment x time in role	.593
Identity salience x satisfaction	.010
PD x identity salience (via satisfaction construct)	.001
PD x identity salience (via commitment construct)	.231
PD x time in role (via satisfaction construct)	.000
PD x time in role (via commitment construct)	.288

commitment and identity salience ($r = .433$). For Hypothesis 4, a weak correlation was demonstrated between salience and satisfaction ($r = .010$), nevertheless, a positive correlation exists and supports that adjunct salience is related to satisfaction. For Hypothesis 5, a strong correlation was calculated between job commitment and the amount of time spent in the adjunct role ($r = .593$), supporting that commitment is related to the time an adjunct spends in that role.

The bivariate correlation between PD and identity salience was positive and statistically significant at the 0.01 level ($r = .560, p = .000$). The results also showed that a stronger relationship exists between PD and commitment ($r = .535$) than PD and satisfaction ($r = .123$). In addition, the results showed that pedagogical PD provides higher levels of commitment to the adjunct role than higher levels of adjunct satisfaction. The results also

showed a strong positive direct relationship between commitment and identity salience ($r = .433$). Commitment had a more positive relationship on the time an adjunct spends in the role ($r = .539$) than the satisfaction variables ($r = .003$). The indirect effect of PD on time spent in role was more positive via adjunct commitment ($r = .288$) than via adjunct satisfaction.

The findings of the composite correlation analysis showed that the AFISS produced results that demonstrated that pedagogical PD was positively correlated with identity salience. The findings also showed that PD had a stronger relationship with commitment to the adjunct role and a stronger relationship with time spent as an educator. The results also showed that the relationship between PD and satisfaction was not as strong as the other variables.

Summary

Comprehensive qualitative and quantitative data were gathered through interviews, field notes, and an online survey. The data gathered were intended to provide a voice to adjunct nursing faculty members to analyze how pedagogical PD affects their identity salience, commitment, satisfaction, and the time they spent in their adjunct role. The participants were from a variety of education institutions across the Midwestern United States. The results presented in this chapter are discussed and the implications of this research are presented in Chapter 5.

CHAPTER 5. SUMMARY, FINDINGS, AND RECOMMENDATIONS

Summary

This study explored the effect that pedagogical professional development (PD) had on the identity salience for adjunct nursing faculty members. The intention was to understand if the salient identity of the participants was as an educator, and determine if that affected their commitment, satisfaction, and the time spent in the role as an adjunct. The predominant method for data collection was through qualitative interviews with supportive data gathered from a quantitative survey. The main purpose behind conducting this research study was to understand the role pedagogical PD played in shaping the participants' identity to the adjunct role.

The qualitative data were gathered from a total of 10 female adjunct nursing faculty members who had been an adjunct for at least one year, had five years' experience working as a nurse, and had participated in pedagogical PD related to their adjunct position. All 10 participants were from different educational institutions across the Midwest. The qualitative data were gathered through interviews and field notes generated during the interviews. Each participant was provided a transcript of the interview to ensure the authenticity her voice. The quantitative data were gathered through the Adjunct Faculty Identity Salience Survey (AFISS) delivered online to adjunct nursing faculty. The survey was delivered to 467 adjunct nursing faculty with a response rate of 20% ($n = 101$). The results of research data were presented in detail in Chapter 4.

The qualitative study was guided by a phenomenological approach with symbolic interactionism as the theoretical approach. Identity theory was the theoretical lens through

which the data were collected. The overarching research question this study aimed to answer was “How do the experiences provided through pedagogical PD relate to identity salience among adjunct faculty?” In addition to the central research question, two qualitative and two quantitative research questions were posed. This chapter provides the answers to the research questions based upon the data gathered.

Findings

The qualitative data collected were analyzed through two separate levels of coding that produced 5 main recurring themes. The recurring themes were used to help answer the research questions below. The AFISS survey data were analyzed using Statistical Package for the Social Sciences (SPSS) through descriptive statistics, crosstabs, correlations, and exploratory factor analysis (EFA). The AFISS data were intended to supplement the findings from the qualitative interviews and provide a degree of generalizability to this study. Both the qualitative and quantitative data presented in Chapter 4 are used to provide closure to this study by answering the research questions. The qualitative and quantitative questions are answered first, followed by the central research question.

Qualitative Research Question 1

How do adjunct nursing faculty describe the role of professional development in their commitment to the role of an educator?

Two of the themes identified from the qualitative data contribute to help answer this research question. The first theme that helps answer this question was *lack of professional development leads to less job commitment*. The findings are interesting because, instead of describing how the positive aspects of participating in pedagogical PD make the participants

more committed to the adjunct role, the participants spoke about how a lack of PD made them less likely to continue as an adjunct instructor. Two participants in particular shared that the PD they received was fairly ineffective and their salient identity was still as a nurse and they would prefer taking a nursing job over an adjunct job.

Other participants who did receive adequate PD and identified themselves as educators discussed that they would not continue teaching if their ability to participate in PD was eliminated. Margaret indicated that, without substantive pedagogical PD, she “*would not adjunct teach anymore.*” Jennifer also shared that, without the skills she developed through participating in PD, she would had a much more difficult time managing her student and “*probably would not have continued teaching.*” The other participants shared similar stories.

Beth made an interesting comment on commitment when she stated her concern for the preparedness of other adjunct faculty members due to a lack of PD. Her concerns about the quality and ability of the other adjuncts to teach could reduce her commitment to teaching because she could not control the quality of education the other instructors were delivering to the students. Being committed to teaching in a nursing program while having the perception that others are ill prepared to teach is challenging.

The other theme provided by the data to answer the first qualitative research question was *participating in professional development reduces adjunct isolation*. The literature on adjunct isolation revealed that feelings of isolation may lead to adjunct faculty turnover (Locasto & Nochanek, 1989). It was an interesting finding to note the first two interview participants said almost the exact same phrase: “*As an adjunct you feel like you are alone on an island.*” Other participants used similar phrases, such as adjuncts are “*fill-in-the blank*

faculty” or are “*treated like second-class citizens.*” One of the statements from the participants on what made them feel isolated and alone was a lack of understanding of what topics were currently being covered in the students’ other classes.

Participating in pedagogical PD reduced the participants’ feelings of isolation. Jayne, in particular, was very descriptive when sharing how attending PD seminars helped make her feel welcome and part of the educational team in her nursing program. “*It [PD] was a good networking opportunity. It showed how many people are out there on a limb with you.*” Jennifer added, “*I know I am not alone there [after participating in PD].*” Debbie said that her institution was starting something new this semester by sending weekly emails to all of the adjuncts to inform them of the topics being covered in the other classes. A simple weekly communication made Debbie feel more connected to the other faculty and respected by the program administrators.

The two themes that helped answer this research question are directly linked. Participating in PD helped the participants feel included with the other faculty and the program they were teaching in while a lack of adequate PD only magnified the feelings of isolation. Although this was a qualitative research question, the quantitative data in this study supported the relationship between pedagogical PD and adjunct commitment. The composite correlation analysis results revealed a significant positive direct relationship between PD and commitment ($r = .535$).

It is worth mentioning that this research question specifically asked the participants to describe the role PD played in their commitment to their adjunct role. It was not the intent to investigate the quality of the pedagogical PD that the participants received. Part of the reason that the PD quality was not investigated was because all 10 participants came from

separate institutions, each providing a different opportunity for development making it difficult to evaluate quality effectively. Even though it was not the intention to investigate PD quality, the participants' voices articulated that ineffective PD does reduce the desire to continue teaching as an adjunct while participating in effective PD reduced feelings of isolation and increasing the bond with their colleagues and program.

Qualitative Research Question 2

What meaning do adjunct nursing faculty gain from participating in professional development that allows them to be more satisfied as educators?

One identified theme from the qualitative data helped answer this research question: *Peer mentoring as part of PD leads to higher satisfaction.* The results for this research question were somewhat surprising. For the first qualitative research question, the participants' experiences revealed a very strong association between PD and commitment, which was verified through the quantitative results. For this research question, the relationship between PD and adjunct satisfaction was less defined.

Few of the participants mentioned that the skills or training they received led to increased satisfaction toward the adjunct role. Peer mentoring was identified as the most relevant PD activity that contributed to adjunct satisfaction. The majority of the satisfaction towards the adjunct role through peer mentoring was the development of friendships and professional relationships with the participants' colleagues in the nursing program.

Jean's experience with peer mentoring was simple, "*the more that I am there and the more they trust me, that makes me satisfied.*" Rose's comments were very similar, "*I am satisfied being included in the faculty, I am close with the dean of students and two of the*

instructors.” She also stated that the discussions she has with her mentors “makes me feel like I am taken seriously and that I am supported. I am very satisfied with my role.”

Beyond the comments made about peer mentoring, an unexpected finding from the interviews revealed that the participants’ get a tremendous amount of satisfaction from the success of their students. Jennifer stated, *“I am satisfied with the success of the students.”* Debbie also shared that *“I get fulfillment out of teaching and I feel like I have done something good for the students.”* The relationship between student success and PD was not measured in this study but it is theorized that some level of student success comes from adjunct instructors that have been prepared for the adjunct role through PD.

Through the experiences of the participants, it was determined that participating in pedagogical PD does lead to higher levels of satisfaction through peer mentoring and building relationships within the nursing program. However, the results showed that other factors, such as student success, have a role in adjunct satisfaction. The results also showed the role that PD plays in adjunct satisfaction was not as strong as it was with adjunct commitment. The quantitative data also supported the assertion that the relationship between PD and adjunct satisfaction was less defined. The composite variable correlation analysis did show that a statistically significant positive direct relationship between PD and adjunct satisfaction ($r = .123$). This relationship had a lower correlation than the relationship between PD and adjunct commitment ($r = .535$). Interestingly, individual correlations performed on individual questions related to PD and adjunct satisfaction did not reveal a statistical relationship. This discrepancy is addressed in the next section. Overall, the qualitative and quantitative data revealed that the relationship between PD and adjunct satisfaction was the weakest of any of the variables measured in this study.

Quantitative Research Question 1

What effect does pedagogical professional development have on the identity of adjunct nursing faculty and their commitment, satisfaction, and time spent in that role?

The statistical analysis of the AFISS identified the effect that PD had on adjunct identity, commitment, satisfaction, and the time spent in that role. Because participating in PD was not a requirement for participation (unlike the qualitative participants), only 74 of the 101 participants indicated that they participated in pedagogical PD. Initially, the data were analyzed including all of the participants but some of the tests were re-measured only including the participants that indicated they participated in PD. When the measures were recalculated eliminating the responses from the participants who did not receive any PD, the values were virtually unchanged.

The updated model for the adjunct role was the model described in Chapter 3 to provide a visual representation of the relationship between the independent and dependent variables based on previous research conducted by Kuchera and Miller (1988). In that model, PD is directly linked only to commitment and satisfaction. To better evaluate the effect directly between PD and all of the dependent variables crosstabs and correlations on individual AFISS questions were performed on the data.

The individual variable correlation analyses showed that a positive statistically significant relationship existed between PD and all of the variables except adjunct satisfaction. The composite correlation analysis for the updated model for the adjunct role did show a statistically significant correlation between PD and satisfaction, although it was relatively weak ($r = .123$). The reason why the individual variable correlations did not show a relationship and the EFA analysis did was because the correlations were performed on

individual AFISS questions and the composite analysis compared the constructs as a whole. As discussed in the qualitative Research Question 2, contributing factors, other than PD, have an effect on adjunct satisfaction. These findings support the results of Kuchera and Miller's (1988) research using the model for the adjunct role where they showed that the more negative the participant's perception of the opportunity structure resulted in less satisfaction and less time spent in the adjunct role. The findings from analysis of the AFISS did show a weak correlation between PD and satisfaction so it can be concluded that little or no PD will result in less satisfaction.

Of the remaining variables, the strongest correlation was between PD and time spent in role. This was another particularly interesting finding because the updated model for the adjunct role did not provide a direct relationship between the effects PD had on the time spent in role but the correlation values did allow for a comparison. These results indicate that providing adjunct faculty members pedagogical PD result in the adjuncts dedicating more time to their role as an adjunct.

Participating in PD also positively affects the commitment to the adjunct role. Analysis revealed two contributing factors on commitment from PD were the orientation programs and training related to student evaluation. Those two PD activities had the highest correlation with the commitment items on the AFISS.

The final analysis showed that PD does have a statistically significant positive relationship with identity salience. The crosstabs results showed that of the participants that identified as an adjunct, 76% identified that they participated in some form of PD related to their role as an adjunct and of the 22 participants that never participated in PD, only 18% had identity salience as an adjunct. The correlation analysis showed that peer mentoring and PD

related to student evaluation had the most effect on identity salience. These results support the research by Beijaard et al. (2004), and Flores and Day (2006) where each study showed that PD is an essential element in the teacher's professional identity.

The composite correlation analysis of the updated model for the adjunct role did not allow for a direct evaluation of identity saliency through PD, rather it measured the effect on identity salience via the commitment or satisfaction construct. The results showed that identity salience has a much stronger relationship through the commitment construct ($r = .231$) versus the satisfaction construct ($r = .001$). These results support the qualitative findings that suggested that the PD had a more profound effect on commitment than adjunct satisfaction.

To summarize, the quantitative data gathered with the AFISS provided evidence to support that adjunct nursing faculty participating in pedagogical PD corresponds to having identity salience as an adjunct, are commitment to their adjunct role, and are willing to spend more time in their role as an adjunct. The findings also showed that PD does contribute to adjunct satisfaction but that relationship is not as strong as the other variables.

Quantitative Research Question 2

What is the relationship between commitment, satisfaction, time in role, and identity salience when controlling for the effects of pedagogical PD?

The updated model for the adjunct role was the best representation to identify the relationship between the dependent variables controlling for the independent variable. The results showed that the strongest relationship was between commitment and the time spent in role ($r = .593$) followed very closely by commitment and identity salience ($r = .433$). These

relationships identify how crucial the role is that commitment plays in the overall adjunct role.

Investigating the variables further, the relationship between satisfaction and commitment ($r = .037$), satisfaction and the time spent in the role ($r = .003$), and satisfaction and identity salience ($r = .010$) were still positive, but overall fairly weak. This suggests that satisfaction does play a factor in the overall adjunct role, but it is not as crucial as some of the other variables.

The results suggest that, although an adjunct may state satisfaction with her/his job, it does not necessarily mean that she/he has identity salience as an adjunct, is committed to her/his role, or is willing to spend more time in that role. The qualitative interviews revealed that other variables factor into the satisfaction of adjuncts, including student success, working hours, and schedule flexibility. The results do not suggest that adjunct satisfaction should be ignored; rather, more emphasis could be placed elsewhere.

The results also suggested that if adjunct faculty members are committed to their role as an adjunct, they have higher levels of identity salience as an adjunct and are willing to spend more time in their role. These results are logical because adjuncts who are dedicated to working as an adjunct will be more likely to identify themselves as an educator and put in the time necessary to be successful.

The results of this study also support the original research on identity theory conducted by Stryker and Serpe (1980). Their results showed that commitment was directly and positively related to identity salience and the amount of time their participants spent in their job role. The quantitative analysis of the AFISS did reveal that a strong relationship

existed between commitment and identity salience and between commitment and the time spent in the adjunct role.

Central Research Question

How do the experiences provided through pedagogical professional development relate to identity salience among adjunct nursing faculty?

The answer to this research question is the culmination of this dissertation research. The core findings from this study are presented following an exhaustive research process that included investigating both qualitative and quantitative data. The answer to the core question that prompted this study is that the participants who actively participated in meaningful pedagogical professional development related to their role as an adjunct do have identity salience as an educator.

This result is of importance for adjunct nursing educators have previously worked or are currently working as registered nurses. A nurse's identity begins to form in nursing school and it develops throughout her [or his] career. Many nurses have no training or experience as educators yet, due to the requirements of nursing education programs, many transition to teach students. Nursing programs need to understand what resources they need to provide to help transition those nurses into academia so they can develop their identity as an educator.

This conclusion was reached through a comprehensive review of all of the data collected and the answers to the qualitative and quantitative research questions. All of the emerging themes from the qualitative data support the conclusion but the theme that reiterates the conclusion the most was *ongoing PD fosters a teaching identity*. Eight of the 10 interview participants indicated that their most salient professional identity was an

educator or would take a job as an adjunct over a job as a nurse. The two participants who did not identify as an educator revealed their PD was not adequate for their role.

The participants' stories revealed that going to PD meetings, working with peer mentors, and learning about classroom management made them feel like they were an integral part of the nursing education programs. As the findings for the other research questions revealed, participating in PD and having an identity of an educator, the participants of this study were more committed, were willing to spend more time in their role as an educator, and had some higher levels of job satisfaction.

Another finding from this study that reinforces the conclusion that PD does contribute to an adjunct's identity as an educator was the call for more PD from the participants. Particularly, the comments received from the open-ended question on the AFISS were overwhelmingly a call for nursing programs to provide more PD opportunities to the adjunct instructors. This was particularly interesting because the AFISS was distributed to adjunct nursing faculty with no requirements for participating in PD. Some of the participants had not received pedagogical PD and they took the opportunity to make their voices heard that it was something they desired.

The quantitative results supported the qualitative findings in this study. The results of the bivariate correlations among the composite variables demonstrated a statistically significant relationship between PD and identity salience ($r = .560$). In addition, positive relationships were identified between PD and commitment, time spent in the adjunct role, and adjunct satisfaction. The quantitative findings provided more validity to the qualitative results.

On the surface, this may seem like a fairly innocuous conclusion, but the underlying importance is that nursing programs now have research findings that attest to the outcomes of providing pedagogical PD to their adjunct instructors. This research showed that the outcomes from offering PD to adjunct faculty members are positive and that the adjuncts are incorporating it into their practice of being an educator. Taking the results from this study, the following recommendations are presented for practice as well as future research on this topic.

The findings of the central research question are best summarized by the findings described in Chapter 2 by Janzen (2010). Janzen described the process of how an expert practicing nurse transitions into a nurse educator. This process was very multidimensional and required the person to: Be developmental and set goals, identity formation, and values; be influenced by the normal, values, and culture of the academe; and develop skills as they learn about students and themselves (Janzen). When reviewing the findings of all five of the research questions used in this study, it is evident that the factors influencing the transition from a practicing nurse into the role of nurse education are multifaceted. This study not only focused particularly on the role that pedagogical PD played (influenced by the academe) but also through the qualitative narratives the participants used to describe their personal transition from practitioner to educator.

Comparing the Findings to Previous Literature

The findings of this study were compared to the previous literature presented in Chapter 2. The previous literature on CTE faculty described that PD is essential to overcome the difficulty of becoming a competent, professional teacher (Diegel, 2010; Elmore, 2007;

Wonacott et al., 2002). The qualitative and quantitative findings from this study support these findings from the literature. The qualitative participants described the PD they received was an essential element in helping them become an adjunct nurse educator.

The previous literature uncovered the PD activities specific to adjunct nursing faculty members. Because adjunct nurses have little to no formal preparation as a teacher, the most successful PD activities for adjunct nursing faculty are: Adjunct orientation programs, peer mentoring, and meetings that incorporate aspects related to effective teaching strategies (Cangelosi et al., 2009; Himmelberg, 2011; Shearer, 2008). The findings in this study also supported the findings in the previous literature on successful adjunct nursing PD programs. The qualitative narratives revealed that peer mentoring and orientation programs were the two most useful forms of PD that the participants received. Specifically, an emerging theme from the qualitative data was that peer mentoring leads to higher levels of adjunct satisfaction.

Several previous qualitative studies explored the foundations and the factors influencing professional identity. The professional identity of a nurse is created through professional training, personal interactions, PD, and gender differences (Adams et al., 2006; Deppoliti, 2008; King & Ross, 2003; Roberts, 2000). The findings in this study support the previous literature on the factors influencing professional identity. The qualitative findings showed that training and personal interactions helped form a professional identity. The qualitative narratives described how the nursing identity was formed through influences from personal role models and the experiences while in nursing school or through their early experiences as a nurse.

The literature on forming a professional identity in higher education showed that excellent teachers apply different approaches to their profession. A key finding from studying the professional role as an educator showed that PD is an important element of a teacher's identity (Beijaard et al., 2004; Flores & Day, 2006; van Huizen et al., 2005). Beijaard et al. (2004) provided a conceptual model that illustrated how a teacher forms a professional identity (Figure 2.2). This model had four quadrants and teachers begin their identity formation in the research-based knowledge of teaching and then migrate to the other quadrants. In this study, PD was identified as a variable that influenced identity salience as an educator. The findings do support Beijaard's conceptual model that identity formation of an educator begins with research-based knowledge of teaching. Attending orientation programs where relevant topics on teaching such as grading, syllabi creation, and writing course objectives helped form the identity of an educator. After starting with research-based knowledge of teaching the participants migrated to other quadrants of the model through personal interactions. Interpersonal interactions through peer mentoring were identified as one of the PD activities that helped them develop satisfaction as an educator.

Searching the current literature on the influence PD has on adjunct nursing identity salience did not reveal studies that specifically investigated these variables together. Many studies did investigate these variables independently and they were presented in Chapter 2. Overall, the findings in this study support the previous literature on PD, professional identity, and the factors influencing identity formation. Since the findings of this study support the literature on the topics, several recommendations for practice are presented.

Recommendations for Practice

“Adjuncts see teaching as a calling, not just a job.” This comment made by one of the interview participants summarizes why nurses enter the world of nursing education. Teaching the nursing profession to the next generation of nurses is a passion for many nurses who pursue work as an adjunct instructor. However, most nurses are trained to provide care to patients, not educate students.

The results generated from this study tell the stories of how participating in PD related to the adjunct role aids in the transition from the world of nursing to academia, and enables the participants to develop their identities as educators. The results are of little consequence if they cannot be effectively incorporated into nursing education programs. Following are recommendations on how nursing programs can usefully incorporate the findings into their practice.

The first recommendation is very simple. Nursing programs that do not currently offer pedagogical PD for their adjuncts need to develop a PD program. The results of this study provide evidence of what the outcomes of an effective PD program can do to promote adjunct salience, commitment, and the time spent in the adjunct role. The development of a PD program is dependent upon the needs of the adjuncts specific to each institution. Nursing program administrators should openly communicate with their adjuncts to determine what PD program would be best received by their adjuncts and meet their needs.

Nursing programs currently offering PD for their adjuncts need to inventory what types of PD they are offering and evaluate what is effective for their adjuncts. This study did not provide any direct evaluation or assessment of individual PD programs, rather it investigated the effect that PD had on salience as an educator, commitment, satisfaction, and

time spent in the adjunct role. Even though the evaluation of PD programs were not performed, the results in this study suggested that adjunct orientation programs, peer mentoring, and PD related to grading/classroom management were the most effective forms of pedagogical PD.

The next recommendation evolved from the narratives of the qualitative participants. Many adjuncts feel isolated and alone in their role, and the results of this study revealed that participating in pedagogical PD eased those feelings. This recommendation came directly from one of the qualitative narratives. Nursing programs need to communicate to adjuncts what is occurring with the students in the other classes they are taking. Since many adjuncts do not spend extended periods of time on campus they typically do not have casual interactions with the other faculty to discuss students' progression in the other courses. One of the qualitative participants mentioned that she was receiving weekly emails from the nursing program director with the topics being covered in the other classes. This would be considered a very simple form of PD because it serves to help adjunct understand what their peers are covering and gives an opportunity for collaboration.

The final recommendation for practice is for nursing administrators is to incorporate an adjunct recognition program. Many of the participants mentioned that they would like to know that others perceive they are performing well in their adjunct role. The participants stated that small gestures, like a simple hand-written note or a short email that reinforced the quality of work they are providing, would make them feel like they are part of the program.

As mentioned in the introduction, the current trend for nursing programs across the county is to hire adjunct faculty to teach their students (West et al., 2009). Nursing programs need to be very proactive with their adjuncts and provide the training necessary to assist the

transition from practice into education. Institutions providing pedagogical PD are essentially limited only by their desire and creativity to develop the material to deliver to their adjuncts. This research provides evidence of the effect that PD has on adjunct nursing faculty, and should serve as encouragement for nursing programs to evaluate the emphasis that is placed on adjunct PD.

Recommendations for Future Research

“Minimal research has examined the phenomenon of transition from clinician to academic educator” (Anderson, 2009, p. 204). This study investigated the role that pedagogical PD plays in the transition of identity salience from nurse to educator. Additional research on the broad topic of clinicians transitioning to educational programs and more specific topics like PD, identity salience, and commitment to the adjunct role is needed.

An interesting finding in this study was that the effect of adjunct satisfaction as the result of participating in PD was lower than the other variables. A study designed specifically to investigate the context of adjunct satisfaction should be conducted to determine the extent to which PD factors into satisfaction. This study revealed that other factors like student success, working hours, and salary also affect adjunct satisfaction. This study did not measure the extent to which PD affects satisfaction in comparison to the other variables. Future research focusing on the adjunct satisfaction could identify how those other variables influence adjunct salience, commitment, and the time they spend in the adjunct role.

This study did not attempt to evaluate or assess individual pedagogical PD programs. A wide-range evaluation of nursing adjunct PD programs would be especially challenging

due to the diversity of the specific content offered across institutions. Since an effective broad evaluation would be challenging, assessing individual program PD offerings could be beneficial for other institutions to utilize as a benchmark for comparison. This type of future research was reiterated after listening to Rose's description of her institution's adjunct PD program. She mentioned that she is provided the opportunity to attend PD meetings, they have primary and secondary peer mentors, and they include adjuncts in faculty meetings. A case study of this type of quality PD program could be beneficial for other institutions.

This research was conducted on adjunct nursing instructors within nursing programs at hospital-affiliated nursing programs or two-year community/technical colleges. Nursing is one of many career and technical educational (CTE) programs that are predominantly offered at community/technical colleges. Additional research is needed to understand if the findings in this study are transferrable to other CTE programs like welding, CNC machining, or auto mechanics that utilize adjunct faculty. One of the themes that emerged from this study was that *teaching is a part of the nursing profession* so the transition into education might easier than with other professions. It is not clearly understood how this pre-education identity is apparent in other CTE professions. Collaboration with national organizations like the National Research Center for Career and Technical Education (NRCCTE) could facilitate inter-department CTE research.

The final recommendation for future research is to conduct a study using the AFISS to test the model of the updated model of the adjunct role. In this study, an insufficient number of participants completed the AFISS to complete confirmatory factor analysis and structural equation modeling. This new model was modified based upon the previous research of Kuchera and Miller (1988). In their research, their original model investigated

the adjunct job opportunity structure to measure the effects on commitment, satisfaction, salience, and time spent in the adjunct role. In the revised model was modified for future study, the independent variable “professional development” can replace their independent variable of “opportunity structure” and measure the effects. Figure 5.1 provides a visual example of the model to be tested with the results of the composite correlation analysis providing an example of what the future results could resemble.

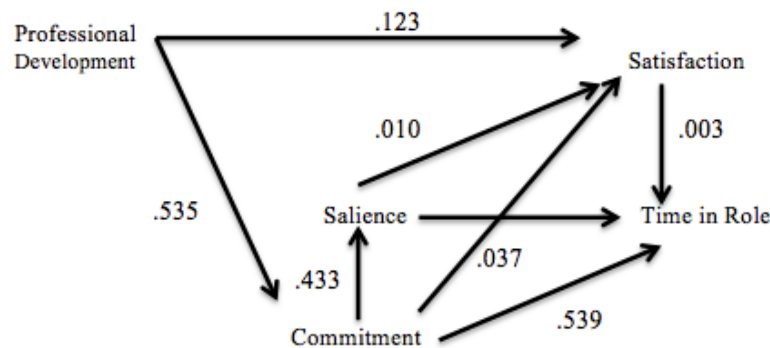


Figure 5.1. Correlation analysis results of the updated model for the adjunct role

For future research on adjunct nursing faculty to be successful, obtaining a large sample size for analysis is crucial. In the current study, obtaining access to large number of adjunct nursing faculty was a limitation. To obtain access to a sufficient number of adjuncts, it is recommended that the study be collaborated with a national organization like the National League for Nursing or the NRCCTE.

Reflection

Although this section is the epilogue of this dissertation research, it represents a prologue of my journey into academic research. It is challenging to put into words my evolution as the result of conducting meaningful research and publishing it in the form of a

lengthy dissertation. Before I began my dissertation research, I had read books, watched videos, read blogs, and listened intently to others who had completed the dissertation process. I vowed to not let myself get lost in the difficulties that had befallen others and derailed their meticulously planned journey. The fact that I have made it to the conclusion of this long road, I would rate my journey a success, although not without a few roadblocks along the way.

The topic of PD has been one of my academic passions since I entered higher education. When formulating potential topics and approaches to investigate PD, I was resolved in my desire to use a qualitative approach. While developing my research proposal and working closely with my dissertation committee, they convinced me that a mixed-methods approach would provide more trustworthiness to my research. Outwardly, I openly embraced the challenge but inwardly it was a difficult to accept because a mixed-methods approach was not what I wanted to do. Reflecting back on what I was able to accomplish, the mixed-methods approach most certainly contributed to my growth as a researcher and I am grateful that I incorporated it based on my Committee's advice.

A few aspects of this study do need to be discussed before the conclusion of this work. Although this was a mixed-methods approach, it was meant to be a predominantly qualitative study with the quantitative data meant as supplementary for the qualitative interviews. This study was not intended to be a dominantly quantitative study. Quantitative researchers could most certainly critique this study and decree it to lack validity and reliability due to the small sample size. My only defense for the small sample size is I completely underestimated the challenge of delivering the survey to adjunct nursing faculty. I knew that I would only have about a 20-30% response rate on the survey itself but I was

very naïve in believing that nursing program directors and administrators would be more than helpful in providing access to their adjuncts. It turned out that I only had a higher response rate on my survey (21.6%) than I did on nursing programs providing me with access to their adjuncts (20%). I expanded the pool of institutions that I contacted and was very persistent with follow-up phone calls and emails but to no avail.

Because of the small sample size, the majority of the statistical analysis was conducted through descriptive statistics, crosstabs, and correlations. The theoretical model used for the quantitative methodology was Identity Theory and a model for the adjunct role developed by Kuchera and Miller (1988). Path analysis/structural equation modeling was supported by their research to explain the adjunct model. With the small sample size, the validity and reliability of the quantitative analysis in this dissertation is a concern. Analysis on the sample size and reliability concluded that the constructs did fall within acceptable ranges except for the commitment variable.

I thoroughly enjoyed the experience of my qualitative approach. My original background was in healthcare and a major part of my job was talking to people and listening to the circumstances surrounding their condition. That experience paid significant dividends for my qualitative experience because I had experience listening to what people had to say and developed techniques to get people to share their stories. Having the opportunity talk to adjuncts working on the “front-line” in nursing education and use the information that they provided to benefit others is, in my opinion, the best aspect of conducting qualitative research.

It is my belief that every new Ph.D. student believes that she or he is going to go out and solve a myriad of problems related to their field when they conduct their dissertation

research. I know that is an unobtainable in reality. This research represents my small contribution to the field of higher education, nursing education, and community colleges. I am proud to present my work for others to learn from and expand upon. If this research is helpful to one nursing program, one CTE program, or one adjunct educator, it was well worth the effort!

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APPENDIX A. INSTITUTIONAL REVIEW BOARD APPROVAL

IOWA STATE UNIVERSITY
OF SCIENCE AND TECHNOLOGY

Institutional Review Board
Office for Responsible Research
Vice President for Research
1138 Pearson Hall
Ames, Iowa 50011-2207
515 294-4566
FAX 515 294-4267

Date: 10/1/2014
To: Jared Seliger **CC:** Dr. Janice Friedel
From: Office for Responsible Research
Title: Using Identity Theory to Determine the Role of Professional Development in Adjunct Nursing Faculty Identity Salience
IRB ID: 14-402
Study Review Date: 8/21/2014

The project referenced above has been declared exempt from the requirements of the human subject protections regulations as described in 45 CFR 46.101(b) because it meets the following federal requirements for exemption:

- (2) Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), survey or interview procedures with adults or observation of public behavior where
 - Information obtained is recorded in such a manner that human subjects cannot be identified directly or through identifiers linked to the subjects; or
 - Any disclosure of the human subjects' responses outside the research could not reasonably place the subject at risk of criminal or civil liability or be damaging to their financial standing, employability, or reputation.

The determination of exemption means that:

- **You do not need to submit an application for annual continuing review.**
- **You must carry out the research as described in the IRB application.** Review by IRB staff is required prior to implementing modifications that may change the exempt status of the research. In general, review is required for any modifications to the research procedures (e.g., method of data collection, nature or scope of information to be collected, changes in confidentiality measures, etc.), modifications that result in the inclusion of participants from vulnerable populations, and/or any change that may increase the risk or discomfort to participants. Changes to key personnel must also be approved. The purpose of review is to determine if the project still meets the federal criteria for exemption.

Non-exempt research is subject to many regulatory requirements that must be addressed prior to implementation of the study. Conducting non-exempt research without IRB review and approval may constitute non-compliance with federal regulations and/or academic misconduct according to ISU policy.

Detailed information about requirements for submission of modifications can be found on the Exempt Study Modification Form. A Personnel Change Form may be submitted when the only modification involves changes in study staff. If it is determined that exemption is no longer warranted, then an Application for Approval of Research Involving Humans Form will need to be submitted and approved before proceeding with data collection.

Please note that you must submit all research involving human participants for review. **Only the IRB or designees may make the determination of exemption**, even if you conduct a study in the future that is exactly like this study.

Please be aware that **approval from other entities may also be needed.** For example, access to data from private records (e.g. student, medical, or employment records, etc.) that are protected by FERPA, HIPAA, or other confidentiality policies requires permission from the holders of those records. Similarly, for research conducted in institutions other than ISU (e.g., schools, other colleges or universities, medical facilities, companies, etc.), investigators must obtain permission from the institution(s) as required by their policies. **An IRB determination of exemption in no way implies or guarantees that permission from these other entities will be granted.**

APPENDIX B. QUALITATIVE INSTRUMENTS

B.1. Interview guide

Interview #1

Pre-Professional Questions

1. Describe your career ambitions when you were a child.
2. What role did your family play in influencing your career choice?
3. Describe any role models you had growing up and how they shaped your experiences.
4. Describe any defining life experiences you had that had an influence on your career choice.

Professional Background Questions

The interview questions below were obtained from Deppoliti (2003). Permission from the author was granted to use these interview questions (Appendix B.2).

5. How is it that you became interested in becoming a nurse?
6. When did you decide to be a nurse?
7. What people have impacted you in terms of being a nurse?
8. Can you describe any situations in your nursing education that you feel framed your sense of yourself as a nurse?
9. What is your best memory of being a nurse?
10. How do people react when you tell them you are a nurse?
11. What does it mean to be professional?
12. How would you describe yourself as a nurse when you first graduated from nursing school?
13. How would you describe yourself as a nurse now?
14. How long have you been adjunct teaching?
15. What interested you in becoming an adjunct?
16. What has impacted you in terms of being an adjunct?
17. When was the last time you participated in professional development related to teaching?

Questions Related to the Phenomenon

The interview questions below about phenomenology were obtained from Moustakas (1994).

18. What are your experiences in relation to the phenomenon?
19. What situations have influenced your experiences with the phenomenon?

The interview questions below were obtained from MacIntosh (2002). Permission from the author was granted to use these interview questions (Appendix B.2).

20. How do you describe the influence of your professional development experiences, on your experiences in the context of being an adjunct faculty?
21. Are there other aspects of how professional development has affected your identity you would like to add?

Interview #2

Commitment Reflection Questions

1. Of all the people you know through your adjunct teaching, describe how many are important to you and why they are important to you (e.g. you would really miss them if you did not see them)?
2. Thinking about those people that are important to you, about how many (or what percentage) of them would you lose contact with if you did not adjunct teach?
3. How many people do you know of a first name basis through your adjunct activities?
4. Of the people you know through your adjunct activities, how many (or what percentage) are close friends?

Salience Reflection Questions

5. Think about meeting people for the first time and you want to tell them about yourself so they will really know you but you can only tell them one thing about job. Please describe your job to me.
6. Suppose you have two opportunities for job openings, one a part-time staff nurse and the other an adjunct instructor. With all factors being equal (e.g. pay, benefits, etc.) describe which position you would accept and why.

Satisfaction Reflection Questions

7. Please explain the factors or influences that cause you to be satisfied or dissatisfied with your role as an adjunct instructor? If you could rate them, explain the top three factors that lead to your level of satisfaction (or dissatisfaction)?
8. Please explain what your professional goals are as an adjunct faculty and if you agree or disagree with if you have met those goals. If you could rate them, explain the top three factors that affect your goal completion?
9. Please explain any rewards or recognition you receive from your role as an adjunct instructor. What are the top three rewards or recognitions you have received?

B.2. Permission from authors

From: [REDACTED]
Subject: RE: Question about your dissertation
Date: June 9, 2014 4:14:50 PM CDT
To: jseliger @iastate.edu

Jared

Thank you for asking. I used that initial interview guide as a starting point for my grounded theory interviews. As is consistent with that method, the interview guide evolved as relevant concepts emerged from the simultaneous data collection and analysis process.

You are welcome to use that guide as a basis for your own research.

I wish you well with your study.

Judy



From: [REDACTED]
Subject: Dissertation
Date: June 16, 2014 2:31:51 PM CDT
To: jseliger@iastate.edu

Jared,

I was very happy to learn that my dissertation and article were of value to you. You have my permission to use my questions from my interview guide. I would love to discuss my study and yours in more depth. [REDACTED]

[REDACTED] Denise

Confidentiality Notice:

This e-mail message, including any attachments, is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited. If you are not the intended recipient, please contact the sender by reply e-mail and destroy all copies of the original message.

APPENDIX C. QUANTITATIVE INSTRUMENTS

C.1. Adjunct Faculty Identity Salience Survey (AFISS)

Demographic Questions

1. What is your gender?
 - Male,
 - Female,
 - Prefer not to answer

2. What is your age?
 - Add a drop-down menu for age
 - Prefer not to answer

3. How would you identify your race/ethnic background?
 - American Indian or Alaska native
 - Asian
 - Black or African American
 - Hispanic
 - Native Hawaiian or other Pacific Islander
 - White
 - Two or more races
 - Race/Ethnicity unknown
 - Prefer not to answer

4. How many years have you worked as a registered nurse (excluding teaching)?
 - Add a drop-down menu for years worked
 - Prefer not to answer

5. How many years have you worked as an adjunct nurse faculty?
 - Add a drop-down menu for years worked
 - Prefer not to answer

6. Please indicate the highest educational degree you have obtained:
 - Bachelors not in nursing
 - Bachelors in nursing
 - Masters not in nursing
 - Masters in nursing
 - Doctorate not in nursing
 - Doctorate in nursing
 - Other: Explain _____
 - Prefer not to answer

7. When was the last time you participated in professional development related to your job as an adjunct?
 - Less than one year

- Between 1-2 years ago
 - More than 2 years, but less than 5 years ago
 - I have never participated in professional development
 - Prefer not to answer
8. In the past two years, please indicate the number of courses or seminars in professional development education you have participated in.
- I have never participated in professional development
 - Between 1-2
 - Between 3-5
 - More than 5
 - I prefer not to answer
9. Please indicate the type of educational institution where you adjunct teach.
- Community college
 - Hospital-affiliated nursing school (not-for-profit)
 - Private four year college offering nursing education (not-for-profit)
 - Public four year college offering nursing education (not-for-profit)
 - For-profit college offering nursing education
 - Other
 - Prefer not to answer

Commitment Questions

The below survey questions adapted from (Davis, 1992; Marsden, Kalleberg, & Cook, 1993).

Please rate your level of agreement with the following statements about your role as an adjunct nursing faculty:

1 = Does not apply, 2 = Strongly disagree, 3 = Disagree,
4 = Agree, 5 = Strongly agree

- | | | | | | |
|---|---|---|---|---|---|
| 1. I am willing to work harder than I have to in order to help this organization succeed. | 1 | 2 | 3 | 4 | 5 |
| 2. I feel very little loyalty to this organization. | 1 | 2 | 3 | 4 | 5 |
| 3. I would take almost any job to keep working for this organization. | 1 | 2 | 3 | 4 | 5 |
| 4. I find that my values and the organization's values are similar. | 1 | 2 | 3 | 4 | 5 |
| 5. I am proud to be working for this organization. | 1 | 2 | 3 | 4 | 5 |
| 6. I would turn down another job for more pay in order to stay with this organization. | 1 | 2 | 3 | 4 | 5 |

Salience Questions

The survey questions below are adapted from Stryker and Serpe (1980)

7. Suppose you are meeting someone for the first time and want to say something about yourself to help the person get to know you. If you were limited in the number of terms you could use

- to describe your job, which of the following would be your first, second, and third choice?
 _____ adjunct, _____ nurse, _____ other
8. Suppose you have two opportunities for job openings, one a part-time staff nurse and the other an adjunct instructor. With all factors being equal (e.g. pay, benefits, etc.) rank the position you would accept first. _____ adjunct, _____ nurse, _____ other

Satisfaction as an Adjunct Nurse Instructor

Please rate your level of agreement with the following statements about your role as an adjunct nursing faculty:

The below survey questions adapted from Kuchera (1987)

1 = Does not apply, 2 = Very dissatisfied, 3 = Dissatisfied,
 4 = Satisfied, 5 = Very satisfied

- | | | | | | |
|--|---|---|---|---|---|
| 9. Fulfillment that comes from the adjunct faculty role. | 1 | 2 | 3 | 4 | 5 |
| 10. Working hours. | 1 | 2 | 3 | 4 | 5 |
| 11. Opportunity for involvement in curriculum planning | 1 | 2 | 3 | 4 | 5 |
| 12. Working environment. | 1 | 2 | 3 | 4 | 5 |
| 13. Opportunity for participation in college governance. | 1 | 2 | 3 | 4 | 5 |
| 14. Opportunity for participation in college social events. | 1 | 2 | 3 | 4 | 5 |
| 15. Salary. | 1 | 2 | 3 | 4 | 5 |
| 16. Fringe benefits. | 1 | 2 | 3 | 4 | 5 |
| 17. Office space. | 1 | 2 | 3 | 4 | 5 |
| 18. Use of college equipment (e.g. copy machine, computer). | 1 | 2 | 3 | 4 | 5 |
| 19. Opportunity for participation in staff meetings. | 1 | 2 | 3 | 4 | 5 |
| 20. Opportunity for participation in professional development. | 1 | 2 | 3 | 4 | 5 |
| 21. Time spent in student advising. | 1 | 2 | 3 | 4 | 5 |

Satisfaction as a Nurse

Please rate your level of agreement with the following statements about your role as a nurse:

The below survey questions adapted from Kuchera (1986)

1 = Does not apply, 2 = Very dissatisfied, 3 = Dissatisfied,
 4 = Satisfied, 5 = Very satisfied

- | | | | | | |
|--|---|---|---|---|---|
| 22. Fulfillment that comes from nursing role. | 1 | 2 | 3 | 4 | 5 |
| 23. Working hours. | 1 | 2 | 3 | 4 | 5 |
| 24. Opportunity for involvement in planning of your work. | 1 | 2 | 3 | 4 | 5 |
| 25. Working environment. | 1 | 2 | 3 | 4 | 5 |
| 26. Opportunity for participation in management of your unit. | 1 | 2 | 3 | 4 | 5 |
| 27. Opportunity for participation in social events. | 1 | 2 | 3 | 4 | 5 |
| 28. Salary. | 1 | 2 | 3 | 4 | 5 |
| 29. Fringe benefits. | 1 | 2 | 3 | 4 | 5 |
| 30. Office space. | 1 | 2 | 3 | 4 | 5 |
| 31. Use of company equipment (e.g. copy machine, computer). | 1 | 2 | 3 | 4 | 5 |
| 32. Opportunity for participation in staff meetings. | 1 | 2 | 3 | 4 | 5 |
| 33. Opportunity for participating in professional development. | 1 | 2 | 3 | 4 | 5 |

Factors Influencing Becoming an Adjunct Nursing Instructor

Please rate your level of agreement with the following statements about your role as an adjunct nursing faculty:

The below survey questions adapted from Kelly (2003). Permission from the author was granted to use these interview questions (Appendix B.2).

1 = Does not apply, 2 = Strongly disagree, 3 = Disagree,
4 = Agree, 5 = Strongly agree

- | | | | | | |
|---|---|---|---|---|---|
| 34. This position is a career advancement. | 1 | 2 | 3 | 4 | 5 |
| 35. The college/academic, intellectual climate appeals to me. | 1 | 2 | 3 | 4 | 5 |
| 36. This position is an opportunity for my professional growth. | 1 | 2 | 3 | 4 | 5 |
| 37. Prestige of teaching nursing is greater than that of other specialties. | 1 | 2 | 3 | 4 | 5 |
| 38. I enjoy working with students. | 1 | 2 | 3 | 4 | 5 |
| 39. This position requires that I use my own time for preparation. | 1 | 2 | 3 | 4 | 5 |
| 40. This position has opportunities for career development. | 1 | 2 | 3 | 4 | 5 |
| 41. I exert a great effort to communicate with staff to ensure a positive learning environment for my students. | 1 | 2 | 3 | 4 | 5 |
| 42. It is important that I know my individual student's learning needs. | 1 | 2 | 3 | 4 | 5 |

Professional Development Questions

1 = Does not apply, 2 = Strongly disagree, 3 = Disagree,
4 = Agree, 5 = Strongly agree

Please rate your level of agreement with the following statements about how the following activities clarified your role as an adjunct nursing faculty:

- | | | | | | |
|---|---|---|---|---|---|
| 43. Orientation programs. | 1 | 2 | 3 | 4 | 5 |
| 44. Job description. | 1 | 2 | 3 | 4 | 5 |
| 45. Clinical faculty evaluation criteria. | 1 | 2 | 3 | 4 | 5 |
| 46. Peer mentoring. | 1 | 2 | 3 | 4 | 5 |

Please indicate how helpful each professional development topic was for you to carry out your adjunct nursing responsibilities.

1 = Does not apply, 2 = Not helpful, 3 = Somewhat helpful,
4 = Helpful, 5 = Extremely helpful

- | | | | | | |
|--|---|---|---|---|---|
| 47. Teaching methods. | 1 | 2 | 3 | 4 | 5 |
| 48. Learning theories. | 1 | 2 | 3 | 4 | 5 |
| 49. Clinical teaching methods. | 1 | 2 | 3 | 4 | 5 |
| 50. Curriculum. | 1 | 2 | 3 | 4 | 5 |
| 51. Evaluation methods/test construction and analysis. | 1 | 2 | 3 | 4 | 5 |
| 52. Clinical teaching practicum. | 1 | 2 | 3 | 4 | 5 |
| 53. Any other professional development (specify). | 1 | 2 | 3 | 4 | 5 |

Time spent as an adjunct nurse questions

The survey questions below are adapted from Fields (2002).

Please rate your level of agreement with the following statements about your role as an adjunct nursing faculty:

1 = Does not apply, 2 = Strongly disagree, 3 = Disagree,
4 = Agree, 5 = Strongly agree

- | | | | | | |
|---|---|---|---|---|---|
| 54. I know exactly of what is expect of me. | 1 | 2 | 3 | 4 | 5 |
| 55. I know that I have divided my time properly. | 1 | 2 | 3 | 4 | 5 |
| 56. Explanation is clear of what has to be done. | 1 | 2 | 3 | 4 | 5 |
| 57. I feel certain about how much authority I have. | 1 | 2 | 3 | 4 | 5 |
| 58. I know what my responsibilities are. | 1 | 2 | 3 | 4 | 5 |

The below survey questions adapted from Schaufeli and Bakker (2003). The Utrecht Work Engagement Scale © 2003 is free for use for non-commercial scientific research. The commercial and/or non-scientific use is prohibited unless previous written permission is granted by the authors.

1 = Does not apply, 2 = Never, 3 = Rarely, 4 = Sometimes, 5 = Always.

- | | | | | | |
|--|---|---|---|---|---|
| 59. At my job, I feel bursting with energy. | 1 | 2 | 3 | 4 | 5 |
| 60. At my job, I feel strong and vigorous. | 1 | 2 | 3 | 4 | 5 |
| 61. I am enthusiastic about my job. | 1 | 2 | 3 | 4 | 5 |
| 62. My job inspires me. | 1 | 2 | 3 | 4 | 5 |
| 63. When I get up in the morning, I feel like going to work. | 1 | 2 | 3 | 4 | 5 |
| 64. I feel happy when I am working intensely. | 1 | 2 | 3 | 4 | 5 |
| 65. I am proud of the work I do. | 1 | 2 | 3 | 4 | 5 |
| 66. I am immersed in my work. | 1 | 2 | 3 | 4 | 5 |
| 67. I get carried away when I'm working. | 1 | 2 | 3 | 4 | 5 |

Open-ended question

68. Please share any other experiences related to how participating in professional development influenced your professional identity.

C.2. Permission from authors

From: [REDACTED]
Subject: RE: Question about your dissertation
Date: June 18, 2014 10:29:23 AM CDT
To: jseliger @iastate.edu

1 Attachment, 37 KB

Save ▼

Quick Look

Dear Jared,

I would be more than happy to grant you permission to use my survey. There is a DNP student who is using the complete instrument in her research and is expected to graduate in Aug 2014 so there may be more data and stats coming forward this year.

I would also be willing to provide you with the "word doc" of the instrument if that would be helpful to you.

From you letter you will be developing your own survey for interview. I would be more than willing to help you in any way.

I have attach an agreement I have used in the past granting permission. Look it over and see if it meets your needs and let me know. We can then Fax copies with signatures.

Best wishes for success in your program and your research.

Sincerely,

Sister Ruth [REDACTED]



APPENDIX D. CORRESPONDENCE

D.1. Recruitment email for professional development coordinators

<Date>

Dear <insert participants name here>

My name is Jared Seliger, a Ph.D. student in Educational Leadership and Policy Studies at Iowa State University in Ames, Iowa. I am conducting a research study for my dissertation on how professional development activities affect professional identity for nursing adjunct faculty members.

For this research, I am conducting interviews and surveys to gather data. I am contacting you to request contact information so I can get in touch with your adjuncts to see if they will be willing to participate in this study.

My research design is to send the surveys to as many adjunct nursing faculty that are employed at an AHSEC institution as possible. I am requesting that you provide me with *just the email addresses* of all of your adjuncts. I do not request any other additional information.

For my interview participant selection, I have set specific criteria for the interviews. If you know that one or two of your adjuncts meet the following criteria, please supply me with their name(s) and email address(es). The criteria are:

- Five (5) or more years working as a registered nurse (does not include teaching)
- Minimum of one (1) year (two (2) semesters) teaching as an adjunct nursing faculty member.
- No formal educational background in teaching (e.g. you did not take education courses in college).
- No formal teaching experience prior to your adjunct position
- Participation in at least one (1) professional development program (e.g. orientation, seminar, meeting, etc.) for your position as an adjunct.

The confidentiality for all participants of this research study will be protected. When reporting the results of this research, the information gained from the surveys and interviews will not contain any information that a reader could identify the participants or the institutions they work at. All participants will be provided with an information sheet that describes their rights as a research participant.

I appreciate your time and considering this request. If you wish to receive more information about this research project prior to making your decision, please do not hesitate to contact me with your questions.

Sincerely
Jared D. Seliger

D.2. Survey participation email

<Date>

Dear <insert participants name here>

My name is Jared Seliger, a Ph.D. student in Educational Leadership and Policy Studies at Iowa State University in Ames, Iowa. I am conducting a research study for my dissertation on how professional development activities affect professional identity for nursing adjunct faculty members.

For this research, I am conducting surveys to gather data. I am contacting you to serve as a participant in this research. If you choose to participate in this research, please click the link below containing the survey. It is anticipated that it will take you 30 minutes to complete the survey. You will not be compensated for your time in participating.

If you choose to participate in this research, your confidentiality will be protected. When you submit your survey responses, the results will be sent directly to myself and they will not contain any identifying information (i.e. name or email address). You will also be asked to accept an informed consent form prior to participating in the survey. I have attached a copy of the consent form for your information.

If you agree to participate in this research, please complete the survey at your earliest convenience. The deadline I have set to end the survey is Nov 15, 2014 at 11:59pm. If you do not wish to participate, no further action is required on your part.

I appreciate your time and considering this request. If you wish to receive more information about this research project prior to making your decision, please do not hesitate to let me know.

Link to survey: <ADD LINK HERE>

Sincerely

Jared D. Seliger
jseliger@iastate.edu
ph (319)-[REDACTED]

Enclosure

D.3. Interview participation email

<Date>

Dear <insert participants name here>

My name is Jared Seliger, a Ph.D. student in Educational Leadership and Policy Studies at Iowa State University in Ames, Iowa. I am conducting a research study for my dissertation on how professional development activities affect professional identity for nursing adjunct faculty members.

For this research, I am conducting interviews to gather data. I am contacting you to serve as a participant in this research. For my participant selection, I have set specific criteria for the interviews. If you meet the following criteria, you are eligible to participate:

- Five (5) or more years working as a registered nurse (does not include teaching)
- Minimum of one (1) year (two (2) semesters) teaching as an adjunct nursing faculty member.
- No formal educational background in teaching (e.g. you did not take education courses in college).
- No formal teaching experience prior to your adjunct position
- Participation in at least one (1) professional development program (e.g. orientation, seminar, meeting, etc.) for your position as an adjunct.

If you choose to participate in this research, I will be contacting you to setup a time to conduct two interviews. The interviews are anticipated to last for approximately 45 minutes each. You will not be compensated for your time in participating.

If you choose to participate in this research, your confidentiality will be protected. When reporting the results of this research, the information gained from your interview will not contain any information that a reader could identify you as a participant. You will be provided with an information sheet that describes your rights as a research participant. I have attached a copy of the form for you.

If you agree to participate in this research, please respond to this email and indicate your willingness to participate. If you do not wish to participate, no further action is required on your part.

I appreciate your time and considering this request. If you wish to receive more information about this research project prior to making your decision, please do not hesitate to let me know.

Sincerely

Jared D. Seliger
Enclosure

D.4. Participant information document (interview).

Title of the study: Using Identity Theory to determine the role of professional development in adjunct nursing faculty identity salience

Investigators: Jared D. Seliger

This form describes a research project. It has information to help you decide whether or not you wish to participate. Research studies include only people who choose to take part—your participation is completely voluntary. Please discuss any questions you have about the study or about this form with the project staff before deciding to participate.

Introduction

The purpose of this study is to gain insight into how professional development activities affect the professional identities of nursing adjunct faculty members.

You are being invited to participate in this study because you are working as a nursing adjunct faculty member in a school of nursing. You should not participate if you cannot critically reflect on how your professional development experiences have affected your professional identity.

Description of Procedures

If you agree to participate, you will be asked to participate in two (2) interviews and answer approximately thirty (30) questions related to your experience with professional development program and your professional identity. Your participation will last for approximately forty-five (45) minutes for each interview. The interviews (audio only) will be electronically recorded for transcription purposes. After the interviews and transcription is complete, a copy of the transcript will be send to you electronically so you can verify its accuracy and correct any information you believe is incorrect. After you accept the transcription as being accurate, you will not be contacted again for any further information for this study.

Risks or Discomforts

While participating in this study you should not experience any risks or discomforts. Although minimal, a possible risk associated with this study is the possibility that someone outside of the study could link your responses back to you. Steps will be taken to protect your anonymity and confidentiality (please refer to the “Confidentiality” section on this form. Another possible risk is you might have an emotional response to some of the questions. You have the right to decline answering any questions you feel are too sensitive.

Benefits

If you decide to participate in this study, there may be no direct benefit to you. It is hoped that the information gained in this study will benefit nursing programs and administrators in the future by using the information gathered in this study to create awareness about how professional development programs have an effect on the professional identity of adjunct faculty.

Costs and Compensation

You will not have any costs from participating in this study. You will not be compensated for participating in this study.

Participant Rights

Participating in this study is completely voluntary. You may choose not to take part in the study or to stop participating at any time, for any reason, without penalty or negative consequences. While participating in the interview you can skip any questions that you do not wish to answer without any penalty.

It is possible that you did not have a positive experience with how professional development affected your professional identity. You will be encouraged to share those experiences to better understand the cause of that relationship. However, if you feel uncomfortable sharing you may choose not to participate or end the interview at any time. The principal investigator will ask no further questions.

If you have any questions *about the rights of research subjects or research-related injury*, please contact the IRB Administrator, (515) 294-4566, IRB@iastate.edu, or Director, (515) 294-3115, Office for Responsible Research, Iowa State University, Ames, Iowa 50011.

Confidentiality

Records identifying participants will be kept confidential to the extent permitted by applicable laws and regulations and will not be made publicly available. However, federal government regulatory agencies (e.g. NIH), auditing departments of Iowa State University, and the Institutional Review Board (a committee that reviews and approves human subject research studies) may inspect and/or copy study records for quality assurance and data analysis. These records may contain private information.

To ensure confidentiality to the extent permitted by law, the following measures will be taken:

- Only the principal investigator, investigator's faculty advisor, and a qualified transcriptionist will have access to the raw data.
- When the data is analyzed, an identifying coding system will be used removing your identifying information.
- After the raw data has been transcribed, the recorded audio files will be destroyed.
- Any analyzed data used in in the final report or findings will not have any identifying information of any participants in this study.

Questions

You are encouraged to ask questions at any time during this study. For further information *about the study*, contact:

Principal Investigator:

Jared Seliger

Email: jseliger@iastate.edu

Phone: (319) [REDACTED]

Iowa State Faculty Advisor:

Dr. Janice Friedel

Email: jfriedel@iastate.edu

Phone: (515) [REDACTED]

D.5. Participant information document (survey).

Title of Study: Using Identity Theory to determine the role of professional development in adjunct nursing faculty identity salience

Investigators: Jared D. Seliger

This form describes a research project. It has information to help you decide whether or not you wish to participate. Research studies include only people who choose to take part—your participation is completely voluntary. Please discuss any questions you have about the study or about this form with the project staff before deciding to participate.

Introduction

The purpose of this study is to gain insight into how professional development activities affect the professional identities of nursing adjunct faculty members.

You are being invited to participate in this study because you are working as a nursing adjunct faculty member in a school of nursing. You should not participate if you cannot critically reflect on how your professional development experiences have affected your professional identity.

Description of Procedures

If you agree to participate, you will be asked to complete one (1) online survey and answer sixty-eight (68) items related to your experience of how professional development affected your professional identity. Your participation will last for approximately thirty (30) minutes. The items being asked are either a multiple choice where you select the best answer that relates to the question or a check box answer where you select all answers relevant to the question. Each item has the option for you to select “Prefer not to answer.” After you complete this one (1) survey, you will not be contacted again for any further information for this study.

Risks or Discomforts

While participating in this study you should not experience any risks or discomforts. Although minimal, a possible risk associated with this study is the possibility that someone outside of the study could link your responses back to you. Steps will be taken to protect your anonymity and confidentiality (please refer to the “Confidentiality” section on this form).

Benefits

If you decide to participate in this study, there may be no direct benefit to you. It is hoped that the information gained in this study will benefit nursing programs and administrators in the future by using the information gathered in this study to create awareness about how professional development programs have an effect on the professional identity of adjunct faculty.

Costs and Compensation

You will not have any costs associated with participation other than the time it takes to complete the survey. You will not be compensated for participating in this study.

Participant Rights

Participating in this study is completely voluntary. You may choose not to take part in the study or to stop participating at any time, for any reason, without penalty or negative consequences. While participating in the survey, you can skip any questions that you do not wish to answer by selecting

“Prefer not to answer” which will allow you to move to the next question. Additionally, you also have the right to end the survey at any time and not submit any information.

It is possible that you did not have a positive experience with how professional development affected your professional identity. You will be encouraged to share those experiences to better understand the cause of that relationship. However, if you feel uncomfortable sharing you may choose end the survey at any time. The principal investigator will not contact you further.

If you have any questions *about the rights of research subjects or research-related injury*, please contact the IRB Administrator, (515) 294-4566, IRB@iastate.edu, or Director, (515) 294-3115, Office for Responsible Research, Iowa State University, Ames, Iowa 50011.

Confidentiality

Records identifying participants will be kept confidential to the extent permitted by applicable laws and regulations and will not be made publicly available. However, federal government regulatory agencies (e.g. NIH), auditing departments of Iowa State University, and the Institutional Review Board (a committee that reviews and approves human subject research studies) may inspect and/or copy study records for quality assurance and data analysis. These records may contain private information.

To ensure confidentiality to the extent permitted by law, the following measures will be taken:

- When submitting the survey, you will not be asked for your name, email address, or any other identifying information.
- Only the principal investigator and the investigator’s faculty advisor will have access to the raw data.
- When the data is analyzed, an identifying coding system will be used and statistical measures of the results of all the survey participants will be used.
- Any analyzed data used in in the final report or findings will not have any identifying information of any participants in this study.
- The survey is being delivered by Qualtrics, an online survey instrument maintained by Iowa State University.
- All data will be stored on the principal investigator’s personal computer that is encrypted and password protected.

Questions

You are encouraged to ask questions at any time during this study. For further information *about the study*, contact:

Principal Investigator:

Jared Seliger

Email: jseliger@iastate.edu

Phone: (319) [REDACTED]

Iowa State Faculty Advisor:

Dr. Janice Friedel

Email: jfriedel@iastate.edu

Phone: (515) [REDACTED]

Consent and Authorization Provisions

By clicking “yes I agree to participate” indicates that you voluntarily agree to participate in this study, that the study has been explained to you, that you have been given the time to read the document, and that your questions have been satisfactorily answered. If you click “no I do not wish to participate” the survey will end and you will not be required to proceed.

Please click “print” now to print and retain a copy of this form for your records.

At any point in the future you need a duplicate copy of the form, please contact the principal investigator using the contact information above.

Yes I agree to participate

No I do not wish to participate

APPENDIX E. AFISS OPEN-ENDED COMMENTS

Often I gain more from the interaction with other faculty at professional development seminars, etc, than I do with the actual formal presentations. I get inspired from the enthusiasm of other faculty.

I enjoy the academy for teaching excellence that the college provides.

I would like to see certification as a way to develop professionally. Adjunct faculty need more assistance to afford continued professional development.

I am in an interesting position where I currently work as adjunct faculty. For more than 6 years I have worked in the skills lab as a lab instructor. For almost 4 years I have worked as a clinical instructor. I also work part time at a hospital where some of the clinicals are held. I have to balance between three different roles, sometimes in the same day: Staff as skill lab instructor, faculty as clinical instructor, and staff nurse while working at the hospital. The school where I work is not able to provide me with enough hours to be 'full time', so I have to have another job to 'survive.' Most of the professional development activities that my school offers occur on Saturday mornings - when I have to work at the hospital as my school job does not allow for working during the week. I think the reality of being a staff nurse does not fit with the cookie cutter faculty development, which may work for business or other adjunct faculty who may be more likely to have a weekend off.

The respect I receive from my hospital peers in that I am preparing future nurses for the profession they love is very rewarding to me.

My master's degree is a Family Nurse Practitioner degree. Beyond working as a RN for 5 years, I worked as a CNP for over 3 years. I have not taken any college courses geared toward education and have not fully identified myself as a nurse educator.

I would like more opportunities for professional development in clinical education. I would like to learn some new ideas and teaching approaches to help my students get the most out of their short clinical experience.

This college is wonderful, but had very little in the way of adjunct training. My ability to function as a successful adjunct was due to my MSN education and many years of experience as a nurse and educational mentor.

There is little offered and then the total cost is the adjunct faculty member's responsibility. We have no benefits whatsoever. That leads to several members asking themselves, 'What am I doing here? Am I so unimportant that I deserve NO benefits?' It is hurtful at times. I feel that we have such an important role in the students' education and ability to perform skills. I take it very personally. I give my very best and I guess that I feel that it would mean a lot if something was done to recognize that. I appreciate my boss and her knowledge. I guess I just don't want us to be forgotten.

Sadly missing.....

As an adjunct, very little professional development is given as adjuncts are used for clinical rotations only and are paid by the hour. No pay is provided for all the work one needs to do in terms of grading papers and weekly evaluations of the 8 students [on 81criteria]. I would say that professional development has not shaped my identity as an adjunct at all. However, prof development HAS shaped my identity as a Clinical Nurse Educator at my local hospital. This is the job I have done for the past 35 years. My adjunct job has been 'on the side.'

I have not had any education about being an adjunct faculty. Any thing I have learned it has been self-taught, the University is very bad about communication and support.

I have learned and developed in my role as an adjunct over the years of practice. The autonomy provided with this position has been a very positive part of my professional development. The opportunity to guide, share and inspire student development/learning has been very unique.